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GOVERNOR

## STATE OF MICHIGAN DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS LANSING

MARLON I. BROWN, DPA DIRECTOR

October 29, 2024

Kimberlee Waddell NRMI LLC 17187 N. Laurel Park Dr., Suite 160 Livonia, MI 48152

RE: License #: AS810412110

Crane Cove 7171 Crane

Ypsilanti, MI 48197

Dear Ms. Waddell:

Attached is the Renewal Licensing Study Report for the facility referenced above. The violations cited in the report require the submission of a written corrective action plan. 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 dates 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 licensee or licensee designee or home for the aged authorized representative and a date.

Upon receipt of an acceptable corrective plan, a regular license will be issued. If you fail to submit an acceptable corrective action plan, disciplinary action will result.

Please contact me with any questions. In the event that I am not available and you need to speak to someone immediately, you may contact the local office at (313) 456-0380.

Sincerely,

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

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

#### I. IDENTIFYING INFORMATION

**License #:** AS810412110

Licensee Name: NRMI LLC

Licensee Address: 160

17187 N. Laurel Park Dr.

Livonia, MI 48152

**Licensee Telephone #:** (734) 646-1603

Licensee/Licensee Designee: Kimberlee Waddell

Administrator: Jamie Nicoloff

Name of Facility: Crane Cove

Facility Address: 7171 Crane

Ypsilanti, MI 48197

**Facility Telephone #:** (734) 528-9320

Original Issuance Date: 06/01/2022

Capacity: 6

Program Type: PHYSICALLY HANDICAPPED

DEVELOPMENTALLY DISABLED

MENTALLY ILL

TRAUMATICALLY BRAIN INJURED

## II. METHODS OF INSPECTION

Date	e of On-site Inspection(s): 10/29/2024
Date	e of Bureau of Fire Services Inspection if applicable: N/A
Date	e of Health Authority Inspection if applicable:
No.	of staff interviewed and/or observed 2 of residents interviewed and/or observed 2 of others interviewed Role:
•	Medication pass / simulated pass observed? Yes $\square$ No $\boxtimes$ If no, explain.
•	Medication(s) and medication record(s) reviewed? Yes $\boxtimes$ No $\square$ If no, explain
•	Resident funds and associated documents reviewed for at least one resident? Yes $\boxtimes$ No $\square$ If no, explain.  Meal preparation / service observed? Yes $\boxtimes$ No $\square$ If no, explain.
•	Fire drills reviewed? Yes ⊠ No □ If no, explain.
•	Fire safety equipment and practices observed? Yes ⊠ No ☐ If no, explain.
•	E-scores reviewed? (Special Certification Only) Yes  No  N/A  If no, explain.  Water temperatures checked? Yes  No  If no, explain.
•	Incident report follow-up? Yes ⊠ No ☐ If no, explain.
•	Corrective action plan compliance verified? Yes ☐ CAP date/s and rule/s:  N/A ☒  Number of excluded employees followed-up?  N/A ☒
•	Variances? Yes ☐ (please explain) No ☐ N/A ☒

## **III. DESCRIPTION OF FINDINGS & CONCLUSIONS**

This facility was found to be in non-compliance with the following rules:

R 400.14318

Emergency preparedness; evacuation plan; emergency transportation.

(5) A licensee shall practice emergency and evacuation procedures during daytime, evening, and sleeping hours at least once per quarter. A record of the practices shall be maintained and be available for department review.

On 10/29/2024, I observed that no evacuation drill was completed during the sleeping hours at least once per quarter. Evacuation drills were noted to take at least 30 minutes during some dates.

Date: 10/29/2024

### IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, renewal of the license is recommended.

Vanita C. Bouldin

**Licensing Consultant** 

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