



GRETCHEN WHITMER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS
LANSING

MARLON I. BROWN, DPA
DIRECTOR

April 16, 2026

Cyle Pickett
7439 Middlebelt Suite 2
West Bloomfield, MI 48322

RE: License #: AS500419642
Investigation #: 2026A0604013
The Shelby AL

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, 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 .

Sincerely,

A handwritten signature in cursive script that reads "Kristine Cilluffo".

Kristine Cilluffo, Licensing Consultant
Bureau of Community and Health Systems
Cadillac Place
3026 West Grand Blvd Ste 9-100
Detroit, MI 48202
(248) 285-1703

enclosure

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

I. IDENTIFYING INFORMATION

License #:	AS500419642
Investigation #:	2026A0604013
Complaint Receipt Date:	03/02/2026
Investigation Initiation Date:	03/03/2026
Report Due Date:	05/01/2026
Licensee Name:	Cyle Pickett
Licensee Address:	1346 Arbor Creek Dr ROCHESTER HILLS, MI 48306
Licensee Telephone #:	(248) 986-4546
Administrator:	Cyle Pickett
Licensee Designee:	Cyle Pickett
Name of Facility:	The Shelby AL
Facility Address:	46496 Kramer Dr Shelby TWP, MI 48315
Facility Telephone #:	(313) 986-4546
Original Issuance Date:	10/24/2025
License Status:	TEMPORARY
Effective Date:	10/24/2025
Expiration Date:	04/23/2026
Capacity:	6
Program Type:	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

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II. ALLEGATION(S)

	Violation Established?
Staffing at The Shelby AL may be inadequate to safely assist multiple non-ambulatory residents in an emergency.	Yes
Additional Findings	Yes

III. METHODOLOGY

03/02/2026	Special Investigation Intake 2026A0604013
03/03/2026	APS Referral Adult Protective Services (APS) referral denied and sent to licensing
03/03/2026	Special Investigation Initiated - Letter Email to Cyle Pickett. Requested staff schedules, resident assessment plans, resident information records, resident register and fire drills.
03/04/2026	Contact - Document Received Email from Cyle Pickett. Sent return email.
03/05/2026	Inspection Completed On-site Completed unannounced onsite investigation. Interviewed Staff, Tyesha Donaldson, Resident B and Relative 1. Observed Resident A, Resident C, Resident D and Resident E.
03/05/2026	Contact - Document Received Email from Cyle Pickett. Sent return email.
03/05/2026	Contact - Telephone call made TC from Cyle Pickett. TC to Cyle Pickett at onsite investigation
03/12/2026	Contact - Document Received Received licensing documents from Licensee, Cyle Pickett
03/17/2026	Contact - Document Sent Email to Cyle Pickett. Received email with staff schedules from Cyle Pickett

04/07/2026	Contact - Document Sent Email to Cyle Pickett re: staff clearances
04/07/2026	Contact - Document Sent Email to Cyle Pickett requesting employee records
04/09/2026	Contact - Face to Face Face to Face Meeting with Cyle Pickett at The Beacon
04/13/2026	Contact- Document Sent Email to Cyle Pickett
04/13/2026	Contact- Document Received Received email from Cyle Pickett with employee records, clearances, Durable Medical Equipment (DME) orders and fire drills. Sent return email.
04/15/2026	Contact- Document Sent Sent email to Cyle Pickett with special investigation findings
04/16/2026	Exit Conference Completed exit conference with Licensee, Cyle Pickett

ALLEGATION: Staffing at The Shelby AL may be inadequate to safely assist multiple non-ambulatory residents in an emergency.

INVESTIGATION:

I received a licensing complaint regarding The Shelby AL on 03/03/2026. It was alleged that Resident A had a stroke and is not ambulatory. Resident A is unable to use her left side. The Complainant alleged that there are five non-mobile residents that live in the assisted living home. The home only has one caregiver at night and two caregivers during the day. The home does not have appropriate staffing needed to care for the residents in the home. There are concerns regarding the safety of these people. If something happens, one caregiver cannot get five people out of the home safely. There are no concerns for abuse or neglect, The safety of all residents is the main concern. Resident A is clean and fed appropriately.

On 03/03/2026, I sent email to Licensee, Cyle Pickett requesting records for fire drills completed since the home's license was opened in October 2025. I received an email from Mr. Pickett on 03/12/2026 that stated, "In a transparency, our previous manager failed to keep the fire drill records in order and I am unable to locate at this time. However ,we plan to conduct a fire drill before the end of this quarter."

On 03/05/2026, I completed an unannounced onsite investigation. I interviewed Staff, Tyesha Donaldson, Resident B and Relative 1. I observed Resident A, Resident C, Resident D and Resident E.

On 03/05/2026, I interviewed Staff, Tyesha Donaldson. She stated that she has worked at the home for two months. There are five residents at the home. Ms. Donaldson stated that she was the only staff on shift. There is another staff that lives at the home that she indicated was on a two-hour break. Staff live in the basement. Ms. Donaldson indicated that all the residents require a two-person assist and other staff are typically available to help when needed. She could not remember when fire drills were completed and stated that she believed she completed a fire drill once.

On 03/05/2026, I observed Resident A at the home. Resident A was sleeping. I observed Resident C and Resident D who were reported to be non-verbal and on hospice. Resident E was participating in a visit during the onsite investigation.

On 03/05/2026, I interviewed Relative 1. She stated that that care has been excellent at the home, however, there is only one staff working at a time. She stated that the staff live downstairs and they switch on and off. She loves the staff that are here and home has been great for the most part. She stated that Resident E requires a two-person assist or Hoyer if needed. She was not aware of any fire drills that had been completed. She stated that there are two staff that work at the home and there is a substitute staff that comes in on Wednesdays when they are off.

On 03/05/2026, I interviewed Resident B. He stated that he has lived at the home for three months and it is "so far, so good". He stated that there are two staff at the home. They have one person for day shift and one for night shift and they switch. He stated that 9 out of 10 times only one staff does his transfers, however, sometimes it is two. He has not participated in any fire drills. They have tested the alarm system.

On 04/09/2026, I had a face-to-face meeting with Cyle Pickett at The Beacon. He stated that one verbal fire drill has been completed since the opening of the home. Residents were not evacuated. He stated that the home currently has five residents. He stated that there are two different residents than at the time of the onsite investigation. Mr. Pickett stated that at the time of investigation Resident B and Resident C were a one-person assist. He stated that Resident A, Resident D and Resident E were 1 person assist or use of Hoyer lift to transfer. Mr. Pickett stated that prior to licensing complaint, they had residents that were more difficult to transfer which caused strain on staff, however, residents still only required one person assist. The residents were moved to other homes. He indicated that the home has two shifts from 7:00 am- 7:00 pm and 7:00 pm- 7:00 am, with one staff per shift.

On 03/12/2026, I received copies of resident records by email from Cyle Pickett including resident register and copies of resident information records, assessment plans and health care appraisals for Resident A, Resident B, Resident D and Resident E. Records were not provided for Resident C. The resident register indicated that Resident

C was discharged from the home on 03/08/2026. Resident A's assessment plan indicates that she requires the use of a Hoyer lift and wheelchair. Resident B's assessment plan indicates that he uses a wheelchair. Resident D's assessment plan indicates that she uses a wheelchair and Hoyer lift. Resident E's assessment plan indicates that she uses a Hoyer lift, walker and wheelchair.

On 03/17/2026, I received copies of February 2026 and March 2026 staff schedules from Cyle Pickett by email. Schedules show two shifts for the home from 7:00 am- 7:00 pm and 7:00 pm- 7:00 am, with one staff per shift.

On 04/13/2026, I received copies of orders for use of lift for Resident A, Resident E and Resident E from Cyle Pickett.

The license for The Shelby AL was opened on 10/24/2025. The home was operating unlicensed prior to licensure. On 04/13/2026, Licensee Cyle Pickett provided copies of two fire drills completed since the home opened. Fire drill dated 01/14/2026 indicates a "verbal fire drill" was completed at 9:00 pm. Fire drill dated 11/05/2025 indicates a fire drill was completed at 2:00 pm. Fire drill does not indicate how long it took to evacuate residents.

APPLICABLE RULE	
R 400.619	Emergency preparedness plan.
	(8) A licensee shall practice the emergency preparedness plan, including the fire safety plan, at least once a quarter per calendar year during each shift, 7 a.m. to 3 p.m., 3 p.m. to 11 p.m. and 11 p.m. to 7 a.m. A record of the practices must be maintained for 2 years.
ANALYSIS:	The Shelby AL has not completed the required fire drills for each quarter. The home opened on 10/24/2025. As of 04/13/2026, only two fire drills have been completed. Fire drill dated 01/14/2026 indicates a "verbal fire drill" was completed at 9:00 pm. Fire drill dated 11/05/2025 indicates a fire drill was completed at 2:00 pm. Fire drill does not indicate how long it took to evacuate residents. It is unknown how long it will take staff to evacuate five non-ambulatory residents.
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.633	Staffing requirements.
	<p>(1) A licensee shall always have sufficient direct care staff on duty for the supervision, personal care, and protection of residents and to provide the services specified in a resident's assessment plan, health care appraisal, and resident care agreement. At a minimum, the ratio of direct care staff to residents must not be less than 1 direct care staff to either of the following:</p> <p>(a) 15 residents during waking hours or 20 residents during sleeping hours for large group homes and congregate facilities.</p> <p>(b) 12 residents for small group and family homes.</p>
ANALYSIS:	<p>The Shelby AL has not practiced the emergency preparedness plan and fire drills to determine if they have sufficient direct care on duty to provide the supervision, personal care and protection necessary in an emergency situation. The home currently has five residents. On 03/05/2026, I completed an unannounced onsite investigation, and the home was found to have five non-ambulatory residents with one staff on shift. The second live in staff was reported to be on a two-hour break. Three of the residents were reported to use a Hoyer lift for transfers. Two fire drills were provided for the home, one being a verbal drill. It is unknown how long it will take staff to evacuate residents in an emergency however only having one staff working with five residents that all need assistance ambulating would not be sufficient to evacuate all the residents in an emergency.</p>
CONCLUSION:	VIOLATION ESTABLISHED

ADDITIONAL FINDINGS:

On 03/04/2026, I completed a check of the Workforce Background Check System for The Shelby AL. I did not see any staff listed in the system for the home. I informed Mr. Pickett that staff must be added for each home they are working. Staff were not added until 04/13/2026. On 04/09/2026, I confirmed that Staff, Tyesha Donaldson and Tanice Whyte did have clearances completed for Mr. Pickett's home, The Adams- Modern Assisted Living (AS500419943). Ms. Donaldson is showing that she is no longer employed at the home.

On 03/05/2026, I completed an unannounced onsite investigation at the Shelby AL. When I arrived to the home, Staff Tyesha Donaldson stated that she was going to call her boss, Lijo Antony. Ms. Donaldson handed me the phone to speak to Mr. Antony and

Licensee, Cyle Pickett was on the line. Mr. Pickett stated that he was on his way to the home. He stated that Mr. Antony is only assisting with staffing. I requested Ms. Donaldson to call Mr. Pickett back after waiting as I could no longer wait for his arrival. Ms. Donaldson indicated that she only had Mr. Antony's phone number and did not call Mr. Pickett despite me speaking to him on the phone.

A denial of issuance was completed at address on 02/11/2025 for Walnut Creek of Shelby (AS500418262) with Lijo Antony being listed as Licensee Designee on enrollment. An unlicensed investigation was also completed, Kramer Drive (UA500418144) SI# 2024A0604005. Mr. Antony has remained as the property owner.

On 03/05/2026, I interviewed Relative 1. Relative 1 indicated that Cyle Pickett was operating the home.

On 03/17/2026, I received copies of February 2026 and March 2026 staff schedules from Cyle Pickett by email. Staff are listed as Lateece W., Tyesha D. Miesha B and Tanice W.

On 04/09/2026, I had a face-to-face meeting with Licensee Cyle Pickett at The Beacon home. He believed he had received a text from Mr. Antony to call the home the day of the onsite investigation, telling him a state worker had arrived. He denied that Lijo Antony is operating the home. Mr. Pickett stated that he is operating the home and Mr. Antony has assisted him with staffing through his staffing company "Hire Me". Mr. Pickett stated that in exchange he assists Mr. Antony with marketing. He stated that Mr. Antony's employee, Jen Hiller, has also provided assistance with the management of the home, however, he continues to act as the licensee. Mr. Pickett indicated that Mr. Antony was assisting him with staffing, however, stated that he hired Ms. Donaldson and she was fingerprinted for his home, The Troy- Modern Assisted Living, where she also has worked. He stated that staff Tyesha Donaldson moved and is no longer working at any of his homes. Staff, Tancie Whyte was hired through Hire Me and is a live in staff. Mr. Pickett was again informed to add all staff to the Workforce Background System for The Shelby AL. Mr. Pickett was advised that employee records and clearances need to be available for staff hired through staffing company. He stated that they recently moved offices and he is working on managing documents. I informed Mr. Pickett of violations found at this time and stated that I would notify him if there were any changes to findings and recommendation after receiving additional documents requested.

On 04/13/2026, I received copies of Workforce Background Checks from Cyle Pickett. Clearances were for current employees and dated 04/13/2026.

On 04/13/2026, I received employee records for Tanice Whyte. Records received included copy of passport, Workforce Background Check for The Troy- Modern Assisted Living and trainings that included Reporting Requirements, Personal Care, Supervision, and Protection, Safety and Fire Prevention, Prevention and Containment of Communicable Diseases and Family Caregiver Training.

On 04/13/2026, I received employee records for Tyesha Donaldson. Records received included copy of identification card, Workforce Background Check for The Troy- Modern Assisted Living, application that listed experience and education, new hire form with date of hire listed as 11/03/2025, employee eligibility verification form, verification of job description and personnel policies, medical statement dated 02/17/2025, respirator fit test record, disciplinary action form, First Aid/CPR training and Certified Nursing Assistant certification from the State of Florida.

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.

I completed an exit conference with Licensee, Cyle Pickett, on 04/16/2026. I sent Mr. Pickett an email with findings and recommendation for provisional license. I also sent Mr. Pickett an email regarding findings on 04/15/2026. I informed Mr. Pickett that a copy of the special investigation report would be mailed once approved and a corrective action plan would be requested. I requested Mr. Pickett to contact me if he has any questions or has questions once reviewing special investigation report.

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

	<p>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.</p>
ANALYSIS:	<p>Staff did not have Workforce Background Checks for the Shelby AL. On 03/04/2026, I completed a check of the Workforce Background Check System for The Shelby AL. I did not see any staff listed in the system for the home. I informed Mr. Pickett that staff must be added for each home they are working. Staff were not added until 04/13/2026. On 04/09/2026, I confirmed that Staff, Tyesha Donaldson and Tanice Whyte did have clearances completed for Mr. Pickett's home, The Adams- Modern Assisted Living (AS500419943). Ms. Donaldson is no longer employed for the licensee.</p> <p>Also, Staff Jennifer Hiller, who is reported to be managing the home has not been added to the Shelby AL in the Workforce Background Check System. Staff, Lateece Watkins, listed on the staff schedule has also not been added. Ms. Hiller and Ms. Watkins are required to be listed in the Workforce Background Check account for the Shelby AL if they continue to work at the home.</p>
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.629	Direct care staff; qualifications and training.
	(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

	<p>competent in all of the following areas before performing assigned tasks independently:</p> <ul style="list-style-type: none"> (a) Reporting requirements. (b) First aid. (c) Cardiopulmonary resuscitation, which includes a hands-on demonstration as part of the training. (d) Personal care, supervision, and protection. (e) Resident rights. (f) Safety and fire prevention. (g) Prevention and containment of communicable diseases including recognizing signs of illness. (h) Food safety, which includes food storage, preparation, distribution, and serving in a safe manner. (i) Nutrition and special diets. <p>(6) Training for subrule (5)(b) and (c) of this rule must be in accordance with these rules. The individual providing the training shall be trained in and follow nationally recognized standards.</p> <p>(7) Documentation of training must be maintained in the staff's record to determine that the training has been completed and is current.</p>
ANALYSIS:	<p>Staff at the Shelby AL did not have verification of required trainings in their employee files. On 04/13/2026, I received employee records for Tanice Whyte. Ms. Whyte did not have verification of training for First Aid/CPR, Resident Rights, Food Safety or Nutrition. On 04/13/2026, I received employee records for Tyesha Donaldson. Ms. Donaldson did not have verification of training for Reporting Requirements, Personal Care, Supervision and Protection, Safety and Fire Prevention, Prevention and Containment of Communicable Diseases, Food Safety or Nutrition.</p>
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.639	Staff records.
	<p>(1) A licensee shall maintain a record for each staff that contains all of the following:</p> <ul style="list-style-type: none"> (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

	<p>verifying reference checks were attempted must be maintained.</p> <p>(h) Health information as required by these rules.</p> <p>(i) Verification of the receipt by the staff of personnel policies and job descriptions.</p>
ANALYSIS:	<p>Staff at the Shelby AL did not have required information in employee files. Licensee, Cyle Pickett indicated that he is using a staffing company called HireMe to assist with hiring. Staff, Tanice Whyte did not have verification of experience, education, references, health information or verification of receipt of personnel policies and job descriptions in employee file. Staff, Tyesha Donaldson, did not have verification of reference checks in employee file.</p>
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
R 400.631	Health screenings.
	<p>(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.</p>
ANALYSIS:	<p>Medical statements have not been completed for staff within 30 days of employment. Staff, Tanice Whyte did not have a medical statement in employee file. Staff, Tyesha Donaldson's file indicated she was hired on 11/03/2025. Her medical statement was dated approximately 9 months prior on 02/17/2025.</p>
CONCLUSION:	VIOLATION ESTABLISHED

APPLICABLE RULE	
MCL 400.722	Denying, suspending, revoking, refusing to renew, or modifying license; grounds; written notice; hearing;

	<p>decision; protest; receiving or maintaining adults requiring foster care as felony; penalty; relocation services.</p>
	<p>(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.</p>
ANALYSIS:	<p>Licensee, Cyle Pickett indicated that he is using a staffing company called HireMe, which is owned by Lijo Antony, to assist with hiring staff. Staff Tyesha Donaldson stated that she was going to call her boss, Lijo Antony. There is sufficient evidence to conclude that Mr. Pickett has a relationship with Mr. Antony as Mr. Antony has contact with and is employing staff on the premises of the facility.</p>
CONCLUSION:	<p>VIOLATION ESTABLISHED</p>

IV. RECOMMENDATION

Contingent upon receipt of an acceptable corrective action plan, I recommend the license be modified to provisional status.

Kristine Cilluffo

04/16/2026

Kristine Cilluffo
Licensing Consultant

Date

Approved By:

Jay Caluwart

For

04/16/2026

Denise Y. Nunn
Area Manager

Date