GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

February 3, 2026

Kimberlee Waddell
NRMI LLC
17199 N. Laurel Park Dr., Suite 424
Livonia, MI 48152

RE: License #: AS810412110
Investigation #: 2026A0122012
Crane Cove

Dear Kimberlee Waddell:

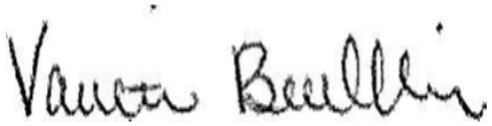
Attached is the Special Investigation Report for the above referenced facility. Due to the violations identified in the report, a written corrective action plan is required. The corrective action plan is due 15 days from the date of this letter and must include the following:

- How compliance with each rule will be achieved.
- Who is directly responsible for implementing the corrective action for each violation.
- Specific time frames for each violation as to when the correction will be completed or implemented.
- How continuing compliance will be maintained once compliance is achieved.
- The signature of the responsible party and a date.

If you desire technical assistance in addressing these issues, please feel free to contact me. In any event, the corrective action plan is due within 15 days. Failure to submit an acceptable corrective action plan will result in disciplinary action.

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 (517) 284-9720.

Sincerely,



Vanita C. Bouldin, Licensing Consultant
Bureau of Community and Health Systems
22 Center Street
Ypsilanti, MI 48198
(734) 395-4037

enclosure

MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
BUREAU OF COMMUNITY AND HEALTH SYSTEMS
SPECIAL INVESTIGATION REPORT

I. IDENTIFYING INFORMATION

License #:	AS810412110
Investigation #:	2026A0122012
Complaint Receipt Date:	01/22/2026
Investigation Initiation Date:	01/23/2026
Report Due Date:	02/21/2026
Licensee Name:	NRMI LLC
Licensee Address:	424 17199 N. Laurel Park Dr. Livonia, MI 48152
Licensee Telephone #:	(231) 893-1462
Administrator:	Kimberlee Waddell
Licensee Designee:	Kimberlee Waddell
Name of Facility:	Crane Cove
Facility Address:	7171 Crane Ypsilanti, MI 48197
Facility Telephone #:	(734) 528-9320
Original Issuance Date:	06/01/2022
License Status:	REGULAR
Effective Date:	12/01/2024
Expiration Date:	11/30/2026
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED

	MENTALLY ILL TRAUMATICALLY BRAIN INJURED

II. ALLEGATION(S)

	Violation Established?
On 01/18/2026, unexplained abdominal bruising was observed on Resident A.	Yes

III. METHODOLOGY

01/22/2026	Special Investigation Intake 2026A0122012
01/22/2026	APS Referral
01/23/2026	Special Investigation Initiated - On Site Conducted interview with Resident A. Completed Resident A's file review.
01/23/2026	Contact - Telephone call made Conducted interview with licensee designee, Kim Waddell. Requested Resident A's hospital after visit summary.
01/23/2026	Exit Conference Discussed findings with licensee designee, Kim Waddell.
01/26/2026	Contact – Telephone calls made Conducted interviews with Guardian A1 and staff members, Aseel Omar and Kisean Bryant.

ALLEGATION: On 01/18/2026, unexplained abdominal bruising was observed on Resident A.

INVESTIGATION: On 01/22/2026, our department, Bureau of Community Health Services – Adult Foster Care, received an anonymous complaint stating the following, Resident A was observed with unexplained bruising on his body. The bruising was described as, “multiple bilateral bruising on his abdomen. There are twelve lesions on the resident’s left side varying from 4-12 centimeters. The lesions are yellow greenish in color and redness. On the right side there are nine lesions that are yellow greenish in color varying from 5-10 centimeters. There are two

bruises on the resident's chest that are yellowish in color and measured at 2-3 centimeters. The bruising are in different stages of healing."

On 01/23/2026, I completed an onsite inspection and conducted an interview with Resident A. I observed Resident A in his room, sitting on his bed appropriately dressed. He had just completed a telephone call and agreed to speak with me. Resident A showed no signs of discomfort or distress.

I began my interview by asking Resident A general questions, his name, about his room décor, and about personal items observed in his room. I asked Resident A if he had any bruises or sores on his body, to which he showed me a circular bruise the size of a half-dollar on his right arm. When I asked Resident A how he obtained that bruise, he stated he got it at the hospital but couldn't tell me how he got it at the hospital. I asked Resident A about the staff at Crane Cove, if they assisted him and if he got along with everyone. Resident A replied yes to both questions. I asked Resident A if he had fallen or got into any fights with anyone recently, Resident A replied no to both questions.

On 01/23/2026, I conducted an interview with staff member, Hekmat Nasibeh. Ms. Nasibeh reported no knowledge of injury being documented on Resident A within his file but stated he had a recent hospital visitation to address kidney issues. I requested a copy of Resident A's after visit summary from his recent hospital visit.

I reviewed Resident A's file. He is diagnosed with a Traumatic Brain Injury, he is ambulatory and requires no assistance with walking/mobility, stair climbing and uses no assistive devices. He receives assistance from staff with eating, toileting, bathing, and personal hygiene tasks. Staff assistance is given by staff monitoring Resident A completing tasks, giving verbal redirection and physical assistance as needed. Resident A does not have issues with aggressive or self-injurious behaviors.

On 01/23/2026, I conducted an interview with licensee designee, Kim Waddell. Ms. Waddell confirmed that she knew about the bruising on Resident A's body. Per Ms. Waddell she had conducted an internal investigation and had determined what caused the bruising observed on Resident A's body. Ms. Waddell reported the following, on 01/21/2026 she interviewed Resident A, and he reported that staff member, Kisean Bryant was teaching him how to fight and they were "wrestling". Resident A demonstrated to Ms. Waddell that happened between him and Mr. Bryant, "he stood up and pretended he was punching me in the stomach repeatedly." Ms. Waddell noted that the pretend punches were in the exact spot of Gabe's stomach bruises.

Ms. Waddell interviewed staff member, Kisean Bryant. He reluctantly confirmed that he was teaching Resident A how to fight and defend himself. Mr. Bryant didn't admit to punching Resident A, but rather stated Resident A runs into his hand. Ms. Waddell asked Mr. Bryant if he kicked or pinched Resident A to which he responded, yes, I did twist pinch him in the nipple area.

Per Ms. Waddell, there was a second staff member on duty when this happened, Aseel Omar. Ms. Waddell stated both staff members are suspended pending the outcome of this investigation.

On 01/26/2026, I conducted an interview with Guardian A1 who stated she was made aware of Resident A's injuries and the investigations of said injuries by different departments, Adult Protective Services and the local police department. Guardian A1 confirmed that she had received the report that Resident A may have received the bruising on his body by wrestling with a staff member. Guardian A1 believes that the injuries occurred by something more "serious" than wrestling and has contacted the local police department to investigate the injuries as well. Guardian A1 had nothing further to report.

On 01/26/2026, I conducted interviews with staff members, Aseel Omar and Kisean Bryant. Ms. Omar confirmed that she had worked with Kisean Bryant prior to Resident A's injuries being found. Ms. Omar stated she had not witnessed Mr. Bryant wrestling or being physical with Resident A or any other resident in the facility. Ms. Omar stated she had not received any reports from other residents, including Resident A, that Kisean Bryant had touched them inappropriately, physically assaulted them, or had any negative interaction with them. Ms. Omar stated that she has observed that Kisean Bryant interacted and assisted all residents appropriately according to their needs.

I conducted an interview with staff member Kisean Bryant. Mr. Bryant denied wrestling, kicking, punching and twisting/pinching Resident A's nipple area. Mr. Bryant stated that he and Resident A shadowed boxed together, with them facing each other, however, he stated that he never made physical contact with Resident A's body. Mr. Bryant stated he does not know how Resident A incurred bruises on his body. Mr. Bryant stated he has a positive relationship with Resident A and all residents of the Crane Cove adult foster care facility.

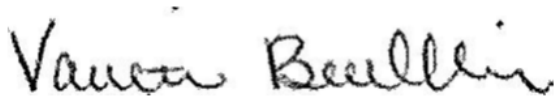
On 01/23/2026, I conducted an exit conference with licensee designee, Kim Waddell and discussed my findings with her. Ms. Waddell agreed with my findings and stated she would submit a corrective action plan to address the rule non-compliance stated in my report.

APPLICABLE RULE	
R 400.641	**Resident behavior interventions.**
	(6) A licensee, staff, volunteers, or any person who lives in the facility shall not do any of the following: **(b) Use any form of restraint without an order from an appropriately licensed heath care professional or physical force, other than physical restraint for crisis intervention.**

ANALYSIS:	Based upon my investigation, which consisted of multiple interviews with licensee designee, Kim Waddell, Resident A, Guardian A1, and staff members Aseel Omar and Kisean Bryant, and a review of pertinent documentation relevant to this investigation, there is enough evidence to substantiate the allegation that on 01/18/2026, unexplained bruising was observed on Resident A's body. Therefore, I find that staff member, Kisean Bryant, used physical force with Resident A when the two were shadowboxing together.
CONCLUSION:	**VIOLATION ESTABLISHED**

IV. RECOMMENDATION

Contingent upon receipt and approval of an acceptable corrective action plan, I recommend no change in the license status.



Vanita C. Bouldin Date: 02/02/2026
Licensing Consultant

Approved By:

Ardra Hunter Date: 02/03/2026
Area Manager