



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

December 18, 2025

Donell Miles  
30700 Hunters Drive-apt 5  
Farmington Hills, MI 48334

RE: Application #: AS630419836  
**Charlene's Senior Legacy**  
**1932 Henbert Road**  
**West Bloomfield Twp., MI 48324**

Dear Donell Miles:

Attached is the Original Licensing Study Report for the above referenced facility. The study has determined substantial compliance with applicable licensing statutes and administrative rules. Therefore, a temporary license with a maximum capacity of 6 is issued.

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 "Frodet Dawisha".

Frodet Dawisha, Licensing Consultant  
Bureau of Community and Health Systems  
Cadillac Place  
3026 W. Grand Blvd., Ste 9-100  
Detroit, MI 48202  
(248) 303-6348

enclosure

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

**I. IDENTIFYING INFORMATION**

<b>License #:</b>	AS630419836
<b>Licensee Name:</b>	Donell Miles
<b>Licensee Address:</b>	30700 Hunters Drive-apt 5 Farmington Hills, MI 48334
<b>Licensee Telephone #:</b>	(248) 227-3835
<b>Licensee/Licensee Designee:</b>	Donell Miles
<b>Administrator:</b>	Darlene Jennings
<b>Name of Facility:</b>	Charlene's Senior Legacy
<b>Facility Address:</b>	1932 Henbert Road West Bloomfield Twp., MI 48324
<b>Facility Telephone #:</b>	(248) 227-3835
<b>Application Date:</b>	08/15/2025
<b>Capacity:</b>	6
<b>Program Type:</b>	PHYSICALLY HANDICAPPED AGED ALZHEIMERS

## II. METHODOLOGY

08/15/2025	On-Line Enrollment
08/18/2025	Contact - Telephone call received Licensee will need to submit a IRS letter.
08/19/2025	PSOR on Address Completed
08/19/2025	Contact - Document Sent Forms sent.
08/20/2025	Contact - Document Received 1326/RI030, AFC 100 and IRS letter.
08/20/2025	Lic. Unit file referred for background check review ICHAT hit on Donell Miles.
08/21/2025	Comment FP sent to Ashley.
08/22/2025	Contact - Telephone call made Reached out via email to get a copy of the FP receipt.
08/27/2025	File Transferred to Field Office
09/24/2025	Application Incomplete Letter Sent Letter sent to applicant
11/26/2025	Inspection Completed On-site
11/26/2025	Inspection Completed-BCAL Sub. Compliance
12/16/2025	Inspection Completed On-site
12/17/2025	Inspection Completed-BCAL Full Compliance

## III. DESCRIPTION OF FINDINGS & CONCLUSIONS

### A. Physical Description of Facility

**Charlene's Senior Legacy** is a large, beautiful ranch located in a subdivision in the Township of West Bloomfield. There are six private bedrooms and two full bathrooms. The large living room is right off the entryway of this home and there is also a large family room at the back of the home adjacent to the dining room and kitchen. There is a large backyard with a gazebo for residents to enjoy. This home is wheelchair accessible

and has 2 approved means of egress that are equipped with ramps from the first floor. **Charlene's Senior Legacy** utilizes public water and sewage systems.

The gas furnace and hot water heater are located on the main floor in a room that is constructed of materials that provide a 1-hour-fire-resistance rating with a 1-3/4-inch solid core door in a fully stopped frame, equipped with an automatic self-closing device and positive-latching hardware. The facility is equipped with interconnected, hardwire smoke detection system, with battery backup, which was installed by a licensed electrician and is fully operational.

Resident bedrooms were measured during the on-site inspection and have the following dimensions:

Bedroom #	Room Dimensions	Total Square Footage	Total Resident Beds
1	8'10" x 11'10"	102	1
2	9'03" x 9'00"	83	1
3	10'03" x 10'02"	104	1
4	13'.07" x 10'00"	136	1
5	11'04" x 15'01"	171	1
6	16'06" x 9'11"	164	1

**Total capacity: 6**

The living, dining, and family room areas measure a total of **583** square feet of living space. This exceeds the minimum of 35 square feet per occupant requirement.

Based on the above information, it is concluded that this facility can accommodate **six (6)** residents. It is the licensee's responsibility not to exceed the facility's licensed capacity.

### **B. Program Description**

Admission and discharge policies, program statement, refund policy, personnel policies, and standard procedures for the facility were reviewed and accepted as written. The applicant intends to provide 24-hour supervision, protection, and personal care to **six (6)** male or female ambulatory and non-ambulatory adults whose diagnosis is Alzheimer's Disease, aged and physically handicapped. According to the program statement, the goal of the program is to maximize the functioning of each resident's capability and condition. Self-care and daily living skills will be promoted through on-going guidance in the areas of dressing, grooming, nutrition, supervision, protection, and use of community resources. The licensee designee is Donell Miles, and the administrator is Darlene Jennings. Mr. Miles intends to accept residents from private pay individuals as a referral source.

Mr. Miles will utilize Henry Ford West Bloomfield Hospital for all residents' medical needs. The facility will make provision for a variety of leisure and recreational equipment. As extra safety measures, this home has door and window chimes.

**Charlene's Senior Legacy** utilizes West Bloomfield Township Police Department and West Bloomfield Fire Department for all its emergency needs.

### **C. Applicant and Administrator Qualifications**

Mr. Miles has sufficient financial resources to provide for the adequate care of the residents as evidenced by a review of Mr. Miles' budget statement submitted to operate the adult foster care facility. Mr. Miles has cash in savings and income from outside employment.

The applicant is **Charlene's Senior Legacy, L.L.C.**, which is a "Domestic Limited Liability Company", was established in Michigan, on 06/13/2025. Mr. Miles submitted an established annual budget, projecting expenses and income to demonstrate the financial capability to operate this adult foster care facility.

The members of **Charlene's Senior Legacy, L.L.C.**, have submitted documentation appointing Donell Miles as Licensee Designee for this facility and Darlene Jennings as the Administrator of the facility.

A licensing record clearance request was completed with no LEIN convictions recorded for Mr. Miles and Ms. Jennings. Mr. Miles and Ms. Jennings submitted a medical clearance request with statements from a physician documenting their good health and current TB-tine negative results.

Mr. Miles, licensee designee and Ms. Jennings, administrator, have provided documentation to satisfy the qualifications and training requirements identified in the administrative group home rules. Mr. Miles has over five years of experience with the aged Alzheimer's population as the sole caregiver of his mother. Ms. Jennings has over eight years of experience and is a certified nursing assistant that has been providing private duty care services to aged individuals with Alzheimer's disease. She also has management experience for over 10+ years.

The staffing pattern for the original license of this 6-bed facility is adequate and includes a minimum of 1 staff –to- 6 residents per shift. Mr. Miles acknowledges that the staff – to- resident ratio will change to reflect any increase in the level of supervision, protection, or personal care required by the residents. Mr. Miles has indicated that direct care staff will be awake during sleeping hours.

Mr. Miles acknowledged that at no time will this facility rely on "roaming" staff or other staff that are on duty and working at another facility to be considered part of this facility's staff –to- resident ratio or expected to assist in providing supervision, protection, or personal care to the resident population.

Mr. Miles acknowledges an understanding of the qualifications, suitability, and training requirements for direct care staff prior to each person working in the facility in that capacity or being considered as part of the staff –to- resident ratio.

Mr. Miles acknowledged an understanding of the responsibility to assess the good moral character of employees and contractors who have regular, ongoing, “direct access” to residents or the resident information or both. The licensing consultant provided technical assistance on the process for obtaining criminal record checks utilizing the Michigan Long Term Care Partnership website ([www.miltcpartnership.org](http://www.miltcpartnership.org)) and the related documents required to be maintained in each employee’s record to demonstrate compliance.

Mr. Miles acknowledges an understanding of the administrative rules regarding medication procedures and that only those direct care staff that have received medication training and have been determined competent by the licensee can administer medication to residents. In addition, Mr. Miles has indicated that resident medication will be stored in a locked cabinet and that daily medication logs will be maintained on each resident receiving medication.

Mr. Miles acknowledges their responsibility to obtain all required good moral character, medical, and training documentation and signatures that are to be completed prior to each direct care staff or volunteer working directly with residents. In addition, Mr. Miles acknowledges their responsibility to maintain all required documentation in each employee’s record for each licensee or licensee designee, administrator, and direct care staff or volunteer and follow the retention schedule for those documents contained within each employee’s record.

Mr. Miles acknowledges an understanding of the administrative rules regarding the admission criteria and procedural requirements for accepting a resident into the home for adult foster care.

Mr. Miles acknowledges their responsibility to obtain the required written assessment, written assessment plan, resident care agreement, and health care appraisal forms and signatures that are to be completed prior to, or at the time of each resident’s admission to the home as well as updating and completing those forms and obtaining new signatures for each resident on an annual basis.

Mr. Miles acknowledges their responsibility to maintain a current resident record on file in the home for each resident and follow the retention schedule for all of the documents that are required to be maintained within each resident’s file.

Mr. Miles acknowledges an understanding of the administrative rules regarding the handling of resident funds and valuables and intends to comply. Mr. Miles acknowledges that a separate *Resident Funds Part II BCAL-2319* form will be created for each resident in order to document the date and amount of the adult foster care

service fee paid each month and all of the resident's personal money transactions that have been agreed to be managed by the applicant.

Mr. Miles acknowledges an understanding of the administrative rules regarding informing each resident of their resident rights and providing them with a copy of those rights. Mr. Miles indicated that it is their intent to achieve and maintain compliance with these requirements.

Mr. Miles acknowledges an understanding of the administrative rules regarding the written and verbal reporting of incidents and accidents and the responsibility to conduct an immediate investigation of the cause. Mr. Miles has indicated their intention to achieve and maintain compliance with the reporting and investigation of each incident and accident involving a resident, employee, and/or visitor.

Mr. Miles acknowledges their responsibility to provide a written discharge notice to the appropriate parties when a 30-day or less than 30-day discharge is requested.

Mr. Miles acknowledges that residents with mobility impairments may only reside on the main floor of the facility.

**D. Rule/Statutory Violations**

Mr. Miles was in compliance with the licensing act and applicable administrative rules at the time of licensure.

**IV. RECOMMENDATION**

I recommend issuance of a temporary license to **Charlene's Senior Legacy AFC** adult small group home capacity six (6).



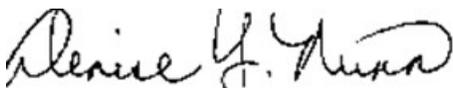
12/17/2025

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Frodet Dawisha  
Licensing Consultant

Date

Approved By:



12/18/2025

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Denise Y. Nunn  
Area Manager

Date