



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

December 19, 2024  
Jason Schmidt  
New Life Services Inc  
36022 Five Mile Road  
Livonia, MI 48154

RE: License #: AS630012681  
**McGinnis**  
**4473 McGinnis**  
**Holly, MI 48442-0204**

Dear Mr. Schmidt:

Attached is the Renewal Licensing Study Report for the facility referenced above. You have submitted an acceptable written corrective action plan addressing the violations cited in the report. To verify your implementation and compliance with this corrective action plan:

- You are to submit documentation of compliance.

The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, your license is renewed. It is valid only at your present address and is nontransferable.

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 (248) 975-5053.

Sincerely,

Sheena Worthy, Licensing Consultant  
Bureau of Community and Health Systems  
4th Floor, Suite 4B  
51111 Woodward Avenue  
Pontiac, MI 48342

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

**I. IDENTIFYING INFORMATION**

<b>License#:</b>	AS630012681
<b>Licensee Name:</b>	New Life Services Inc
<b>Licensee Address:</b>	36022 Five Mile Road Livonia, MI 48154
<b>Licensee Telephone #:</b>	(734) 744-7334
<b>Licensee/Licensee Designee:</b>	Jason Schmidt
<b>Administrator:</b>	Jason Schmidt
<b>Name of Facility:</b>	McGinnis
<b>Facility Address:</b>	4473 McGinnis Holly, MI 48442-0204
<b>Facility Telephone #:</b>	(248) 634-1499
<b>Original Issuance Date:</b>	02/13/1991
<b>Capacity:</b>	5
<b>Program Type:</b>	PHYSICALLY HANDICAPPED DEVELOPMENTALLY DISABLED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 12/19/2024

Date of Bureau of Fire Services Inspection if applicable: N/A

Date of Environmental/Health Inspection if applicable:

No. of staff interviewed and/or observed

1

No. of residents interviewed and/or observed

No. of others interviewed

Role:

- Medication pass / simulated pass observed? Yes ☒ No ☐ If no, explain.
- Medication(s) and medication record(s) reviewed? Yes ☒ No ☐ If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes ☒ No ☐ If no, explain.
- Meal preparation / service observed? Yes ☐ No ☒ If no, explain.  
It was not meal time during the onsite.
- 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.  
N/A
- Corrective action plan compliance verified? Yes ☒ CAP date/s and rule/s:  
SIR CAP Approved 04/24/24; 304(1)(o)
- SIR CAP Approved 01/23/23; 308(2)(f), 308(2)(b)
- SIR CAP Approved 08/16/23; 303(2), 308(2)(f)
- SIR CAP Approved 08/23/22; 305(3), 311(1)(c )
- LSR CAP Approved 12/14/22; 301(4), 316(1)(b), 312(2), 318(5), 803(5), 403(11), 803(3)
- LSR CAP Approved 01/13/21; 315(3), 403(11) N/A ☐
- Number of excluded employees followed-up? N/A ☒
- Variances? Yes ☒ (please explain) No ☐ N/A ☐  
A variance was completed on 08/08/00 regarding funds part II form. The licensee designee does not have to sign the funds part II form.

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

**R 330.1803                      Facility environment; fire safety.**

**(3) A facility that has a capacity of 4 or more clients shall conduct and document fire drills at least once during daytime, evening, and sleeping hours during every 3-month period.**

**REPEAT VIOLATION ESTABLISHED: LSR CAP APPROVED; 12/14/22**

In 2024, the fire drills for the month of March and August did not include a time as to when the fire drills were completed.

**R 400.14205                      Health of a licensee, direct care staff, administrator, other employees, those volunteers under the direction of the licensee, and members of the household.**

**(2) A licensee shall have, on file with the department, a statement that is signed by a licensed physician or his or her designee attesting to the physician's knowledge of the physical health of the licensee and administrator. The statement shall be signed within 6 months before the issuance of a temporary license and at any other time requested by the department.**

The licensee designee Jason Schmidt did not complete his 2023 physical on the required BCAL form.

**R 400.14312                      Resident medications.**

**(1) Prescription medication, including dietary supplements, or individual special medical procedures shall be given, taken, or applied only as prescribed by a licensed physician or dentist. Prescription medication shall be kept in the original pharmacy-supplied container, which shall be labeled for the specified resident in accordance with the requirements of Act No. 368 of the Public Acts of 1978, as amended, being**

S333.1101 et seq. of the Michigan Compiled Laws, kept with the equipment to administer it in a locked cabinet or drawer, and refrigerated if required.

Resident A is prescribed liquid calcium citrate 1000mg which is required to be refrigerated. This medication was observed in the refrigerator however; it was not secured in a lock box.

**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.

**REPEAT VIOLATION ESTABLISHED: LSR CAP APPROVED; 12/14/22**

In 2024, the fire drills for the month of March and August did not include a time as to when the fire drills were completed.

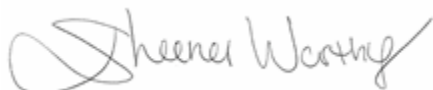
**R 400.14507      Means of egress generally.**

(5) A door that forms a part of a required means of egress shall be not less than 30 inches wide and shall be equipped with positive-latching, non-locking-against-egress hardware.

The main and second door of egress do not open easily when the door is lock. Therefore, I was unable to confirm if both doors are equipped with non-locking against egress hardware.

**IV. RECOMMENDATION**

An acceptable corrective action plan has been received. Renewal of the license is recommended.



Sheena Worthy  
Licensing Consultant

12/19/24  
Date