



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

April 24, 2026

Cyle Pickett  
Brother LL Brother Community Provider LLC  
Suite #2  
7439 Middlebelt Rd  
West Bloomfield, MI 48322

RE: License #: AS630418349  
Investigation #: 2026A0465015  
The Troy-Modern Assisted Living

Dear Mr. Pickett:

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.
- Indicate how continuing compliance will be maintained once compliance is achieved.
- Be signed and dated.

A six-month provisional license is recommended. If you do not contest the issuance of a provisional license, you must indicate so in writing; this may be included in your corrective action plan or in a separate document. If you contest the issuance of a provisional license, you must notify this office in writing, and an administrative hearing will be scheduled. Even if you contest the issuance of a provisional license, you must still submit an acceptable corrective action plan.

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.

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) 972-9136.

Sincerely,

A handwritten signature in cursive script that reads "Stephanie Gonzalez".

Stephanie Gonzalez, Licensing Consultant  
Bureau of Community and Health Systems  
4th Floor, Suite 4B  
51111 Woodward Avenue  
Pontiac, MI 48342  
(517) 243-6063

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS630418349
<b>Investigation #:</b>	2026A0465015
<b>Complaint Receipt Date:</b>	02/17/2026
<b>Investigation Initiation Date:</b>	02/20/2026
<b>Report Due Date:</b>	04/18/2026
<b>Licensee Name:</b>	Brother II Brother Community Provider LLC
<b>Licensee Address:</b>	1052 Byron Dr. Troy, MI 48098
<b>Licensee Telephone #:</b>	(248) 986-4546
<b>Administrator:</b>	Cyle Pickett
<b>Licensee Designee:</b>	Cyle Pickett
<b>Name of Facility:</b>	The Troy-Modern Assisted Living
<b>Facility Address:</b>	1052 Byron Dr. Troy, MI 48098
<b>Facility Telephone #:</b>	(248) 986-4546
<b>Original Issuance Date:</b>	07/17/2025
<b>License Status:</b>	REGULAR
<b>Effective Date:</b>	01/17/2026
<b>Expiration Date:</b>	01/16/2028
<b>Capacity:</b>	6
<b>Program Type:</b>	PHYSICALLY HANDICAPPED MENTALLY ILL ALZHEIMERS

	AGED
--	------

## II. ALLEGATION(S)

	<b>Violation Established?</b>
Resident A has had several falls at the facility due to the lack of adequate supervision and monitoring by direct care staff.	No
Additional Findings	Yes

## III. METHODOLOGY

02/17/2026	Special Investigation Intake 2026A0465015
02/20/2026	APS Referral Adult Protective Services Referral assigned to Jordan Walker for investigation
02/20/2026	Special Investigation Initiated - Letter Email exchange with APS Worker, Jordan Walker
02/26/2026	Inspection Completed On-site I conducted an onsite investigation. I completed a walkthrough of the facility, observed residents, reviewed facility files and interviewed direct care staff, Destini Rogers via telephone and spoke to licensee designee, Cyle Pickett, via telephone
02/26/2026	Contact - Document Sent Email exchange with APS Worker, Jordan Walker
03/02/2026	Contact - Document Received Facility documents received via email
03/06/2026	Contact - Telephone call received I spoke to APS Worker, Mr. Walker, via telephone
04/09/2026	Contact - Telephone call made I spoke to Guardian A1 via telephone
04/09/2026	Contact - Telephone call made I spoke to ex-direct care staff, Navia Salinas, via telephone
04/10/2026	Contact - Document Sent Email exchange with Mr. Pickett
04/10/2026	Contact - Telephone call made

	Telephone call with Mr. Pickett
04/13/2026	Contact - Document Received Facility documents received via email from Mr. Pickett
04/14/2026	Contact - Telephone call made I spoke to direct care staff, Ebony Blanding, via telephone
04/14/2026	Contact - Telephone call made I spoke to live-in staff, Cindy Heck, via telephone
04/14/2026	Contact – Telephone call made I spoke to direct care staff, Latika Sims, via telephone
04/14/2026	Contact - Telephone call made I spoke to ex-live-in staff, Brandon Murray, via telephone
04/15/2026	Contact – Document Received Facility documents received via email from Mr. Pickett
04/16/2026	Contact – Telephone call made I spoke to Lijo Antony via telephone
04/20/2026	Contact – Document Received Facility documents received via email from Mr. Pickett
04/20/2026	Contact – Telephone call made I spoke to Guardian B1 via telephone
04/20/2026	Contact – Telephone call made I spoke to Guardian C1 via telephone
04/20/2026	Contact – Telephone call made I spoke to Guardian D1 via telephone
04/24/2026	Exit Conference I spoke to Mr. Pickett via telephone

## **ALLEGATION:**

**Resident A has had several falls at the facility due to the lack of adequate supervision and monitoring by direct care staff.**

## **INVESTIGATION:**

On 2/17/2026, a complaint was received, alleging that direct care staff are not providing adequate supervision and care to Resident A, which has resulted in him falling several times. The complaint stated that, on 2/8/2026, Resident A was transported to hospital due to a fall at the facility and was later discharged. The complaint stated that Resident A fell again on 2/9/2026 and was transported to the hospital for additional medical care. The complaint stated there is concern that direct care staff are not providing sufficient supervision to Resident A.

On 2/20/2026, 2/26/2026 and 3/6/2026, I spoke to Adult Protective Services Worker, Jordan Walker, via email and telephone. Mr. Walker stated that he did not substantiate for abuse and/or neglect. Mr. Walker stated that his investigation is in the process of being closed.

On 2/26/2026, I conducted an onsite investigation. The home specializes in caring for the aged/Alzheimer's population. At the time of my onsite investigation, there were five residents residing in the home with one staff on duty at all times. Resident A was not at the facility, as he is currently hospitalized. Due to the medical diagnosis of the residents, I was unable to interview them for this investigation. I completed a walkthrough of the facility, observed residents, reviewed facility files and interviewed direct care staff, Destini Rogers via telephone and spoke to licensee designee, Cyle Pickett, via telephone. I observed the home to be clean and well-organized. I observe all residents to be properly dressed and with adequate hygiene. I did not observe any concerns.

I reviewed Resident A's record. The *Face Sheet* stated that Resident A moved into the facility on 1/16/2026 and has a legal guardian, Guardian A1. The *Health Care Appraisal* listed Resident A's medical diagnosis as Cognitive Impairment. The *Assessment Plan for AFC Residents* stated that Resident A requires supervision in the community, has a history of falls and requires mobility assistance, needs assistance with all personal care tasks and uses a walker and wheelchair for mobility assistance. The *Incident/Accident Reports* documented the following falls for Resident A:

1/20/2026 at 3:30pm; Completed by Navia Salinas: After Resident A took his shower. He fell on the wet shower floor. He wasn't holding on to his walker. Staff, Edony Blanding and Navia Salinas, picked him up off the floor and assessed him. He had no wounds and he said he was fine and didn't want EMS. Resident A is to hold onto his walker while walking and standing.

1/20/2026 at 11:30pm; Completed by Navia Salinas: Resident A said he was getting up to use the bathroom, and he just started to fall backwards. He was helped off the floor and put back into his bed. Both bed rails were put upon bed and Resident A was told to call for help when he needs to get up.

1/22/2026 at 4:20pm; Completed by Ebony Blanding: Resident A got out of bed unassisted. He then fell backward and hit his head. Resident A was bleeding from his head. 911 called. EMS was unable to stop the bleeding. He was then transported to the hospital.

2/6/2026 at 4:17pm; Completed by Marla Rogers: Responded to the room when Resident A yelled out. Resident A was on the floor leaning against the bed. EMS was called due to the unwitnessed fall. Upon arrival, care was handed off to EMS and resident was transferred to hospital.

2/9/2026 at 2:25pm; Completed by Marla Rogers: Upon return from hospital, EMS placed Resident A in bed, and he appeared to be comfortable. When I went to retrieve a bed alarm, Resident A attempted to get out of bed and had another fall. Assisted Resident A, who stated his head hurt. I contacted management and was advised to call EMS due to unwitnessed fall. EMS transferred to hospital.

I spoke to direct care staff, Destini Rogers, who stated that she has worked at the facility for one week. Ms. Rogers stated, "There are currently five residents residing in the home and we have one staff on duty at all times. I have never met Resident A. He has been in the hospital since I began working here. I have not had any concerns with the current residents falling." Ms. Rogers denied knowledge of the information contained in this complaint.

I spoke to licensee designee and administrator, Cyle Pickett, via telephone while onsite at the facility. Mr. Pickett stated, "Resident A was having falls at the home because he was refusing to use his walker and wheelchair. And prior to moving here, he was falling at the last placement as well. But we set up several safety measures, including a bed and chair alarm, bed and floor mats with alarms, and a personal call light and button he can use to ask for assistance. He also has a walker and wheelchair to assist with mobility. He is currently in the hospital and receiving rehabilitation services. I am unsure what the plan will be, but we expect him to return to the facility eventually. We were doing everything we could to keep him safe and prevent him from falling. Staff were also checking on him throughout the day as well and assisting with all his personal care needs. There were sufficient staff on duty to care for Resident A. I also have been in consistent contact with Guardian A1 regarding Resident A's care and hospitalizations." Mr. Pickett denied knowledge of this complaint being true.

On 4/9/2026, I spoke to Guardian A1 via telephone. Guardian A1 stated, "Resident A has a history of falls. And he has been falling a lot more lately. He is currently in the

hospital and will likely be transitioning to hospice care. He fell several times at his last placement, but this is a new concern. Prior to this, he was fully able to move around independently. He will try to get up out of bed by himself and does not want to ask for help. I have been working with Mr. Pickett on safety measures in the home to prevent falls. Mr. Pickett has been great at communicating with me concerns and issues as they arise. We set up a bed alarm and chair alarm in Resident A's bedroom to assist in preventing falls. The staff were doing the best that they could and were checking on Resident A often. Mr. Pickett has been working with me on these issues, and he did tell me that Resident A needs more care and supervision, which is why hospice is now being coordinated. I do not have any concerns with the care that was provided to Resident A when he resided at the facility." Guardian A1 denied knowledge of this complaint being true.

On 4/9/2026, I spoke to ex-direct care staff, Navia Salinas, via telephone. Ms. Salinas stated, "I worked at the facility for two months, from December 2025 until February 2026. I know Resident A. He was living at the home when I was working there. Resident A was a severe fall risk. He thought he could get up and walk around, but he couldn't. So, every time he would try to walk, he was at risk of falling or would fall. It was unsafe and he needed a lot of redirection. It was hard to care for him and also complete other work tasks. We had safety measures in place to help but he needed a lot of redirection. I told Mr. Pickett my concerns."

On 4/14/2026, I spoke to live-in direct care staff, Lucinda (Cindy) Heck, via telephone. Ms. Heck stated, "I have been working here since March 2026. I have never met Resident A because he has been in the hospital since I started working here. I know of him but cannot speak to his care needs. I have not had any concerns with the residents that currently live here. We provide good care to all of the residents and assist them with all care needed. There is always one staff on duty at all times, and we provide care and supervision to everyone." Ms. Heck denied any concerns related to this complaint being true.

On 4/14/2026, I spoke to direct care staff, Ebony Blanding, via telephone. On 4/14/2026, I spoke to live-in staff, Cindy Heck, via telephone. Ms. Blanding stated that she has worked at the facility for two years and is no longer employed at the facility. Ms. Blanding stated, "I primarily worked 1<sup>st</sup> shift. I remember Resident A and did provide direct care to him during the time that I worked there. He did have several falls, and he was a fall-risk. He had a wheelchair and walker, but he didn't like to use them. We put a padded mat on the floor in his room in case he did fall and we had other safety plans in place with alarms on his bed and chair. He still would try to move around by himself, and we had to remind him to ask for help. I checked on him often during my shifts." Ms. Blanding denied knowledge of this complaint being true.

On 4/14/2026, I spoke to direct care staff, Latika Sims, via telephone. Ms. Sims stated that she has worked at the facility for three years. Ms. Sims stated, "I have provided care to Resident A. He never had any falls during my shifts, but I am aware

that he had some falls. He always wanted to get up on his own and would try to get out of bed. I had to redirect him often and remind him to ask for help. He was not difficult to care for, he just needed to be reminded and redirected at times. We had a mat on his bedroom floor and a bed alarm. We implemented multiple things to try and prevent falls. I feel he was appropriate to be living at the facility, and we provided him with a safe environment.” Ms. Sims denied knowledge of this complaint being true.

On 4/14/2026, I spoke to ex-live-in staff, Brandon Murray, via telephone. Mr. Murray stated he worked at the facility for approximately two weeks. Mr. Murray stated, “Resident A would try to get out of bed on his own and needed help. He didn’t have any falls when I was working, but he did require redirection and frequent checks. When he did try to move on his own, I would redirect him and he would allow me to help him. I did not have any issues with Resident A. I was able to provide care and supervision to him.” Mr. Murray denied this complaint is true.

<b>APPLICABLE RULE</b>	
<b>R 400.671</b>	<b>Resident care.</b>
	<b>(4) A licensee shall provide supervision, protection, and personal care as specified in a resident's assessment plan. A hospice service plan, do-not resuscitate order, or any other advance directive must be included as an addendum to the resident assessment and maintained with the assessment plan in the resident’s record.</b>
<b>ANALYSIS:</b>	<p>On 2/26/2026, I completed a walkthrough of the facility and observed all of the residents to be properly dressed and with adequate hygiene. I did not observe anything of concern.</p> <p>According to the <i>Assessment Plan for AFC Residents</i> stated that Resident A has a history of falls and requires mobility assistance, uses a bed alarm, chair alarm and floor mat, and uses a walker and wheelchair for mobility assistance.</p> <p>According to the <i>Incident/Accident Reports</i>, Resident A fell five times during the months of January 2026 and February 2026 and was transported to the hospital for medical care as needed.</p> <p>According to Mr. Pickett, Ms. Salinas, Ms. Heck, Ms. Blanding, Ms. Sims and Mr. Murray, the facility implemented several safety measures, including the use of a walker and wheelchair to assist with mobility and fall prevention. Mr. Pickett, Ms. Salinas, Ms. Heck, Ms. Blanding, Ms. Sims and Mr. Murray, denied knowledge of this complaint being true.</p>
<b>CONCLUSION:</b>	<b>VIOLATION NOT ESTABLISHED</b>

## **ADDITIONAL FINDINGS:**

### **INVESTIGATION:**

On 3/2/2026, Mr. Pickett provided me with a list of all direct care staff that are currently employed at the facility, which listed the following four staff:

Marla Lewis  
Navia Salinas  
Brandon Murray  
Ebony Blanding

On 4/9/2026, I spoke to Ms. Salinas via telephone. Ms. Salinas reported that she was previously a live-in staff member. Ms. Salinas stated that when she ended her employment in February 2026, another person moved into the basement as a live-in staff member.

On 4/9/2026, I reviewed the *Bureau Information Tracking System* and was unable to confirm that Ms. Salinas had been approved as a live-in staff for the facility. I was unable to confirm via BITS that any individual is currently approved to be a live-in staff for the facility.

On 4/10/2026, I spoke to Mr. Pickett via telephone. Mr. Pickett stated, "I do have staff living in the basement. I know that I am supposed to submit paperwork to you guys to approve it. I have done that in the past, but I have not done it currently. I did not complete fingerprinting for Ms. Salinas, Mr. Murray or the current live-in staff, Lucinda (Cindy) Heck." During this phone call, I asked Mr. Pickett to send me the list of all staff (current and prior staff) that have worked at the facility and/or lived in the home during the last six months.

On 4/13/2026 and 4/14/2026, Mr. Pickett provided me with an updated *Staff Schedule*, phone list of all staff that have worked at the facility in the last 6 months, as well as the live-in staff timeframes. I reviewed the reviewed the *Bureau of Information Tracking System*, *Workforce Background Check System* and *Staff Schedule* for the months of January 2026 – April 2026, and determined the following discrepancies:

### **Direct Care Staff Employment Dates (between October 2025 – April 2026):**

Aileen Hilario: 2/26/2026 - current  
Brandon Murray: 2/10/2026 – 2/21/2026  
Lucinda (Cindy) Heck: 3/3/2026 - current  
Destine Rogers: 2/23/2026 - current  
Ebony Blanding: 1/2/2026 - current  
Lauryn Stevenson: 1/2/2026 - current  
Marla Lewis: 1/3/2026 - current

Navia Salinas: 12/21/2025 – 3/1/2026  
Latika Sills: 1/31/2026 - current

**Live-in Staff Time Frames:**

Navia Salinas: 12/21/2025 to 2/10/2026  
Brandon Murray 2/11/2026- 2/21/2026  
Lucinda (Cindy) Heck- 3/3/2026- current

Aileen Hilario: Ms. Hilario was entered into the WFBC System on 4/12/2026 and her eligibility is currently pending. Ms. Hilario was also entered into the WFBC System on 4/12/2026 as a new hire for the Meadows Assisted Living II (AL500388683) operated by Lijo Antony, and her eligibility is currently pending. According to the *Staff Schedule*, Ms. Hilario has independently worked at the facility and/or is listed on the schedule on the following dates and times: 2/26/2026 from 7:00am – 7:00pm, 3/1/2026 from 7:00pm – 7:00am, 3/2/2026 from 7:00pm – 7:00am, 3/3/2026 from 7:00pm – 7:00am, 3/7/2026 from 7:00pm – 7:00am, 3/8/2026 from 7:00pm – 7:00am, 3/9/2026 from 7:00pm – 7:00am, 3/11/2026 from 7:00am – 7:00pm, 3/13/2026 from 7:00pm – 7:00am, 3/17/2026 from 7:00pm – 7:00am, 3/20/2026 from 7:00pm – 7:00am, 3/23/2026 from 7:00pm – 7:00am, 3/25/2026 from 7:00pm – 7:00am, 3/27/2026 from 7:00pm – 7:00am, 3/30/2026 from 7:00pm – 7:00am, 4/1/2026 from 7:00pm – 7:00am, 4/3/2026 from 7:00pm – 7:00am, 4/6/2026 from 7:00pm – 7:00am, 4/8/2026 from 7:00pm – 7:00am, 4/10/2026 from 7:00pm – 7:00am, 4/13/2026 from 7:00pm – 7:00am, 4/14/2026 from 7:00pm – 7:00am; Future work schedule dates: 4/17/2026 from 7:00pm – 7:00am

Brandon Murray: Mr. Murray was entered into the WFBC on 4/13/2026 and was deemed eligible for employment on 4/13/2026. However, according to the *Staff Schedule* and Mr. Pickett, Mr. Murray was a live-staff at the facility from approximately 2/10/2026 – 2/21/2026, and is listed on the staff schedule on the following dates and times: 2/10/2026 from 7:00pm – 7:00am, 2/11/2026 from 7:00am – 7:00pm, 2/12/2026 from 7:00am – 7:00pm, 2/13/2026 from 7:00am – 7:00pm, 2/14/2026 from 7:00am – 7:00pm, 2/15/2026 from 7:00am – 7:00pm, 2/16/2026 from 7:00am – 7:00pm, 2/17/2026 from 7:00am – 7:00pm, 2/18/2026 from 7:00am – 7:00pm, 2/19/2026 from 7:00am – 7:00pm, and 2/21/2026 from 7:00am – 7:00pm.

Lucinda (Cindy) Heck: Ms. Heck was entered into the WFBC on 4/13/2026 and was deemed eligible for employment on 4/13/2026. However, according to the *Staff Schedule* and Mr. Pickett, Ms. Heck has been a live-staff at the facility since 3/3/2026 and is listed on the staff schedule on the following dates and times: 3/4/2026 at 7:00am – 3/7/2026 at 7:00pm (84 hours consecutively), 3/8/2026 from 7:00am – 7:00pm, 3/10/2026 from 7:00am – 3/11/2026 at 7:00pm (36 hours consecutively), 3/12/2026 from 7:00am – 3/13/2026 at 7:00pm (36 hours consecutively), 3/14/2026 at 7:00am – 3/17/2026 at 7:00am (72 hours consecutively), 3/18/2026 at 7:00am – 3/20/2026 at 7:00pm (60 hours consecutively), 3/21/2026 from 7:00am – 3/22/2026 at 7:00am (24 hours

consecutively), 3/23/2026 from 7:00am – 7:00pm, 3/24/2026 from 7:00am – 3/25/2026 at 7:00pm (36 hours consecutively), 3/26/2026 from 7:00am – 3/27/2026 at 7:00pm (36 hours consecutively), 3/28/2026 from 7:00am – 3/29/2026 at 7:00am (24 hours consecutively), 3/30/2026 from 7:00am – 7:00pm, 3/31/2026 at 7:00am – 4/1/2026 at 7:00pm (36 hours consecutively), 4/2/2026 from 7:00am – 4/3/2026 at 7:00pm (36 hours consecutively), 4/4/2026 from 7:00am – 4/6 at 7:00pm (60 hours consecutively), 4/7/2026 from 7:00am – 4/8/2026 at 7:00pm (36 hours consecutively), 4/9/2026 at 7:00am – 4/10/2026 at 7:00pm (36 hours consecutively), 4/11/2026 at 7:00am – 4/12/2026 at 7:00am (24 hours consecutively), 4/13/2026 from 7:00am – 7:00pm; Future work schedule dates: 4/15/2026 at 7:00am – 4/17/2026 at 7:00pm (60 hours consecutively) and 4/18/2026 from 7:00am – 4/19/2026 at 7:00am (24 hours consecutively)

Destine Rogers: Ms. Rogers was entered into the WFBC System for this facility on 1/12/2026, but her application was withdrawn. On 4/13/2026, Ms. Rogers was entered into the WFBC System for two separate licensed facilities as a new hire for the Meadows Assisted Living II (AL500388683) operated by Lijo Antony and the Shelby AL (AS500419642) operated by Mr. Pickett. Ms. Rogers' eligibility to work in an AFC facility is currently pending. According to the *Staff Schedule*, Ms. Rogers worked at the facility as follows: 2/23/2026 from 7:00am – 7:00pm, 2/25/2026 from 7:00am – 7:00pm, 2/26/2026 from 7:00am to 2/27/2026 at 7:00am (24 hours consecutively), 3/2/2026 from 7:00am – 7:00pm, 3/3/2026 from 7:00am – 7:00pm, 3/9/2026 from 7:00am – 7:00pm, 3/17/2026 from 7:00am – 7:00pm, 3/22/2026 from 7:00am – 7:00pm, 3/29/2026 from 7:00am – 7:00pm, 4/12/2026 from 7:00am – 7:00pm, and 4/14/2026 from 7:00am – 7:00pm; Future work schedule dates: 4/19/2026 from 7:00am – 7:00pm

Ebony Blanding: Ms. Blanding was entered into the WFBC System for this facility on 4/13/2026, and her eligibility for employment is still pending. On 5/20/2025, Ms. Blanding was entered into the WFBC System and deemed eligible under a separate licensed facility, Amor Novi (AS630418307), also operated by Mr. Pickett. According to the *Staff Schedule*, Ms. Blanding worked at the facility as follows: 1/2/2026 from 7:00am – 7:00pm, 1/6/2026 from 7:00am – 7:00pm, 1/8/2026 from 7:00am – 7:00pm, 1/13/2026 from 7:00am – 7:00pm, 1/15/2026 from 7:00am – 7:00pm, 1/20/2026 from 7:00am – 7:00pm, 1/22/2026 from 7:00am – 7:00pm, 1/27/2026 from 7:00am – 7:00pm, 1/29/2026 from 7:00am – 7:00pm, 2/3/2026 from 7:00am – 7:00pm, 2/5/2026 from 7:00am – 7:00pm and 2/7/2026 from 7:00am – 7:00pm

Lauryn Stevenson: I was unable to locate Ms. Stevenson as an eligible employee under the facility license. On 4/16/2026, Ms. Stevenson was entered into the WFBC System and deemed eligible under a separate licensed facility, Amor Novi (AS630418307), which is also operated by Mr. Pickett. According to the *Staff Schedule*, Ms. Stevenson worked at the facility as follows: 1/2/2026 from 7:00pm – 7:00am, 1/6/2026 from 7:00pm – 7:00am, 1/10/2026 from 7:00am – 7:00pm, 1/11/2026 from 7:00am – 7:00pm, 1/13/2026 from 7:00pm – 7:00am, 1/17/2026 from 7:00am – 7:00pm, 1/18/2026 from 7:00am – 7:00pm, 1/20/2026 from 7:00pm –

7:00am, 1/24/2026 from 7:00am – 7:00pm, 1/25/2026 from 7:00am – 7:00pm, 2/1/2026 from 7:00pm – 7:00am, 2/3/2026 from 7:00pm – 7:00am and 2/8/2026 from 7:00am – 7:00pm

Marla Lewis: Ms. Lewis was entered into the WFBC System on 4/13/2026 and her eligibility is currently pending. On 4/16/2025, Ms. Lewis was deemed eligible under a separate licensed facility, Amor Novi (AS630418307), which is also operated by Mr. Pickett. According to the *Staff Schedule*, Ms. Lewis worked at the facility as follows: 1/3/2026 from 7:00am – 7:00pm, 1/4/2026 from 7:00am – 7:00pm, 1/5/2026 from 7:00am – 7:00pm, 1/7/2026 from 7:00am – 7:00pm, 1/9/2026 from 7:00am – 7:00pm, 1/12/2026 from 7:00am 7:00pm, 1/14/2026 from 7:00am – 7:00pm, 1/16/2026 from 7:00am – 7:00pm, 1/19/2026 from 7:00am – 7:00pm, 1/21/2026 from 7:00am 7:00pm, 1/23/2026 from 7:00am – 7:00pm, 1/26/2026 from 7:00am – 7:00pm, 1/28/2026 from 7:00am – 7:00pm 1/30/2026 from 7:00am – 7:00pm, 2/2/2026 from 7:00am – 7:00pm, 2/4/2026 from 7:00am – 7:00pm, 2/6/2026 from 7:00am – 7:00pm, 2/9/2026 from 7:00am – 7:00pm and 2/10/2026 from 7:00am – 7:00pm

Navia Salinas: Ms. Salinas was entered into the WFBC System on 1/12/2026 and deemed eligible on this same date. On 12/9/2025, Ms. Salinas was deemed eligible under a separate licensed facility, Amor Novi (AS630418307), which is also operated by Mr. Pickett. According to the *Staff Schedule* and Mr. Pickett, Ms. Salinas moved into the facility on 12/21/2026 as a live-in staff and remained an employee until 2/10/2026. Ms. Salinas worked at the facility as follows: 12/21/2025 from 7:00am – 12/22/2025 at 7:00am (24 hours consecutively), 12/22/2025 from 7:00pm – 12/23/2025 at 7:00am, 12/24/2025 from 7:00pm – 12/26/2025 at 7:00am (36 hours consecutively), 12/26/2025 from 7:00pm – 12/27/2025 at 7:00pm (24 hours consecutively), 12/28/2025 from 7:00pm – 12/29/2025 at 7:00am, 1/3/2026 from 7:00pm – 7:00am, 1/4/2026 from 7:00am – 7:00pm, 1/5/2026 from 7:00pm – 7:00am, 1/7/2026 from 7:00pm – 7:00am, 1/8/2026 from 7:00am – 7:00pm, 1/9/2026 from 7:00am – 7:00pm, 1/10/2026 from 7:00pm – 7:00am, 1/11/2026 from 7:00pm – 7:00am, 1/12/2026 from 7:00pm – 7:00am, 1/14/2026 from 7:00pm – 7:00am, 1/15/2026 from 7:00pm – 7:00am, 1/16/2026 from 7:00pm – 7:00am, 1/17/2026 from 7:00pm – 7:00am, 1/18/2026 from 7:00pm – 7:00am, 1/19/2026 from 7:00pm – 7:00am, 1/21/2026 from 7:00pm – 7:00am, 1/22/2026 from 7:00pm – 7:00am, 1/23/2026 from 7:00pm – 7:00am, 1/24/2026 from 7:00pm – 7:00am, 1/25/2026 from 7:00pm – 7:00am, 1/26/2026 from 7:00pm – 7:00am, 1/27/2026 from 7:00pm – 7:00am, 1/28/2026 from 7:00pm – 7:00am, 1/29/2026 from 7:00pm – 7:00am, 1/30/2026 from 7:00pm – 7:00am, 1/31/2026 from 7:00pm – 7:00am, 2/2/2026 from 7:00pm – 7:00am, 2/4/2026 from 7:00pm – 7:00am, 2/5/2026 from 7:00pm – 7:00am, 2/6/2026 from 7:00pm – 7:00am, 2/7/2026 from 7:00pm – 7:00am, 2/8/2026 from 7:00pm – 7:00am, 2/9/2026 from 7:00pm – 7:00am, 2/11/2026 from 7:00pm – 7:00am, 2/12/2026 from 7:00pm – 7:00am, 2/13/2026 from 7:00pm – 7:00am, 2/14/2026 from 7:00pm – 7:00am, 2/15/2026 from 7:00pm – 7:00am, 2/16/2026 from 7:00pm – 7:00am, 2/17/2026 from 7:00pm – 7:00am, 2/18/2026 from 7:00pm – 7:00am, 2/19/2026 from 7:00pm – 7:00am, 2/20/2026 from 7:00pm – 7:00am,

2/22/2026 from 7:00am – 2/23/2026 at 7:00am, 2/23/2026 from 7:00pm – 2/25/2026 at 7:00am (36 hours consecutively), 2/25/2026 from 7:00pm – 7:00am, 2/27/2026 from 7:00pm – 2/28/2026 at 7:00pm and 3/1/2026 from 7:00am – 7:00pm

Latika Sills: I was unable to locate Ms. Sills as an employee under the facility license. On 4/8/2026, Ms. Sills was entered into the WFBC System and deemed eligible under a separate licensed facility, The Shelby AL (AS500419642) operated by Mr. Pickett. According to the *Staff Schedule*, Ms. Sills worked at the facility on the following dates and times: 1/31/2026 from 7:00am – 7:00pm, 2/1/2026 from 7:00am – 7:00pm, 2/20/2026 from 7:00am – 7:00pm and 2/27/2026 from 7:00am – 7:00pm

<b>APPLICABLE RULE</b>	
<b>MCL 400.734b</b>	<b>Employing or contracting with certain individuals providing direct services to residents; prohibitions; criminal history check; exemptions; written consent and identification; conditional employment; use of criminal history record information; disclosure; determination of existence of national criminal history; failure to conduct criminal history check; automated fingerprint identification system database; electronic web-based system; costs; definitions.</b>
	<b>(2) Except as otherwise provided in this subsection or subsection (6), an adult foster care facility shall not employ or independently contract with an individual who has direct access to residents until the adult foster care facility or staffing agency has conducted a criminal history check in compliance with this section or has received criminal history record information in compliance with subsections (3) and (11). This subsection and subsection (1) do not apply to an individual who is employed by or under contract to an adult foster care facility before April 1, 2006. On or before April 1, 2011, an individual who is exempt under this subsection and who has not been the subject of a criminal history check conducted in compliance with this section shall provide the department of state police a set of fingerprints and the department of state police shall input those fingerprints into the automated fingerprint identification system database established under subsection (14). An individual who is exempt under this subsection is not limited to working within the adult foster care facility with which he or she is employed by or under independent contract with on April 1, 2006 but may transfer to another adult foster care facility, mental health facility, or covered health facility. If an individual who is exempt under this subsection is subsequently convicted of a crime or offense described under subsection (1)(a) to (g) or found to be the subject of a substantiated finding described under</b>

	<b>subsection (1)(i) or an order or disposition described under subsection (1)(h), or is found to have been convicted of a relevant crime described under 42 USC 1320a-7(a), he or she is no longer exempt and shall be terminated from employment or denied employment.</b>
<b>ANALYSIS:</b>	<p>According to BITS, Ms. Salinas, Mr. Murray and Ms. Heck did not complete the required AFC-100 criminal history background check prior to moving into the facility as live-in staff.</p> <p>According to the WFBC System, Ms. Hilario was entered into the system as a new hire on 4/12/2026, approximately two months after she began working at the facility, with her eligibility currently pending. Mr. Murray was entered into the system and deemed eligible on 4/13/2026, approximately two months after he began working at the facility. Ms. Heck was entered into the system on 4/13/2026, approximately five weeks after she began working at the facility. Ms. Rogers was entered into the system and deemed eligible on 4/13/2026, approximately two months after she began working at the facility. Ms. Blanding was entered into the system on 4/13/2026, approximately two months after she began working at the facility, with her eligibility still pending. Ms. Stevenson worked at the facility from 1/2/2026 to 2/8/2026 and was never entered into the system as a new hire. Ms. Lewis was entered into the system on 4/13/2026, approximately two months after she began working at the facility, with eligibility currently pending. Ms. Salinas was deemed eligible on 1/12/2026, approximately two weeks after she began working at the facility. Ms. Sills worked at the facility from 1/31/2026 – 2/27/2026 and was never entered into the system as a new hire.</p> <p>Based on the information above, Mr. Pickett did not complete the required criminal history background checks for direct care staff prior to allowing them direct access to residents.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**INVESTIGATION:**

On 2/26/2026, I conducted an onsite investigation at the facility. I observed Resident A’s bedroom to be in the backroom of the home, off the kitchen area. While onsite at the facility, I spoke to Mr. Pickett via telephone. Mr. Pickett stated, “The bedroom that Resident A is currently living in was not previously approved as a bedroom when I first got licensed. I have two rooms that are supposed to be double occupancy, but I made one of those rooms a single bedroom and began using the backroom as a bedroom. I didn’t know that I couldn’t use it as a bedroom. I will move

Resident A into one of the licensed rooms.” I informed Mr. Pickett during this phone call that the backroom is not licensed for sleeping purposes and is not to be used as a bedroom.

On 2/26/2026 and 4/14/2026, I reviewed Mr. Pickett’s original licensure file. Mr. Pickett submitted an original application for licensure for a capacity of six on 3/25/2024. Mr. Pickett submitted a *Floor Plan* that specified four resident bedrooms, with two double-occupancy bedrooms and two single-occupancy bedrooms. The floor plan specified a fifth room that was labeled as a private lounge area and was not approved for sleeping purposes. On 7/17/2025, Mr. Pickett was issued an original license. As part of the application and licensure process, Mr. Pickett submitted the *Standard Procedures at the Troy Modern Assisted Living – Day and Night Direct Care Worker Standard Procedures*, which stated the following: Obtain and document vital signs, assist with medication and document, support residents and daily activities, monitor residents’ well-being, serve and assist with meals, implement and assist with Activity #1, assist residents with showers, perform light housekeeping, maintain cleanliness of kitchen and common areas, empty trash in resident rooms, clean resident rooms, implement and assist with Activity #2, assist with bedtime routines; assist residents as needed, monitor residents throughout the night, prepare meals, conduct housekeeping duties, manage laundry tasks, dust common areas, wash dishes, mop floors, clean bathrooms, organize and replenish supplies, empty trash in common areas, monitor the bedroom wing for residents’ needs and provide assistance as required.

I was unable to locate any documentation submitted by Mr. Pickett, since the original license was issued, that specified that there would be direct care staffing living in the facility nor any request for an addendum to the original license to modify the private lounge area to be used for sleeping purposes by residents and/or direct care staff.

On 4/9/2026, I spoke to Ms. Salinas, via telephone. Ms. Salinas stated, “I worked at the facility for two months, from December 2025 until March 2026. I was the live-in staff. I lived in the basement. Some days I worked 12-hour shifts, 24-hour shifts and 32-hour shifts without any break at all. It was physically exhausting. It was hard living in the basement because I couldn’t hear the residents from there. I needed sleep and sometimes would not be able to. I would sleep as much as I could at night or during the day when the residents were sleeping, I would sleep. It was very unsafe. I quit because I couldn’t do it anymore.”

On 4/14/2026, I spoke to Mr. Murray, via telephone. Mr. Murray stated, “I moved into the facility in February 2026. I lived in the basement. In one week, I worked 168 hours with no breaks. No one ever came to help me or check-in on me. It was very hard to sleep there at night. I would sleep between 2:00am and 4:00am and would take 30-minute power naps during the daytime when the residents slept. When I was down in the basement, I couldn’t hear the residents. And I wasn’t sleeping. It was too much for me and I had to quit. When I quit, someone else moved into the basement.”

On 4/14/2026, I spoke to Ms. Heck, via telephone. Ms. Heck stated, “I moved into the facility in March 2026. I was living in the basement, but I recently moved to a room on the main floor. I moved to the main floor so I can hear the residents and am closer to provide care to them. I moved to the main floor in March 2026. I don’t get a lot of sleep, but I get some. I sleep at night when the residents are sleeping. There is one resident, Resident B, that is awake throughout the night due to confusion. In order to prevent him from waking the other residents up in the night, I sleep in his bedroom in a chair.”

According to the *Staff Schedule*, Ms. Salinas and Ms. Heck worked consecutive hours of 24 hours or more as follows:

Ms. Salinas worked consecutive hours as follows:

12/21/2025 from 7:00am – 12/22/2025 at 7:00am (24 hours consecutively)  
 12/24/2025 from 7:00pm – 12/26/2025 at 7:00am (36 hours consecutively)  
 12/26/2025 from 7:00pm – 12/27/2025 at 7:00pm (24 hours consecutively)  
 2/23/2026 from 7:00pm – 2/25/2026 at 7:00am (36 hours consecutively)

Ms. Heck worked consecutive hours as follows:

3/4/2026 at 7:00am – 3/7/2026 at 7:00pm (84 hours consecutively)  
 3/10/2026 from 7:00am – 3/11/2026 at 7:00pm (36 hours consecutively)  
 3/12/2026 from 7:00am – 3/13/2026 at 7:00pm (36 hours consecutively)  
 3/14/2026 at 7:00am – 3/17/2026 at 7:00am (72 hours consecutively)  
 3/18/2026 at 7:00am – 3/20/2026 at 7:00pm (60 hours consecutively)  
 3/21/2026 from 7:00am – 3/22/2026 at 7:00am (24 hours consecutively)  
 3/24/2026 from 7:00am – 3/25/2026 at 7:00pm (36 hours consecutively)  
 3/26/2026 from 7:00am – 3/27/2026 at 7:00pm (36 hours consecutively)  
 3/28/2026 from 7:00am – 3/29/2026 at 7:00am (24 hours consecutively)  
 3/31/2026 at 7:00am – 4/1/2026 at 7:00pm (36 hours consecutively)  
 4/2/2026 from 7:00am – 4/3/2026 at 7:00pm (36 hours consecutively)  
 4/4/2026 from 7:00am – 4/6 at 7:00pm (60 hours consecutively)  
 4/7/2026 from 7:00am – 4/8/2026 at 7:00pm (36 hours consecutively)  
 4/9/2026 at 7:00am – 4/10/2026 at 7:00pm (36 hours consecutively)  
 4/11/2026 at 7:00am – 4/12/2026 at 7:00am (24 hours consecutively)

<b>APPLICABLE RULE</b>	
<b>R 400.611</b>	<b>Required information; fee; posting of license; change of information.</b>
	<b>(4) An applicant or licensee shall give written notice to the department within 10 business days after a change occurs in information that was previously submitted in or with an application for a license.</b>

<b>ANALYSIS:</b>	<p>According to Mr. Pickett, Ms. Salinas, Mr. Murray and Ms. Heck, have lived in the facility at various times between the dates of December 2025 to present. Mr. Pickett acknowledged that he did not provide notice to the department as required and did not submit the required AFC-100 background check documentation.</p> <p>Based on the information above, Mr. Pickett did not provide written notice to the department regarding the implementation of live-in staff as a modification to his current license.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>APPLICABLE RULE</b>	
<b>R 400.621</b>	<b>Capability.</b>
	<b>Licensees, staff, volunteers, and members of the household shall be capable of ensuring the welfare of residents.</b>
<b>ANALYSIS:</b>	<p>According to Ms. Salinas and Mr. Murray, they slept during sleeping hours and also took naps during the daytime while on duty during the time that they worked at the facility. According to Ms. Heck, she sleeps during sleeping hours and acknowledged she works multi-day shifts independently at the facility.</p> <p>Ms. Salinas, Mr. Murray and Ms. Heck demonstrated a lack of capability to provide safe and effective care was compromised due to observed fatigue. This was evidenced by sleeping during sleeping hours and scheduled awake hours, taking unscheduled naps while on duty, and working extended shifts ranging from 24 to 72 hours consecutively without adequate rest.</p> <p>Based on the information above, Mr. Pickett failed to demonstrate sufficient capability in staffing oversight and scheduling practices. Mr. Pickett assigned staff to shifts of 24 – 72 consecutive hours without adequate rest, which created conditions that impaired staff capability, as evidenced by sleeping during awake shifts and napping while responsible for resident care.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>APPLICABLE RULE</b>	
<b>R 400.657</b>	<b>Bedrooms.</b>
	<b>(2) Living rooms, dining rooms, hallways, or other rooms that are not ordinarily used for sleeping, or a room that contains a required means of egress, must not be used for sleeping purposes by anyone.</b>

<b>ANALYSIS:</b>	<p>According to the <i>Floor Plan</i>, submitted by Mr. Pickett as part of his application process, the bedroom that Resident A was previously residing in, and that Ms. Heck is currently living in, is only approved as a common sitting area, and not for sleeping purposes.</p> <p>Based on the information above, there is sufficient information to confirm that the facility is using the common room area for sleeping purposes.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**INVESTIGATION:**

On 4/10/2026, I spoke to Mr. Pickett via telephone. I requested copies of the employee files for the nine direct care staff that have worked at the facility in the last six months. Mr. Pickett informed me that he was out of town but that he would have his staff send the documents to me by end of day. On 4/13/2026, I emailed Mr. Pickett and sent him a text message, notifying him that I would have to cite for all employee files not received. Mr. Pickett replied to the email with the following response:

*Good Afternoon Stephanie,*

*Again apologize for the delay in sending these documents. My former manager Lateece who resigned without notice early that was compiling all docs for me at our office. The attached docs are what I was able to gather for you. I am assuming that the remaining files are under her possession which I am trying to obtain. IN the meantime, I understand completely if you need to cite me for not producing the documents in time. In the future, I am restructuring the operations to ensure compliance moving forward. I pray you can understand and have mercy.*

I reviewed the *Employee Files* that Mr. Pickett sent to me on 4/13/2026, and determined the following missing documentation:

Aileen Hilario: Ms. Hilario began working at the facility on 2/26/2026 and is currently still employed. I was unable to locate any employee documentation related to Ms. Hilario.

Brandon Murray: Mr. Murray worked at the facility from 2/10/2026 – 2/21/2026. I was unable to locate documentation for Mr. Murray: Reporting Requirements, CPR/1<sup>st</sup> Aid, Resident Rights, Safety and Fire Prevention, Communicable Disease, and Food Safety/Nutrition; Medical Clearance (signed by a physician), Communicable Disease Screening, and verification of two reference checks

Lucinda (Cindy) Heck: Began working at the facility as a live-in staff on 3/3/2026 and currently still employed. However, Ms. Heck did not complete the following training until the following dates: Rights Training on 3/11/2026; Mandated Reporting on 3/22/2026; Universal Precautions on 3/22/2026, Medication Management on 3/23/2026. I was unable to locate the following documentation for Ms. Heck: Safety and Fire Prevention, Communicable Disease, and Food Safety/Nutrition, verification of two reference checks, Medical Clearance (signed by physician) and Communicable Disease Screening

Destine Rogers: Ms. Rogers began working at the facility on 2/23/2026 and is currently still employed. I was unable to locate documentation to confirm that Ms. Rogers has completed the following training: CPR/1<sup>st</sup> Aid, Reporting Requirements, Personal Care/Safety/Protection, Safety and Fire Prevention, and Food Safety/Nutrition

Ebony Blanding: Ms. Blanding began working at the facility on 1/2/2026 and is currently still employed. I was unable to locate documentation of the following training: Reporting Requirements, CPR/1<sup>st</sup> Aid, Resident Rights, Safety and Fire Prevention, Communicable Disease, and Food Safety/Nutrition,

Lauryn Stevenson: Ms. Stevenson began working at the facility on 1/2/2026 and is currently still employed. I was unable to locate the following documentation: Verification of two reference checks, Medical Clearance (signed by physician) and Communicable Disease Screening

Marla Lewis: Ms. Lewis began working at the facility on 1/3/2026 and is currently still employed. I was unable to locate documentation of the following trainings: Reporting Requirements, CPR/1<sup>st</sup> Aid, Resident Rights, Safety and Fire Prevention, Communicable Disease, and Food Safety/Nutrition

Navia Salinas: Ms. Salinas was a live-in staff at the facility from 12/21/2025 – 3/1/2026. I was unable to locate the following documentation: Verification of two reference checks, Medical Clearance (signed by physician) and Communicable Disease Screening

Latika Sills: Ms. Sills began working at the facility on 1/31/2026 and is currently still employed at the facility. I was unable to locate any documentation of the following training: Reporting Requirements, Resident Rights, Safety and Fire Prevention, Communicable Disease, Food Safety and Nutrition, Medical Clearance (signed by physician), Communicable Disease Screening and verification of two reference checks

<b>APPLICABLE RULE</b>	
<b>R 400.629</b>	<b>Direct care staff; qualifications and training.</b>

	<p><b>(5) A licensee or administrator shall provide in-service training or make training available through other sources to direct care staff. Direct care staff shall be trained and competent in all of the following areas before performing assigned tasks independently:</b></p> <ul style="list-style-type: none"> <li><b>(a) Reporting requirements.</b></li> <li><b>(b) First aid.</b></li> <li><b>(c) Cardiopulmonary resuscitation, which includes a hands-on demonstration as part of the training.</b></li> <li><b>(d) Personal care, supervision, and protection.</b></li> <li><b>(e) Resident rights.</b></li> <li><b>(f) Safety and fire prevention.</b></li> <li><b>(g) Prevention and containment of communicable diseases including recognizing signs of illness.</b></li> <li><b>(h) Food safety, which includes food storage, preparation, distribution, and serving in a safe manner.</b></li> <li><b>(i) Nutrition and special diets.</b></li> </ul>
<b>ANALYSIS:</b>	<p>According to the <i>Employee Files</i>, Mr. Murray, Ms. Hilario, Ms. Rogers, Ms. Blanding and Ms. Lewis did not complete CPR/1<sup>st</sup> Aid training. Mr. Murray, Ms. Hilario, Ms. Rogers, Ms. Blanding, Ms. Lewis and Ms. Sills did not complete Reporting Requirements. Mr. Murray, Ms. Hilario, Ms. Blanding, Ms. Lewis and Ms. Sills did not complete Resident Rights training. Mr. Murray, Ms. Hilario, Ms. Heck, Ms. Rogers, Ms. Blanding, Ms. Lewis and Ms. Sills did not complete Safety and Fire Prevention Training and Nutrition and Food Safety Training. Ms. Heck completed Reporting Requirements and Resident Rights training, however she completed these trainings approximately 1 – 2 weeks after moving into the facility and providing direct care to residents.</p> <p>Based on the information above, Mr. Pickett has failed to ensure that direct care staff are properly trained and competent in all of the required training courses prior to performing assigned tasks independently.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>APPLICABLE RULE</b>	
<b>R 400.631</b>	<b>Health screenings.</b>
	<p><b>(5) A licensee shall maintain documentation of a baseline screening for communicable diseases and records of illness on hiring. Staff who have direct physical contact with residents or resident food may perform those duties only when they are noninfectious or when proper precautions are taken to prevent the spread of a</b></p>

	<b>communicable disease. A licensee shall follow a staff's health care professional or local health department guidance on controlling the spread of a communicable disease when identified.</b>
<b>ANALYSIS:</b>	<p>According to the <i>Employee Files</i>, there was no verification of a communicable disease screening for Ms. Sills, Ms. Salinas, Ms. Stevenson, Ms. Heck, Mr. Murray, Ms. Hilario, Ms. Lewis and Ms. Blanding.</p> <p>Based on the information above, Mr. Pickett has failed to ensure that direct care staff have been properly screened for communicable diseases prior to having direct physical contact with residents.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>APPLICABLE RULE</b>	
<b>R 400.631</b>	<b>Health screenings.</b>
	<b>(2) A licensee shall have on file a statement signed by a licensed physician or physician's designee attesting to the physical health of the licensee, staff, and members of the household. Statements for the licensee and administrator must be signed no more than 6 months before the issuance of a temporary license and at any other time requested by the department. Statements for staff and members of the household must be obtained within 30 days of employment start date, assumption of duties, or occupancy in the facility.</b>
<b>ANALYSIS:</b>	<p>According to the <i>Employee Files</i>, there was no verification of a health screening signed by physician for Ms. Sills, Ms. Salinas, Ms. Stevenson, Ms. Heck, Mr. Murray, Ms. Hilario, Ms. Lewis, Ms. Blanding and Ms. Rogers.</p> <p>Based on the information above, Mr. Pickett has failed to obtain a health screening signed by a physician for direct care staff as required by licensing.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>APPLICABLE RULE</b>	
<b>R 400.639</b>	<b>Staff records.</b>
	<b>(1) A licensee shall maintain a record for each staff that contains all of the following:</b> <b>(f) Verification of not less than 2 reference checks. If reference checks cannot be obtained, documentation</b>

	<b>verifying reference checks were attempted must be maintained.</b>
<b>ANALYSIS:</b>	<p>According to the <i>Employee Files</i>, there was no verification of two reference checks for Ms. Sills, Ms. Salinas, Ms. Stevenson, Ms. Heck, Mr. Murray and Ms. Hilario.</p> <p>Based on the information above, Mr. Pickett failed to complete and/or maintain documentation of verification of two reference checks for each direct care staff.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**INVESTIGATION:**

On 4/10/2026, I spoke to Mr. Pickett, who stated that he has been utilizing the staffing agency, HireMe, LLC, operated by Mr. Antony. Mr. Pickett stated that he has been using this staffing agency for 1 ½ years. On 4/15/2026, Mr. Pickett provided a copy of the HireMe contract, dated 12/20/2025, signed approximately 14 months after HireMe, LLC. began providing staffing services to the facility. On 04/15/2026, I completed a LARA business entity search for Hire Me. I confirmed that Lijo Antony is the resident agent for HireMe, LLC.

According to the Bureau of Information Tracking System, Mr. Antony is had a denial of issuance on 02/11/2025 for Walnut Creek of Shelby (AS500418262) with Mr. Antony being listed as the Licensee Designee for the enrollment. Additionally, an unlicensed investigation was also completed for SIR#2024A0604005, with Mr. Antony as the property owner.

On 4/9/2026, I spoke to Ms. Salinas via telephone. Ms. Salinas stated, “Cyle told us that Lijo bought his company, so now Lijo and a woman named Jen Hiller are our bosses. Lijo oversees all the staff, and he does all the hiring and firing for the home too.”

On 4/14/2026, I spoke to Mr. Murray via telephone. Mr. Murray stated, “When I was working there, Cyle came to the facility one day and told me Lijo was taking over. Cyle told me he merged with The Meadows. I quit shortly after that.”

On 4/14/2026, I spoke to Ms. Heck via telephone. Ms. Heck stated, “I was hired by Lijo to work here. He is my boss and my point of contact for anything I might need. If there are any complaints or concerns, I go to Lijo. He comes to the facility. He has met the residents and families. He will stop by to ask if we need anything.”

On 4/14/2026, I spoke to Ms. Sills via telephone. Ms. Sills stated, “I was told by Cyle that he has merged with Lijo’s company. Lijo is our boss now. Lijo came out recently to the facility to install cameras. Technically, if we need something or a resident issue, we are supposed to call Lijo and Cyle both.”

On 4/16/2026, I spoke to Lijo Antony, via telephone. Mr. Antony stated, “I have a company called HireMe, LLC and I supply staffing to Mr. Pickett. I provide staff to Cyle, or I find staff through Indeed, and forward their information to Cyle and he completes the hiring process. I have no ties to the facility, but I will call the families if a family has an issue or concern of how staff are providing care. Cyle will send me the information for any concerns and then I will follow up. I find staff for him and then he does all the rest. I am not going to the facilities, but sometimes new staff need a ride to the facility, and I will give them a ride there and introduce them. And if I am in the area and driving by, I will stop at the facility to check in on the staff since they are my staff.

On 4/20/2026, I spoke to Guardian B1 via telephone. Guardian B1 stated, “In February 2026, I was told by direct care staff that Cyle merged with Lijo’s company and that he had expanded.”

On 4/20/2026, I spoke to Guardian C1 via telephone. Guardian C1 stated, “On 3/2/2026, I was contacted by Mr. Pickett, He told me he had merged with Lijo’s company and now owned the Meadows facilities. When I arrived at one of the Meadows facilities to move Resident C there, both Mr. Pickett and Lijo were there and they both told me they now co-own all the facilities together.”

On 4/20/2026, I spoke to Guardian D1 via telephone. Guardian D1 stated, “I visit the facility 4 – 5 times per week. I have seen Lijo at the facility in the last few months. He was at the facility in February 2026 when I was there. I have seen him at the facility twice and I have spoken to him. Cyle and Lijo both told me they had merged.”

On 4/24/2026, I conducted an Exit Conference with licensee designee and administrator, Cyle Pickett, via telephone. Mr. Pickett stated, “I am still the owner of the corporation. I was using Mr. Antony for supplemental assistance. When moving so quickly, When you’re moving too fast, you miss something, and that’s what happened here. Mr. Pickett stated that he is uncertain if he will accept the issuance of a provisional license.”

<b>APPLICABLE RULE</b>	
<b>R 400.611</b>	<b>Required information; fee; posting of license; change of information.</b>
	<b>(1) An applicant or licensee shall maintain the following documents: (g) Agreements or contracts with other organizations to provide care, treatment, or supplemental services that are required by the act or these rules.</b>

<b>ANALYSIS:</b>	<p>According to the <i>HireMe, LLC. Contract</i>, Mr. Pickett utilized Mr. Antony's staffing agency for supplemental services for approximately 14 months prior to obtaining and completing the necessary contract.</p> <p>Based on the information above, Mr. Pickett did not complete the required contract agreement with Mr. Antony prior to contracting HireMe, LLC. for supplemental staffing services.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

<b>APPLICABLE RULE</b>	
<b>MCL 400.722</b>	<p><b>License required; application; forms; investigation; on-site evaluation; issuance or renewal of license; disclosures; maximum number of persons; stating type of specialized program; issuance of license to specific person at specific location; transferability of license; sale of facility; notice; items of noncompliance; refusal by department to issue or renew license; conditions; unlicensed facility; violation as misdemeanor; penalty; receipt of completed application; issuance of license within certain time period; inspections; report; criminal history and records check; storage of fingerprints in automated fingerprint identification system database; convictions; "completed application" defined.</b></p>
	<p><b>(2) The department may deny, suspend, revoke, or modify an application for licensure or a license of a licensee if the department determines that the applicant or licensee has a relationship with a former applicant whose application under this act has been denied or a former licensee whose license under this act has been suspended, revoked, or refused renewal under this section or section 13(9) or a convicted person to whom a license has been denied under section 13(9). This subsection applies for 10 years after the suspension, revocation, or refused renewal of the former licensee's license, the denial of the former applicant's application for licensure, or the denial of the convicted person's application for licensure. As used in this subsection, an applicant has a relationship with a former licensee or convicted person if the former applicant, licensee, or convicted person is involved with the facility in 1 or more of the following ways:</b></p> <p><b>(a) Participates in the administration or operation of the facility.</b></p> <p><b>(b) Has a financial interest in the operation of the facility.</b></p> <p><b>(c) Provides care to residents of the facility.</b></p> <p><b>(d) Has contact with residents or staff on the premises of the facility.</b></p>

	<p><b>(e) Is employed by the facility.</b></p> <p><b>(f) Resides in the facility.</b></p>
<b>ANALYSIS:</b>	<p>According to Mr. Pickett, he has been using the staffing company, HireMe,LLC., which is owned by Lijo Antony, to assist with hiring staff, for the last 1 ½ years.</p> <p>According to Ms. Salinas, Mr. Murray, Ms. Heck and Ms. Sills, they were told by Mr. Pickett that his company merged with Mr. Antony's company. Ms. Salinas, Mr. Murray, Ms. Heck and Ms. Sills stated they were directed by Mr. Pickett that Mr. Antony was now their boss and point-of-contact for direct care staff needs. According to Ms. Sills and Ms. Heck, Mr. Antony has been on site at the facility to assist with direct care staffing needs and to make modifications to the physical plant.</p> <p>According to Guardian D1, she has observed Mr. Antony at the facility on at least two separate occasions.</p> <p>There is sufficient evidence to conclude that Mr. Pickett has a relationship with Mr. Antony as Mr. Antony has contact with direct care staff and families and is also employing staff on the premises of the facility.</p>
<b>CONCLUSION:</b>	<b>VIOLATION ESTABLISHED</b>

**IV. RECOMMENDATION**

Based on numerous quality of care violations and a relationship with Mr. Antony, I recommend the issuance of a six-month provisional license.

*Stephanie Gonzalez*

4/24/2026

Stephanie Gonzalez  
Licensing Consultant

Date

Approved By:

*Jay Caluverts*

For

04/24/2026

Denise Y. Nunn

Date

Area Manager