



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

ORLENE HAWKS  
DIRECTOR

June 1, 2022

Kimberlee Waddell  
NRMI LLC  
313 Congress St  
Boston, MA 02210

RE: Application #: AL630412118  
**North Ridge**  
**25911 Middlebelt**  
**Farmington Hills, MI 48336**

Dear Ms. Waddell:

Attached is the Original Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, a temporary license with a maximum capacity of 20 is issued.

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 contact the local office at (248) 975-5053.

Sincerely,

A handwritten signature in cursive script that reads "Cindy Berry".

Cindy Berry, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Place, Ste 9-100  
3026 West Grand Blvd  
Detroit, MI 48202  
(248) 860-4475

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AL630412118
<b>Licensee Name:</b>	NRMI LLC
<b>Licensee Address:</b>	313 Congress St Boston, MA 02210
<b>Licensee Telephone #:</b>	(617) 790-4800
<b>Licensee Designee:</b>	Kimberlee Waddell
<b>Administrator:</b>	Tammy Zentz
<b>Name of Facility:</b>	North Ridge
<b>Facility Address:</b>	25911 Middlebelt Farmington Hills, MI 48336
<b>Facility Telephone #:</b>	(248) 516-1370
<b>Application Date:</b>	03/23/2022
<b>Capacity:</b>	20
<b>Program Type:</b>	PHYSICALLY HANDICAPPED TRAUMATICALLY BRAIN INJURED

## II. METHODOLOGY

03/23/2022	On-Line Enrollment
04/04/2022	Contact - Document Received AFC 100
04/12/2022	Application Incomplete Letter Sent
05/20/2022	Contact - Document Received Received requested documents
05/20/2022	Application Complete/On-site Needed
05/23/2022	Inspection Completed On-site Onsite inspection at the facility was conducted on 12/06/2021 (AL630407883) - Change of ownership
05/23/2022	Inspection Completed BCAL-Full Compliance

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

### A. Physical Description of Facility

This evaluation is based upon requirements of P.A. 218 of the Michigan Public Acts of 1979, as amended, and the Administrative Rules governing operation of large group adult foster care facilities with an approved capacity of 13-20 residents, licensed or proposed to be licensed after 5/24/1994.

North Ridge is located at 25911 Middlebelt in Farmington Hills, MI and is owned by Monroe One LLC c/o Rainbow Rehab Centers Inc. Proof of ownership and permission to inspect/occupy is contained in the facility file.

North Ridge is a large single story, barrier free/wheelchair accessible facility. There is a rehabilitation center connected to the facility that is newly constructed. The facility is not part of the licensure but will serve the residents of North Ridge and South Ridge with their rehabilitation needs. Upon entrance of the facility, there is a large foyer that has been newly renovated. There are 20 bedrooms with individual bathrooms in each room, a kitchen that is shared with an adjoining licensed 20 bed facility (South Ridge), multipurpose room, conference room, laundry room, dining room, and a deck just outside the dining room. The heating and cooling system is contained on the roof of the facility and was inspected and approved on 7/22/2020 by Day & Night Heating and Cooling Company. On 6/21/2021 the Bureau of Fire Services conducted an inspection and issued an "A" rating. The facility is equipped with an interconnected, hardwired smoke detection system with battery back-up which was installed by a licensed electrician and is fully operational. There are fire extinguishers located throughout the

building. On 6/08/2021 the Oakland County Health Division conducted an environmental health inspection and issued an “A” rating.

Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
200	13'1" x 28	366 (minus 128 sq ft for bathroom)	1
201	13'4" x 20'3"	272 (minus 128 sq ft for bathroom)	1
202	13'4" x 20'3"	272 (minus 128 sq ft for bathroom)	1
203	13'4" x 20'3"	272 (minus 128 sq ft for bathroom)	1
204	13'4" x 20'3"	272 (minus 128 sq ft for bathroom)	1
205	13'4" x 20'3"	272 (minus 128 sq ft for bathroom)	1
206	13'4" x 20'3"	272 (minus 128 sq ft for bathroom)	1
207	13'4" x 20'3"	272 (minus 128 sq ft for bathroom)	1
208	13'4" x 20'3"	272 (minus 128 sq ft for bathroom)	1
209	11'8" X 15'6"	184 (minus 128 sq ft for bathroom)	1
210	13'4" x 20'3"	272 (minus 128 sq ft for bathroom)	1
211	13'4" x 20'3"	272 (minus 128 sq ft for bathroom)	1
212	13'4" x 20'3"	272 (minus 128 sq ft for bathroom)	1

213	13'4" x 20'3"	272 (minus 128 sq ft for bathroom)	1
214	13'4" x 20'3"	272 (minus 128 sq ft for bathroom)	1
215	13'4" x 20'3"	272 (minus 128 sq ft for bathroom)	1
216	13'4" x 20'3"	272 (minus 128 sq ft for bathroom)	1
217	13'4" x 20'3"	272 (minus 128 sq ft for bathroom)	1
218	13'4" x 20'3"	272 (minus 128 sq ft for bathroom)	1
219	13'4" x 20'3"	272 (minus 128 sq ft for bathroom)	1

**Total capacity: 20**

The indoor living and dining areas measure a total of 757 square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, this facility can accommodate 20 residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

## **B. Program Description**

Admission and discharge policies, program statement, refund policy, personnel policies, and standard procedures for the facility were reviewed and accepted as written. The applicant intends to provide 24-hour supervision, protection, and personal care to twenty (20) male or female adults whose diagnosis is physically handicapped or traumatically brain injured (TBI), in the least restrictive environment possible. The program will include social interaction skills, personal hygiene, personal adjustment skills, and public safety skills. A personal behavior support plan will be designed and implemented for each resident's rehabilitative, social, behavioral, and developmental needs.

If required, behavioral intervention and crisis intervention programs will be developed as identified in the assessment plan. These programs shall be implemented only by trained staff, and only with the prior approval of the resident, guardian, and the

responsible agency.

The licensee will provide all transportation for program and medical needs. The facility will make provision for a variety of leisure and recreational equipment. It is the intent of this facility to utilize local community resources including public schools, libraries, local museums, shopping centers, and local parks.

### **C. Applicant and Administrator Qualifications**

The applicant is NRMI, LLC, which is a "Foreign Limited Liability Company", was established in Delaware, on 2/01/2016. The applicant submitted a financial statement and established an annual budget projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

The Board of Directors of NRMI LLC has submitted documentation appointing Kimberlee Waddell as Licensee Designee and Tammy Zentz as the Administrator of the facility.

A licensing record clearance request was completed with no lien convictions recorded for Ms. Waddell or Ms. Zentz. Both Ms. Waddell and Ms. Zentz submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results.

Ms. Waddell and Ms. Zentz have provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules.

Ms. Waddell has been the licensee designee for 35 adult foster care facilities and Compliance and Regulatory Affairs Director at Resilient Life Care, LLC (formerly known as Rainbow Rehabilitation Centers) since 1995. Ms. Waddell earned a Bachelor of Science from Eastern Michigan University and maintains certifications as a brain injury specialist, behavior management instructor, CPR and First Aid instructor, as well as handle with care trainer.

Ms. Zentz has a high school diploma and attended the Business Management Program at the National Education Center in 1992 and is a certified brain injury specialist. Ms. Zentz began working for Rainbow Rehabilitation Centers in 2005 and has held the positions of Rehabilitation Assistant and Residential Program Manager. She currently works as the Interim Divisional Director for the Neuro Rehab Center as well as a Program Manager at Rainbow U for Resilient Life Care, LLC (formerly known as Rainbow Rehabilitation Centers).

The staffing pattern for the original license of this 20 - bed facility is adequate and includes a minimum of 7 staff during the day shift and 6 staff during the afternoon and midnight shift. All staff shall be awake during sleeping hours.

NRMI, LLC acknowledges an understanding of the training and qualification requirements for direct care staff prior to each person working in the facility in that capacity or being considered as part of the staff to resident ratio.

NRMI, LLC acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, “direct access” to residents or the resident information or both. The licensing consultant provided technical assistance on the process for obtaining criminal record checks utilizing the Michigan Long Term Care Partnership website ([www.miltcpartnership.org](http://www.miltcpartnership.org)), MorphoTrust by Identogo (formerly Identix ®), and the related documents required to be maintained in each employee record to demonstrate compliance.

NRMI, LLC acknowledges an understanding of the administrative rules regarding medication procedures and that only those direct care staff that have received medication training and have been determined competent by the licensee, can administer medication to residents. In addition, NRMI, LLC has indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

NRMI, LLC acknowledges their responsibility to obtain all required documentation and signatures that are to be completed prior to each direct care staff or volunteer working with residents. In addition, NRMI, LLC acknowledges their responsibility to maintain a current employee record on file in the home for the licensee, administrator, and direct care staff or volunteer and the retention schedule for all the documents contained within each employee’s file.

NRMI, LLC acknowledges an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. NRMI, LLC indicated that it is their intent to achieve and maintain compliance with these requirements.

NRMI Care, LLC acknowledges an understanding of the administrative rules regarding the written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause. NRMI, LLC has indicated their intention to achieve and maintain compliance with the reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

NRMI, LLC acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply.

NRMI, LLC acknowledges their responsibility to obtain all the required forms and signatures that are to be completed prior to, or at the time of each resident’s admission to the home as well as the required forms and signatures to be completed for each resident on an annual basis. In addition, NRMI, LLC acknowledges its responsibility to maintain a current resident record on file in the home for each resident and the retention schedule for all the documents contained within each resident’s file.

NRMI, LLC acknowledges their responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

**D. Rule/Statutory Violations**

Compliance with the licensing act and administrative rules related to the physical plant has been determined. Compliance with administrative rules related to quality of care will be assessed during the temporary license period.

**IV. RECOMMENDATION**

I recommend issuance of a temporary license to this AFC adult large group home with a capacity of twenty (20).



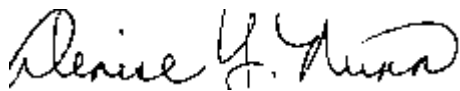
06/01/2022

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Cindy Berry  
Licensing Consultant

Date

Approved By:



06/01/2022

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Denise Y. Nunn  
Area Manager

Date