



GRETCHEN WHITMER  
GOVERNOR

STATE OF MICHIGAN  
DEPARTMENT OF LICENSING AND REGULATORY AFFAIRS  
LANSING

MARLON I. BROWN, DPA  
DIRECTOR

March 25, 2026

Aster Mekonnen  
Noah's AFC Home, Inc.  
2299 N. Vernon  
Holt, MI 48842

RE: License #: AS330291616  
**Noah's AFC Home, Inc.**  
**2297 North Vernon**  
**Holt, MI 48842**

Dear Ms. Mekonnen:

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

- You are to submit documentation of compliance.

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

Please contact me with any questions. In the event that I am not available and you need to speak to someone immediately, you may contact the local office at (517) 335-5985.

Sincerely,

A handwritten signature in cursive script that reads "Ondrea Johnson".

Ondrea Johnson, Licensing Consultant  
Bureau of Community and Health Systems

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

**I. IDENTIFYING INFORMATION**

**License #:** AS330291616

**Licensee Name:** Noah's AFC Home, Inc.

**Licensee Address:** 2299 N Vernon  
Holt, MI 48842

**Licensee Telephone #:** (517) 410-6127

**Licensee/Licensee Designee:** Aster Mekonnen

**Administrator:** Solomon Mekonnen

**Name of Facility:** Noah's AFC Home, Inc.

**Facility Address:** 2297 North Vernon  
Holt, MI 48842

**Facility Telephone #:** (517) 694-2351

**Original Issuance Date:** 08/22/2008

**Capacity:** 6

**Program Type:** DEVELOPMENTALLY DISABLED  
MENTALLY ILL  
AGED

## II. METHODS OF INSPECTION

Date of On-site Inspection(s): 03/18/2026

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

Date of Health Authority Inspection if applicable: N/A

No. of staff interviewed and/or observed 3

No. of residents interviewed and/or observed 4

No. of others interviewed 0 Role: 0

- Medication pass / simulated pass observed? Yes  No  If no, explain.
- Medication(s) and medication record(s) reviewed? Yes  No  If no, explain.
- Resident funds and associated documents reviewed for at least one resident? Yes  No  If no, explain.
- Meal preparation / service observed? Yes  No  If no, explain.
- Fire drills reviewed? Yes  No  If no, explain.
- Fire safety equipment and practices observed? Yes  No  If no, explain.
- E-scores reviewed? (Special Certification Only) Yes  No  N/A  If no, explain.
- Water temperatures checked? Yes  No  If no, explain.
- Incident report follow-up? Yes  No  If no, explain.
- Corrective action plan compliance verified? Yes  CAP date/s and rule/s: N/A
- Number of excluded employees followed-up? N/A
- Variances? Yes  (please explain) No  N/A

### III. DESCRIPTION OF FINDINGS & CONCLUSIONS

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

**R 400.647                      Safety and maintenance of premises.**

**(1) A facility must be constructed, arranged, and maintained to provide adequately for the health, safety, and well-being of occupants.**

FINDINGS: Satellite cord connected to an outlet in a separate room which is causing the cord to be exposed on the floor in the entry doorway of a resident bedroom posing a tripping hazard.

**R 400.647                      Safety and maintenance of premises.**

**(14) Handrails and nonskid surfacing must be installed in showers and bath areas.**

FINDINGS: Multiple rugs in the living room area do not have nonskid backing.

**R 400.701                      Required personnel policies.**

(1) A licensee shall have all the following written policies and procedures:

- (a) Mandatory reporting.
- (b) Resident care related prohibited practices.
- (c) Confidentiality requirements in accordance with section 12(3) of the act, MCL 400.712.
- (d) Training requirements, including understanding the act and these rules.
- (e) Resident rights in accordance with R 400.681.
- (f) The process for reviewing the licensing statute and administrative rules with adult foster care staff.

FINDINGS: Required personnel policies: resident care related prohibited practices, confidentiality requirements, training requirements, and the review of administrative rule policies are not available for the department to review and not in employee record.

**R 400.701**

**Required personnel policies.**

- (2) Written policies and procedures must be given to staff and volunteers at the time of hire or appointment. A verification of receipt of the policies and procedures must be maintained in the individual personnel record.

FINDINGS: Required personnel policies: mandatory reporting, resident care related prohibited practices, confidentiality requirements, training requirements, resident rights, and the review of administrative rule policies are not in employee record.

A corrective action plan was requested and approved on 03/24/2026. It is expected that the corrective action plan be implemented within the specified time frames as outlined in the approved plan. A follow-up evaluation may be made to verify compliance. Should the corrections not be implemented in the specified time, it may be necessary to reevaluate the status of your license.

**f. RECOMMENDATION:**

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



3/25/2026

Ondrea Johnson  
Licensing Consultant

Date