



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

July 19, 2021

Elsie Chaffin  
Arden Courts of Sterling Heights  
11095 14 Mile Rd  
Sterling Heights, MI 48312

RE: License #: AH500293047  
**Arden Courts of Sterling Heights**  
**11095 14 Mile Rd**  
**Sterling Heights, MI 48312**

Dear Ms. Chaffin:

Attached is the Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and rules. Your license is renewed (4/10/21 – 4/9/22). It is valid only at your present address and is nontransferable.

Please review the enclosed documentation for accuracy and contact me with any questions. In the event that I am not available, and you need to speak to someone immediately, please feel free to contact the local office at (248) 975-5053.

Sincerely,

A handwritten signature in cursive script that reads "Brender Howard".

Brender Howard, Licensing Staff  
Bureau of Community and Health Systems  
4th Floor, Suite 4B  
51111 Woodward Avenue  
Pontiac, MI 48342  
(313) 268-1788

enclosure

**MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
BUREAU OF COMMUNITY AND HEALTH SYSTEMS  
RENEWAL INSPECTION REPORT**

**I. IDENTIFYING INFORMATION**

**License #:** AH500293047

**Licensee Name:** Arden Courts of Sterling Heights MI, LLC

**Licensee Address:** 16th Floor  
333 N. Summit St.  
Toledo, OH 43604

**Licensee Telephone #:** (419) 252-5500

**Authorized Representative/Administrator:** Elsie Chaffin

**Name of Facility:** Arden Courts of Sterling Heights

**Facility Address:** 11095 14 Mile Rd  
Sterling Heights, MI 48312

**Facility Telephone #:** (586) 795-0998

**Original Issuance Date:** 06/09/2009

**Capacity:** 56

**Program Type:** AGED  
ALZHEIMERS

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 7/16/21

Date of Bureau of Fire Services Inspection if applicable: 2/22/21, 7/16/21

Inspection Type:  Interview and Observation  Worksheet  
 Combination

Date of Exit Conference: 7/16/21

No. of staff interviewed and/or observed 16

No. of residents interviewed and/or observed 8

No. of others interviewed 1 Role Residents' family member

- Medication pass / simulated pass observed? Yes  No  If no, explain.
- Medication(s) and medication records(s) reviewed? Yes  No  If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes  No  If no, explain. No residents' funds held
- Meal preparation / service observed? Yes  No  If no, explain.
- Fire drills reviewed? Yes  No  If no, explain.  
Interviewed staff on the policy and procedures
- Water temperatures checked? Yes  No  If no, explain.
- Incident report follow-up? Yes  IR date/s: N/A
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s: No CAPS for this home.
- Number of excluded employees followed up? N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

The facility is in compliance with all applicable rules and statutes.

### IV. RECOMMENDATION

Renewal of the license is recommended.

*Brenden D. Howard*

7/19/21

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Licensing Consultant

Date