



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

September 1, 2026

Cyle Pickett
The Franklin House
7439 Middlebelt Rd
West Bloomfield, MI 48322

RE: License #: AS630418745
Investigation #: 2026A0465034
The Franklin House

Dear Mr. Pickett:

Attached is the Special Investigation Report for the above-referenced facility. Due to the severity of the violations, disciplinary action against your license is recommended. You will be notified in writing of the department's action and your options for resolution of this matter.

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, LCSW
Adult Foster Care Licensing Consultant
Bureau of Community and Health Systems
Department of Licensing and Regulatory Affairs
Cadillac Place
3044 West Grand Boulevard
2nd Floor Annex, Suite 2-730
Detroit, MI 48202

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS630418745
Investigation #:	2026A0465034
Complaint Receipt Date:	06/18/2026
Investigation Initiation Date:	06/23/2026
Report Due Date:	08/17/2026
Licensee Name:	The Franklin House
Licensee Address:	5575 Franklin Rd Bloomfield Hills, MI 48301
Licensee Telephone #:	(248) 986-4546
Administrator:	Cyle Pickett
Licensee Designee:	Cyle Pickett
Name of Facility:	The Franklin House
Facility Address:	5575 Franklin Rd Bloomfield Hills, MI 48301
Facility Telephone #:	(248) 986-4546
Original Issuance Date:	01/29/2025
License Status:	REGULAR
Effective Date:	07/29/2025
Expiration Date:	07/28/2027
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED AGED; ALZHEIMERS

II. ALLEGATION(S)

	Violation Established?
Licensee designee and administrator, Cyle Pickett, has continued to allow Lijo Antony to participate in the operation of the facility.	Yes
Additional Findings	Yes

III. METHODOLOGY

06/18/2026	Special Investigation Intake 2026A0465034
06/23/2026	Special Investigation Initiated - On Site I conducted an onsite investigation. I completed a walk-through of the facility, observed residents, interviewed direct care staff, Faith Alcott and Donavon White
06/23/2026	Contact - Telephone call made I spoke to licensee designee/administrator, Cyle Pickett, via telephone while onsite at the facility
06/23/2026	APS Referral Adult Protective Services Referral not submitted due to no allegations of abuse or neglect
07/31/2026	Contact - Document Sent Email exchange with Mr. Pickett
07/31/2026	Contact - Telephone call made I spoke to direct care staff, Salena Baldwin, via telephone
08/03/2026	Contact - Document Received Email exchange with Mr. Pickett
08/04/2026	Contact - Document Sent Email exchange with Mr. Pickett. Extended deadline for paperwork to 8/5/2026 at 12pm
08/05/2026	Contact – Document Sent Email and text exchange with Mr. Pickett; Mr. Pickett stated he is requesting all communication to occur in writing
08/19/2026	Exit Conference

	I sent Mr. Pickett an email, stating that this investigation is completed and that he can will receive a copy of the report via postal mail
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ALLEGATION:

Licensee designee and administrator, Cyle Pickett, has continued to allow Lijo Antony to participate in the operation of the facility.

INVESTIGATION:

On 6/18/2026, I conducted an unannounced onsite investigation at another adult foster facility operated by licensee designee/administrator, Cyle Pickett, under special investigation #2026A0465033. During this onsite investigation, I spoke to direct care staff, Paulette Pacheco. Ms. Pacheco showed me a phone app called, ConnectTeam, dated 6/9/2026. I was informed by Ms. Pacheco that this app is the primary tool used for all staff communications and updates. I observed a message dated 6/9/2026, which stated the following:

6/9/2026; Message was from Lijo Antony, titled, "Updates," and stated the following:

"Dear team, I am excited to announce some significant changes within our organization aimed at enhancing operational efficiency and ensuring smoother management across our communities. After thorough consideration, we have decided to rebuild the company structure and delegate responsibilities more effectively to make management more manageable and responsive. Effective June 8, 2026, we are promoting two outstanding team members, Nyeiko Hylton and Sunshine Ramos, to the roles of Community Managers. Please join me in congratulating them on their new appointments. As they transition into these roles, I kindly ask everyone to allow them the necessary time to adjust, complete their training, and provide them with your full support to succeed. Below are the details regarding the new community assignments: - Nyeiko Hylton will oversee Meadows Mt. Clemens. - Sunshine Calamayan will manage Meadows of Troy, Troy House, Bloomfield, and Franklin. - Jen Hiller will continue to manage Barns Senior Living, Shelby House, Adams, and Beacon. Each of these managers will carry the responsibility of overseeing all resident and staff affairs within their respective communities. They will be the primary contacts for families, admissions, physician group rounds, and will be tasked with ensuring the highest quality of service delivery. Please make sure to communicate with them during business hours and allow them ample time to address and resolve any issues. Additionally, Jen will retain her existing duties related to scheduling, hiring, payroll, and broader management responsibilities, with assistance from Amanda. Cyle Pickett will guide the higher management division, supporting business operations and development. Amanda will continue to manage office

administration and ensure that the entire team performs at their best. We have also implemented the ConnectTeam platform to improve our internal communication. Please refrain from calling Jen or Amanda directly for concerns. Instead, use the chat feature within ConnectTeam to message the relevant team member directly unless it is an emergency. This will help streamline communication and ensure timely responses. For your convenience, here are the direct contacts for the new community managers and management team [Omitted: all staff listed above were referenced, along with their phone numbers and email addresses]. Thank you all for your cooperation and dedication during this transition. Together, we will continue to uphold the highest standards of care and service. We are also excited about our new software implementation starting next week to ensure care delivery and documentation is at high standards. We will be scheduling trainings at different locations starting next week. Please feel free to reach out if you have any questions or concerns about these changes. Thank you Best regards, Lijo Antony”

Based on the above information, a special investigation was opened for this facility.

On 7/24/2026 at 9:30am, I attended a Microsoft Teams conference call with Mr. Pickett, AFC licensing consultant, Kristine Ciluffo, and acting area manager, Kristen Donnay. Mr. Pickett was provided with an email copy of the ConnectTeam message dated 6/9/2026 at the time of this call, as well as the information provided to me from Ms. Pacheco and Ms. Henry regarding their interactions with Mr. Antony. Mr. Pickett stated, “ConnectTeam is a team chat that I use to directly manage my facilities. I am denying Lijo’s involvement with my homes. He is not involved. I did not know about his disciplinary action until several months ago when I was told by you. I ended the business relationship with Lijo. He operates as the landlord for several of my properties still, but that is all. I ended the business relationship with Lijo. He has no involvement. It’s so fresh in staff’s minds, it’s confusing. This message was a message that was sent out to restructure the company and to notify everyone that Lijo was no longer going to be involved. That was the intent of the message. I drafted and copied and pasted this message myself.”

On 7/24/2026 at 12:34pm, I received a telephone call from Mr. Pickett. Mr. Pickett stated, “I am calling to ask for another chance. I can see how the [ConnectTeam] messages appear, but that is not what it is. I am going to be honest and trust you right now. I have not disclosed that I was in the process of merging with Lijo, we were almost about to merge our companies and then you did the investigation and I found out about his restriction. There was a planned merger before everything happened. I cut ties with Lijo several months ago. But I did reach out to him a few weeks ago because I needed staff and I was desperate. He has been more involved, but he is not anymore. I thought when I was told Lijo could not be involved, it was referring to the day to day, such as administering medication and overseeing the operations in the home. How does sending a message show that Lijo is still involved?”

On 7/24/2026 at 3:40pm, I received an email from Mr. Pickett, which stated the

following:

I sent you all a text earlier and am simply pleading for my beautiful AFC homes that I have worked diligently over the years to establish. I understand this announcement [ConnectTeam message] may suggest that Mr. Antony had a leadership role. The purpose of this communication was to announce an internal restructuring and identify the individuals who would be responsible for daily operations. As reflected in the announcement, operational responsibility was assigned to the Community Managers, while I was responsible for higher-level business operations and development. Mr. Antony was not designated as the manager of any licensed AFC home in this communication. After I became aware of the State's concerns regarding Mr. Antony's eligibility, I have worked diligently to take steps to remove him entirely from any involvement with my licensed facilities. As mentioned on call, He no longer has any ownership interest, management authority, operational responsibilities, supervisory role, access to records, or ability to direct employees or make decisions concerning the AFC homes. I'm praying that you guys can take this into consideration and grant us an opportunity to fix this so that we can focus on our residents.

On 7/31/2026, I spoke to direct care staff, Salena Baldwin. Ms. Baldwin stated, "I have worked at the facility since May 2026. I have met Cyle and Lijo [Antony]. I met Lijo two weeks ago. He was at the staff meeting that I attended at the Mt. Clemens facility. He and Cyle were both there. Lijo was part of the meeting to discuss staff duties. I am not sure if he is an owner or not. If there is an emergency or I need to contact a manager, I call Cyle, Lijo or Jen [Hiller]. I was working at the facility this past Monday [7/27/2026] and there was a contact list hanging for us to use if we need to call anyone. One of the names on the sheet is Lijo." Ms. Baldwin sent me a copy of the document via text message. I reviewed the document titled *Contact List*, which listed Lijo Antony's name with the title of "Owner and Administrator."

On 4/24/2026, I completed a prior special investigation at The Troy-Modern Assisted Living, SIR #2026A0465015, in which a violation was established for MCL 400.722(2). During the investigation, it was determined that the licensee designee, Cyle Pickett, had been utilizing the staffing agency, HireME, LLC, operated by Lijo Antony, to staff the facility. Mr. Antony had a denial of issuance for an adult foster care facility on 02/11/2025 and is not permitted to have a "relationship" with a licensed adult foster care facility for a period of five years. During the investigation, staff at The Troy-Modern Assisted Living indicated that there had been a company merger between Mr. Pickett and Mr. Antony, and they stated that they had regular contact with Mr. Antony, using him as a point of contact for direct care staff needs. On 4/24/2026, due to the significant number and seriousness of the rule violations, a six-month provisional license was recommended. On 5/19/2026, Mr. Pickett submitted a corrective action plan stating that he terminated his contract with HireMe, LLC effective May 2026. On 5/22/2026, a six-month provisional license was issued.

On 04/20/2026, the department sent an email to Lijo Antony indicating that it had been brought to the attention of the department that Mr. Antony created a staffing agency by the name of "HireMe" and was providing staff through the staffing agency to another AFC licensee, Cyle Pickett. It was noted that this is in direct conflict with the Adult Foster Care Facility Licensing Act, specifically MCL 400.713 (11) and MCL 400.722 (2). The email indicated that Mr. Antony had established a "relationship" with Cyle Pickett by providing staff to his licensed facilities, which also resulted in a financial interest. The email noted that this relationship puts Cyle Pickett's AFC licenses in jeopardy of licensing action and is in violation of the law. Mr. Antony was advised to cease relationships with current AFC licensees in accordance with MCL 400.713 (11) and 400.722 (2).

On 4/20/2026, Mr. Antony sent an email. Mr. Antony noted that he was not aware that providing staff to an AFC facility through his staffing agency was not permitted under the current arrangements. He stated that once staff are hired by any company, they cease to be employees of HireMe, so he believed this exempted them from any issues. Mr. Antony stated that he could now recognize where potential conflicts of interest may arise, and he promptly decided to terminate all existing relationships with both HireMe and Cyle's AFC. He stated, "I assure you unequivocally that we have ceased all relations with HireMe, Cyle's AFC, and any other AFCs."

On 8/4/2026, Mr. Pickett sent an email which included a document titled, *Termination Agreement*, with an effective date of 4/21/2026. The document, in part, stated that Mr. Pickett and HireMe, LLC agreed to terminate their prior business relationship in its entirety effective 4/21/2026. The document stated that there would be no new placements or staffing assignments. The document stated that any ongoing placements or staffing assignments in progress shall be concluded within a 60-day transition period (end date of 6/20/2026). This document was never submitted to LARA prior to 8/2/2026 and was not approved as part of Mr. Pickett's written corrective action plan he submitted on 5/19/2026.

On 8/7/2026, I completed a second prior special investigation at The Troy-Modern Assisted Living, SIR #2026A0465033, in which a repeat violation was established for MCL 400.722(2). During the investigation, it was determined that the licensee designee, Cyle Pickett, has continued to utilize the staffing agency, HireME, LLC, operated by Lijo Antony, to staff the facility as well as allowing Mr. Antony to be involved with the facility operations on a management level. Mr. Antony had a denial of issuance for an adult foster care facility on 02/11/2025 and is not permitted to have a "relationship" with a licensed adult foster care facility for a period of five years. During the investigation, staff at The Troy-Modern Assisted Living indicated that they had been interviewed and hired by Mr. Antony and that he is a point of contact for direct care staff needs. On 8/7/2026, due to the significant number and seriousness of the rule violations, revocation of the license was recommended.

On 8/19/2026, I conducted an Exit Conference with Mr. Pickett via email, per his request. I notified Mr. Pickett of the revocation recommendation and that he will receive a copy of the report via postal mail.

APPLICABLE RULE	
MCL 400.722	Denying, suspending, revoking, refusing to renew, or modifying license; grounds; written notice; hearing; decision; protest; receiving or maintaining adults requiring foster care as felony; penalty; relocation services.
	(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: (a) Participates in the administration or operation of the facility. (b) Has a financial interest in the operation of the facility. (c) Provides care to residents of the facility. (d) Has contact with residents or staff on the premises of the facility. (e) Is employed by the facility. (f) Resides in the facility.
ANALYSIS:	According to Cyle Pickett and Lijo Antony, the relationship between Mr. Pickett's licensed adult foster care facility and Mr. Antony's staffing agency ceased effective 4/20/2026. According to the ConnectTeam messages dated 6/8/2026, Mr. Antony sent a message in which he referenced - staff promotions, staff directives, management restructuring and upcoming training to be offered at a future time. I did not read any information in the message that stated Mr. Antony was severing ties with Mr. Pickett's limited liability company or facility.

	According to Ms. Baldwin, she attended a staff meeting during the month of July 2026. Ms. Baldwin stated that Mr. Antony and Mr. Pickett were both present at this meeting and discussed staffing duties. Based on the information above, there is sufficient information to confirm that Mr. Pickett continues to have a relationship with Mr. Antony. Mr. Antony sent electronic communications to direct care staff via ConnectTeam and attended a staff meeting to discuss staff duties. Mr. Antony's involvement in Mr. Pickett's facility extends beyond that of a landlord.
CONCLUSION:	VIOLATION ESTABLISHED

ADDITIONAL FINDINGS:

INVESTIGATION:

On 6/23/2026, I conducted an onsite investigation at the facility. The home specializes in caring for the Alzheimer's/aged population and is licensed for a capacity of six residents. I completed a walk-through of the facility, observed residents and interviewed direct care staff, Faith Alcott and Donavon White. At the time of my onsite investigation, there were seven residents residing at the facility. I completed a walkthrough of the home and observed seven residents' bedrooms that were labeled with each resident's name on a piece of paper, taped to the front of each bedroom door. The seven bedrooms belonged to Resident A, Resident B, Resident C, Resident D, Resident E, Resident F and Resident G.

I spoke to direct care staff, Faith Alcott, who stated that she has worked at the facility for three weeks. Ms. Alcott stated that she is a live-in staff member. Ms. Alcott stated, "I live in the home and have been living here for three weeks. There are seven residents living here right now."

I spoke to direct care staff, Donavon White, who stated that he has worked at the facility for one week. Mr. White stated, "I have been working here almost a week. There are seven residents living here, but [Resident D] is at a doctor's appointment and will be back later."

While onsite at the facility, I called licensee designee and administrator, Cyle Pickett, to inform him of my onsite investigation. During this phone call, I asked Mr. Pickett for clarification on the live-in staff and the resident ratio being over capacity. Mr. Pickett stated, "I do have a live-in staff at the facility. I did not do the AFC-100 for the staff, but I do have the required employee files completed. We had to transfer a resident from next door to here. That is why I am over capacity."

On 6/23/2026, during the phone call with Mr. Pickett, I informed him that I needed the following documents via email: Resident Registrar, resident and employee files, employees and legal guardian's contact names/numbers and the staff schedule for the last 90 days. I also left a list of the items requested with Ms. Alcott.

On 6/24/2026 and 8/1/2026, I completed a search of the *Bureau of Information Tracking System* (BITS) and the *Workforce Background Check System* (WFBC). I observed the following discrepancies:

Faith Alcott: Ms. Alcott was entered into the system as a new hire on 6/11/2026 and deemed eligible on 6/30/2026, approximately four weeks after she began working at the facility as a live-in staff. Ms. Alcott was entered into BITS on 8/1/2026 as a member of the household, approximately two months after she began working at the facility as a live-in staff. On 6/4/2026, Ms. Alcott was entered into the WFBC System and deemed eligible under a separate licensed facility, Shelby AL (AS500419642), which is also operated by Mr. Pickett.

Donavon White: According to the WFBC System, Mr. White has never been entered into the system as a new hire, nor has he completed the required fingerprinting/criminal background check.

On 7/31/2026, I completed a secondary review of the Workforce Background Check System in order to obtain a list of direct care staff working at the facility. I determined that there were seven direct care staff employed at the facility as follows: Sherlin Austin, Diane Rutledge, Kaila Hampton, Latika Sills, Erinn Williamson, Salena Baldwin, Jumari Travis, Ronie Sunshine Calamayan, Faith Alcott, Keiry Ahman and Jennifer Hiller. Mr. White was not listed in the system.

On 7/31/2026, I spoke to Mr. Pickett via email exchange regarding the facility documents I previously requested on 6/23/2026. Mr. Pickett stated that he never received an email request for the documents and requested I sent him the list of items needed. On 8/1/2026, I sent a follow-up email to Mr. Pickett, which included the list of documents requested. On 8/3/2026, Mr. Pickett sent an email response, stating that he did not feel sufficient time was being provided to gather and submit documents.

On 8/4/2026, I emailed Mr. Pickett and notified him that I would extend the deadline to submit the requested documents to me via email by 8/5/2026 at 12:00pm. As of the date of this report, Mr. Pickett has not provided the requested documents. Mr. Pickett's failure to provide the requested facility documents impeded the investigation by limiting my ability to obtain contact information for staff and legal guardians for interview purposes and to review facility records necessary to assess compliance with applicable AFC rules.

APPLICABLE RULE	
MCL 400.734b	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.
	(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 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.
ANALYSIS:	According to BITS, Ms. Alcott did not complete the required AFC-100 criminal history background check prior to moving into the facility as a live-in staff. Ms. Alcott was entered into BITS on 8/1/2026 as a member of the household, approximately two months after she began working at the facility as a live-in staff. According to the WFBC System, Ms. Alcott was fingerprinted and deemed eligible to work at the facility on 6/30/2026,

	approximately four weeks after she began working at the facility as a direct care staff. According to the WFBC System, Mr. White has never been entered into the system as a new hire, nor has he completed the required fingerprinting/criminal background check. Based on the information above, Mr. Pickett did not complete the required criminal history background checks for direct care staff prior to allowing them to live in the home and have direct access to residents.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.605	Rule compliance; cooperation by applicant or licensee.
	(2) An applicant or licensee shall cooperate with the department to determine compliance with the act and these rules during the review of an application and during an inspection or investigation.
ANALYSIS:	On 6/23/2026, 7/31/2026, 8/1/2026 and 8/4/2026, I informed Mr. Pickett of the request for facility documents as part of my investigation. As of the date of this report, Mr. Pickett has not provided the requested documents. Mr. Pickett's failure to provide the requested facility documents willfully and substantially impeded the investigation by limiting my ability to obtain contact information for staff and legal guardians for interview purposes and to review facility records necessary to assess compliance with applicable AFC rules. Based on the information above, there is sufficient information to confirm that Mr. Pickett has not cooperated and complied with submission of adult foster care documents for the purposes of this special investigation.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.613	Licensed capacity, occupants.

	(1) The number of residents and number of resident beds must not be greater than the capacity authorized on the license.
ANALYSIS:	On 6/23/2026, I observed the facility to have seven residents residing at the facility, despite the home only being licensed for a capacity of six residents. According to Mr. Pickett, he admitted that seven residents were residing in the home and that he has exceeded the maximum capacity of residents. Based on Mr. Pickett's admission and experience as a licensee designee and administrator, this violation is determined to be willful and substantial. Mr. Pickett has failed to maintain the resident capacity authorized on his license.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.615	Resident register.
	A licensee shall maintain a chronological register of all residents admitted that includes the following information for each resident: (a) Resident full name. (b) Resident date of birth. (c) Date of admission. (d) Date of discharge and location, if known, where the resident moved.
ANALYSIS:	On 6/23/2026, 7/31/2026, 8/1/2026 and 8/4/2026, I informed Mr. Pickett of the request for facility documents as part of my investigation. As of the date of this report, Mr. Pickett has not submitted the medical clearances/health screenings for Ms. Alcott, Mr. White, Sherlin Austin, Diane Rutledge, Kaila Hampton, Latika Sills, Erinn Williamson, Salena Baldwin, Jumari Travis, Ronie Sunshine Calamayan, Keiry Ahman and Jennifer Hiller. Based on the information above, I am unable to confirm that direct care staff are in good physical health to provide direct care to residents.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.621	Capability.
	Licensees, staff, volunteers, and members of the household shall be capable of ensuring the welfare of residents.
ANALYSIS:	Mr. Pickett has demonstrated an inability or unwillingness to ensure the welfare of the residents and maintain compliance with AFC licensing requirements. Mr. Pickett knowingly operated the facility over its license capacity, failed to provide requested direct care staff files and staff schedules, and failed to provide the resident records for seven residents. These omissions prevented the ability to verify that staff providing care were properly trained, qualified, experienced and medically cleared. The absence of resident records prevented the review of resident's assessment plans to determine whether their individual needs were being appropriately addressed. Collectively, Mr. Pickett's actions and failure to provide required documentation demonstrate a willful and substantial failure to maintain the capability to assure the welfare of the residents and to operate the facility in compliance with applicable AFC rules.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.639	Staff records.
	(1) A licensee shall maintain a record for each staff that contains all of the following: (a) Name, address, telephone number, and Social Security number. (b) Copy or number of a professional or vocational license, certification, or registration if staff provides professional or vocational services. (c) Copy of a driver's license if staff provide transportation services. (d) Verification of age. (e) Verification of experience, highest level of education completed, and training. (f) Verification of not less than 2 reference checks. If reference checks cannot be obtained, documentation verifying reference checks were attempted must be maintained.

	(g) Beginning and ending dates of employment on separation. (h) Health information as required by these rules. (i) Verification of the receipt by the staff of personnel policies and job descriptions. (2) Records identified in subrule (1) of this rule must be maintained for 2 years after the staff's ending date of employment. (3) A licensee shall maintain for 90 days a daily work schedule and assignments that includes all of the following: (a) Names of staff on duty. (b) Job titles. (c) Hours or shifts worked. (d) Date of schedule. (e) Scheduling changes when made.
ANALYSIS:	On 6/23/2026, 7/31/2026, 8/1/2026 and 8/4/2026, I informed Mr. Pickett of the request for facility documents as part of my investigation. As of the date of this report, Mr. Pickett has not submitted the staff records for Ms. Alcott, Mr. White, Sherlin Austin, Diane Rutledge, Kaila Hampton, Latika Sills, Erinn Williamson, Salena Baldwin, Jumari Travis, Ronie Sunshine Calamayan, Keiry Ahman and Jennifer Hiller. Mr. Pickett failed to provide the requested direct care staff files and staff schedules. As a result, I was unable to verify whether the seven direct care staff who provided care to residents at the facility had completed the required training, met the required education and experience qualifications and obtained the required medical and communicable disease clearances. The absence of staff schedules also prevented me from determining which individuals were working at the facility during the last three months. Based on Mr. Pickett's failure to provide the requested records, this violation is determined to be willful. The violation is substantial as the lack of required personnel records prevented verification that individuals providing direct care to residents were properly qualified, trained, and medically cleared as required by AFC rules.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE

R 400.691	Resident records.
	(1) A licensee shall complete and maintain a separate record for each resident that includes all of the following: (a) Personal information including all of the following: (i) Resident's full name. (ii) Social Security number. (iii) Date of birth. (iv) Marital status. (v) Veteran's status. (vi) Gender identity. (vii) Former address. (viii) Name, address, and contact information of identified contact or designated representative. (ix) Name, address, and contact information of the person and agency responsible for the resident's placement in the facility. (x) Funeral provisions, preferences, and contact information. (xi) Resident's religious preference. (b) Date of admission. (c) Date of discharge and address to where the resident moved. (d) Health care information including all of the following: (i) Health care appraisals. (ii) Medication administration record. (iii) Name, address, and contact information of the preferred health care professional and hospital. (iv) Medical insurance. (v) Statements and instructions for supervising prescribed medication including dietary supplements and medical procedures. (vi) Instructions for emergency care and advanced medical directives. (e) Resident care agreement. (f) Assessment plan. (g) Admission and monthly weight record. (h) Incident reports. (i) Resident funds and valuables record and resident refund agreement. (j) Resident grievances. (k) Resident discharge notice. (2) A resident's grievance must be maintained and include the nature of the grievance, the date of the grievance, and a statement indicating how the grievance was addressed.

	(3) Resident records must be kept on file in the facility for 2 years after the date of resident discharge unless a shorter retention is specified elsewhere in these rules.
ANALYSIS:	On 6/23/2026, 7/31/2026, 8/1/2026 and 8/4/2026, I informed Mr. Pickett of the request for facility documents as part of my investigation. As of the date of this report, Mr. Pickett has not submitted the resident records for Resident A, Resident B, Resident C, Resident D, Resident E, Resident F and Resident G. Mr. Pickett's failure to provide resident files limited my ability to review residence assessment plans and other required resident records to determine whether the resident's needs have been properly assessed in accordance with their needs and AFC requirements. The violation is substantial as the absence of the resident records prevented me from determining whether the seven residents were appropriately assessed in receiving care consistent with their identified needs and required AFC documentation. Based on the information above, I am unable to confirm that Mr. Pickett obtained and retained all of the required documents for all seven residents as required per adult foster care licensing rules.
CONCLUSION:	VIOLATION ESTABLISHED

IV. RECOMMENDATION

I recommend revocation of the adult foster care license.

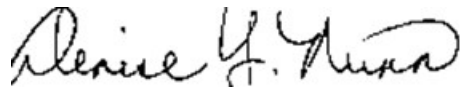
Stephanie Gonzalez

8/19/2026

Stephanie Gonzalez
Licensing Consultant

Date

Approved By:



08/19/2026

Denise Y. Nunn
Area Manager

Date