

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>MHL092-791</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>R-C 01/22/2019</b>
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NAME OF PROVIDER OR SUPPLIER  <b>ALPHA HOME CARE SERVICES, INC III</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>3716 ARROWWOOD DRIVE RALEIGH, NC 27604</b>
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(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
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V 000	<p><b>INITIAL COMMENTS</b></p> <p>A Follow up and Complaint Survey was completed January 22, 2019. The complaints were substantiated (Intake #NC00147429 and #NC000146871). Deficiencies were cited.</p> <p>This facility is licensed for the following service category 10A NCAC 27G .5600A Supervised Living for Adults with Mental Illness.</p>	V 000	<p>DHSR-Mental Health</p> <p>FEB 18 2019</p> <p>Lic. &amp; Cert. Section</p>	
V 512	<p>27D .0304 Client Rights - Harm, Abuse, Neglect</p> <p>10A NCAC 27D .0304 PROTECTION FROM HARM, ABUSE, NEGLECT OR EXPLOITATION</p> <p>(a) Employees shall protect clients from harm, abuse, neglect and exploitation in accordance with G.S. 122C-66.</p> <p>(b) Employees shall not subject a client to any sort of abuse or neglect, as defined in 10A NCAC 27C .0102 of this Chapter.</p> <p>(c) Goods or services shall not be sold to or purchased from a client except through established governing body policy.</p> <p>(d) Employees shall use only that degree of force necessary to repel or secure a violent and aggressive client and which is permitted by governing body policy. The degree of force that is necessary depends upon the individual characteristics of the client (such as age, size and physical and mental health) and the degree of aggressiveness displayed by the client. Use of intervention procedures shall be compliance with Subchapter 10A NCAC 27E of this Chapter.</p> <p>(e) Any violation by an employee of Paragraphs (a) through (d) of this Rule shall be grounds for dismissal of the employee.</p> <p>This Rule is not met as evidenced by: Based on record review and interview, one of</p>	V 512	<p>Staff #1's appointment was terminated the same day that the report was received. The incoming staff was retrained on Abuse, Neglect and Exploitation of residents. QP will continue to retrain staff members on monthly basis. Weekly visits and conversations between QP and residents will be documented accordingly.</p>	01-14-19

Division of Health Service Regulation  
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

*JAMES ROBERT BS QP*

02-18-2019

Division of Health Service Regulation

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V 512	<p>Continued From page 1</p> <p>three employees (staff #1) subjected four of five audited clients (#1, #2, #3 and #6) to abuse. The findings are:</p> <p>Review on 01/15/19 of staff #1's record revealed: -Hired: May 25, 2014 -05/26/18 Abuse, Neglect and Exploitation training</p> <p>During interview on 01/14/19, staff #1 reported he: -Worked for the company at another facility -Had worked at this particular group home for about a month</p> <p>A. Review on 01/14/19 of client #6's record revealed: -Admitted: 02/27/14 -Diagnoses inclusive of Schizoaffective Disorder (bipolar type), Obsessive Compulsive Disorder, Obesity, Hypothyroidism, Hypertension and Parkinson -Age: 52 -Walker for ambulation of distance</p> <p>During interview on 01/14/19, four of five audited clients reported: -Sunday (01/13/19), client #6 threw a cup at staff #1 during mealtime. All expressed concerns about staff #1's response and expressed they did not want to get in trouble with staff #1 for sharing the information. -Two clients explained: Staff #1 responded by cursing, standing over client #6 in an intimidating manner, lifting his hands and saying "what you want to do" to the client and kicked the trash can causing gravy to spill on the wall. Client #6 cursed and went to his room. They thought client #6 was fearful of staff #1. Both indicated they were fearful of staff #1 either for themselves or for other</p>	V 512		

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V 512	<p>Continued From page 2</p> <p>clients. Both described staff #1 as "hateful, mean" and questioned if "he needed to be in the group home."</p> <p>During interview on 01/14/19, client #6 reported he:</p> <ul style="list-style-type: none"> <li>-Did not recall much about 01/13/19, except he threw a cup at staff.</li> <li>-Had a chance to think about it, it was his fault.... The cup had water in it. Staff told him to go to his room,,,can't recall exactly what happened. Staff #1 said "now what you gonna do? He didn't raise his voice much. it was elevated...scared I'm gonna get kicked out... I don't want to get kicked out."</li> </ul> <p>During interviews between 01/14/19 and 01/16/19, staff #1 reported:</p> <ul style="list-style-type: none"> <li>-01/14/19: Had an incident of verbal behavior on yesterday (01/13/19). Client #6 used some profane language. Client #6 left his plate on the table and said "don't you work here? you can do it." Client #6 "had just visited with family. Nothing else happened. It's not like he's (client #6) not done that before." In the past, client #6 had taken something and thrown it down, but on this occasion client #6 just pushed the chair back and threw the plate away. Staff #1 reported he responded calmly and let client #6 calm down. "Sometimes its random. He (client #6) does have an illness." *Note: staff #1 did not reference a cup thrown at him by client #6 during this interview.</li> <li>-01/16/19: "After plates were served. Just so I can maneuver around the small house, I like them to wait until I'm finished. They don't let me get done. I guess they were hungry, can't wait. I'm going around giving beverages. [Client #6] was already drinking, I bypassed him &amp; gave it to everyone else.. I put the drink in kitchen. [Client #6] says after I sat down that he wanted</li> </ul>	V 512		

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V 512	<p>Continued From page 3</p> <p>something to drink. I said if you talk to me like that, get your own drink. I guess I was upset, I kicked the trash can. He (client #6) had already finished a portion of that meal, so he got up and left. He said you so f*****g lazy, you get it...He said he was sorry and didn't mean it. [Client #6] said it was his fault and the illness. He (client #6) does that cursing all the time all of a sudden. I probably used profanity. I probably should've done things differently, not kicked the trash can, tone."</p> <p>B. Review on 01/14/19 of client #1's record revealed: -Admitted: 09/07/13 -Diagnoses inclusive of Brain injury, Dementia and Depression</p> <p>During interview on 01/14/19, client #1 reported he: -Had issues remembering things...he normally wrote things down that bothered him in his journal -Recalled a cup thrown on Sunday (01/13/19)..he was not sure who threw the cup or the circumstances, thought it was over soda...he could not locate anything in his journal about the situation. -"Do you think I will not amount to anything? I was talking to [staff #1] about a job and he said I had a brain injury and would not amount to much, so I should just keep getting my check...I may have a brain injury but you can remember when someone says something to hurt your feelings." -Felt staff #1 would retaliate against him because staff #1 was "loud and he raises his hands towards me. I don't get involved." -Witnessed staff #1 raise his voice at other clients in the group home. He just went to his room</p>	V 512		

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V 512	<p>Continued From page 4</p> <p>-Staff #1 often requested clients to remain in their room.</p> <p>During interview on 01/16/19, staff #1 reported he:</p> <p>-Did not recall any conversation with clients in which he spoke of their diagnoses in a non therapeutic manner</p> <p>-Did not recall making any comments about client #1 having a brain injury or obtaining a job</p> <p>C. Review on 01/14/19 of client #2's record revealed:</p> <p>-Admitted: 11/08/18</p> <p>-Diagnoses inclusive of Schizoaffective Disorder, Personality Disorder, Morbid Obesity, Diabetes and Hyperlipidemia</p> <p>During interview on 01/14/19, client #2 reported:</p> <p>-He did not attend a day program and was the only client at home with staff #1 during the day.."all day"</p> <p>-Staff #1 asked him did he want to go outside and "tear up some grass"...he interrupted "tear up some grass" that meant to fight outside</p> <p>-Staff #1 often indicated he needed some "me time" and requested client #2 to go to his bedroom. It was the tone in which he would say "just go. Like I was trash....I'm a person just like you a person."</p> <p>-Last week, he called the Qualified Professional to complain about how staff #1 treated him and the others. The Qualified Professional came over and spoke with staff #1 but "I just can't take too much more."</p> <p>During interview on 01/14/19, the Qualified Professional reported:</p> <p>-On Thursday 01/10/19, he did receive a call from client #2 who did not give specifics but</p>	V 512		

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V 512	<p>Continued From page 5</p> <p>expressed concerns of how staff #1 spoke to and treated clients at the home as well as staff smoking. He came over the same day and provided verbal directives to the staff regarding tone and delivery. Since January 10, 2019, no one had told him anything else regarding staff #1 inclusive of the 01/13/19 trash can kicking incident.</p> <p>During interview on 01/16/19, staff #1 reported: -At other home, he had more flexibility and time to himself...all clients were at the day program during the day and he did transportation if needed for the other homes. -The clients probably heard him talking on the phone and shared he needed time to himself...he had not necessarily told the clients to just go.</p> <p>D. Review on 01/14/19 of client #3's record revealed: -Admitted: 04/03/18 -Diagnosis of Schizophrenia</p> <p>During interview on 01/14/19, client #3 reported: -Within the past month, staff #1 "asked me to come outside like he was going to kick my a**...I was sitting there eating..He didn't put his hands on me...other clients were there but I can't recall who...everybody has problems with him...if he keeps on, I am going to fight him."</p> <p>During interview on 01/14/19, client #2 reported: -He heard staff #1 invite client #3 to "go outside to tear up some grass...when the mom (client #3's) approached staff about it, staff said it was the client. I didn't say nothing because I did not want to get involved...he (staff #1) got attitude."</p> <p>During interview on 01/16/19, staff #1 reported:</p>	V 512		

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V 512	<p>Continued From page 6</p> <p>-He had not asked a client to go outside except to smoke or to cool off as a coping mechanism.</p> <p>-"Probably", raised his voice at the clients. "It was a more aggressive tone than anything else...I do talk in a firm manner."</p> <p>-For most people, he's a tall person, and had been told he had a "demanding/intimidating presence. It maybe the way I carry myself."</p> <p>Review on 01/15/19 of a plan of protection dated 01/15/19 submitted by the Licensee revealed:</p> <p>-"What will you immediately do to correct the above rule violations in order to protect clients from further risk or additional harm? The staff was removed immediately. All other staff will be retrained on abuse, neglect, and exploitation, and communication skills.</p> <p>-Describe your plans to make sure the above happens. The Qualified Professional will facilitate these measures and monitor weekly for correspondence."</p> <p>Clients #1, #2, #3 and #6 in the group home had mental health diagnoses inclusive of Schizophrenia, Traumatic Brain Injury, Dementia, Schizoaffective Disorder and Depression. Despite having had the required training in providing care and services for clients with mental health diagnoses staff #1 was abusive to the clients on at least 6 different occasions during his short one month employment at this group home. Staff #1 used threatening language insinuating the desire to fight in saying to client did he want to "tear up some grass", degrading comments regarding a client's mental health diagnosis and his self-worth in life, physical intimidation with invading close personal space to clients in threatening posture</p>	V 512		

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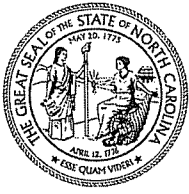
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V 512	Continued From page 7  during arguments and physical aggression with kicking trash can during altercation as methods used against clients during his one month of employment at this facility. Clients indicated they were fearful of staff #1 either for themselves or other clients in the group home. This deficiency constitutes a Type A1 rule violation for serious abuse and must be corrected within 23 days. An administrative penalty in the amount of \$2000.00 is imposed. If the violation is not corrected within 23 days, an additional administrative penalty of \$500.00 per day will be imposed for each day the facility is out of compliance beyond the 23rd day.	V 512		
V 736	27G .0303(c) Facility and Grounds Maintenance  10A NCAC 27G .0303 LOCATION AND EXTERIOR REQUIREMENTS (c) Each facility and its grounds shall be maintained in a safe, clean, attractive and orderly manner and shall be kept free from offensive odor.  This Rule is not met as evidenced by: Based on observation and interview, the facility was not maintained in a safe and orderly manner. The findings are:  Observation on 01/14/19 between 5:15-5:30 PM of the facility revealed: -Downstairs: client #1's bedroom ceiling tile protruding downward  Interview on 01/14/19, client #1 reported -He had diagnosis of Traumatic Brain Injury and was not aware of how long the ceiling tile had	V 736	The protruding roof in client #1's bedroom has been replaced and painted. Process was completed on January 22, 2019	1-22-19



Division of Health Service Regulation

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V 736	<p>Continued From page 8</p> <p>protruded downward</p> <p>Interview on 01/15/19, staff #1 reported: -He worked at the group home for approximately one month...not noticed any issues with client #1's ceiling tile</p> <p>Interview on 01/15/19, the Qualified Professional reported he: -Was not aware of the ceiling tile issue in client #1's bedroom. -Would contact the maintenance person immediately</p> <p>This deficiency constitutes a re-cited deficiency and must be corrected within 30 days.</p>	V 736		



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**

ROY COOPER • Governor  
MANDY COHEN, MD, MPH • Secretary  
MARK PAYNE • Director, Division of Health Service Regulation

February 11, 2019

DHSR-Mental Health

Juliet Okwoshah, Administrator  
Alpha Home Care Services, Inc.  
PO Box 41153  
Raleigh, NC 27629

FEB 18 2019

Lic. & Cert. Section

Re: Complaint and Follow Up Survey completed January 22, 2019  
Alpha Home Care Services, Inc. III, 3716 Arrowwood Drive, Raleigh, NC 27604  
MHL # 092-791  
E-mail Address: juliet@alphahealthservices.com  
Intake #NC00147429 and #NC000146871

Dear Mrs. Okwoshah:

Thank you for the cooperation and courtesy extended during the Annual and Follow Up Survey completed January 22, 2019. The complaint was substantiated.

As a result of the follow up survey, it was determined none of the deficiencies were now in compliance. Additional deficiencies were cited during the survey.

Enclosed you will find all deficiencies cited listed on the Statement of Deficiencies Form. The purpose of the Statement of Deficiencies is to provide you with specific details of the practice that does not comply with state regulations. You must develop one Plan of Correction that addresses each deficiency listed on the State Form, and return it to our office within ten days of receipt of this letter. Below you will find details of the type of deficiencies found, the time frames for compliance plus what to include in the Plan of Correction.

**Type of Deficiencies Found**

- Type A1 rule violation is cited for 10A NCAC 27D .0304 Client Rights- Protection from Abuse, Neglect and Exploitation (V512).
- Re-cited standard level deficiency

**Time Frames for Compliance**

- Type A1 violations must be **corrected** within 23 days from the exit date of the survey, which is February 14, 2019. Pursuant to North Carolina General Statute § 122C-24.1, failure to correct the enclosed Type A1 violation(s) by the 23<sup>rd</sup> day from the date of the survey may result in the assessment of an administrative

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION

LOCATION: 1800 Umstead Drive, Williams Building, Raleigh, NC 27603  
MAILING ADDRESS: 2718 Mail Service Center, Raleigh, NC 27699-2718  
www.ncdhs.gov/dhsr • TEL: 919-855-3795 • FAX: 919-715-8078

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

February 11, 2019  
Juliet Okwoshah  
Alpha Home Care Services, Inc.

penalty of \$500.00 (Five Hundred) against Alpha Home Care Services, Inc. for each day the deficiency remains out of compliance.

- Re-cited standard level deficiency must be **corrected** within 30 days from the exit of the survey, which is February 22, 2019.

**What to include in the Plan of Correction**

- Indicate what measures will be put in place to **correct** the deficient area of practice (i.e. changes in policy and procedure, staff training, changes in staffing patterns, etc.).
- Indicate what measures will be put in place to **prevent** the problem from occurring again.
- Indicate **who will monitor** the situation to ensure it will not occur again.
- Indicate **how often** the monitoring will take place.
- Sign and date the bottom of the first page of the State Form.

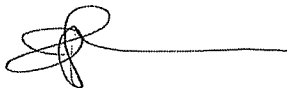
Make a copy of the Statement of Deficiencies with the Plan of Correction to retain for your records. **Please do not include confidential information in your plan of correction and please remember never to send confidential information (protected health information) via email.**

Send the original completed form to our office at the following address within 10 days of receipt of this letter.

Mental Health Licensure and Certification Section  
NC Division of Health Service Regulation  
2718 Mail Service Center  
Raleigh, NC 27699-2718

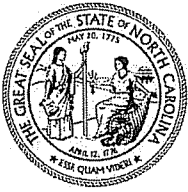
A follow up visit will be conducted to verify all violations have been corrected. If we can be of further assistance, please call Renee Kowalski-Ames at 919-552-6847.

Sincerely,



India Vaughn-Rhodes  
Facility Compliance Consultant I  
Mental Health Licensure & Certification Section

Cc: DHSR@Alliancebhc.org  
File



NC DEPARTMENT OF  
**HEALTH AND  
HUMAN SERVICES**

ROY COOPER • Governor  
MANDY COHEN, MD, MPH • Secretary  
MARK PAYNE • Director, Division of Health Service Regulation

VIA CERTIFIED MAIL

February 11, 2019

Juliet Okwoshah, Administrator  
Alpha Home Care Services, Inc.  
PO Box 41153  
Raleigh, NC 27629

**RE: Type A1 Administrative Penalty**  
**Alpha Home Care Services, Inc. III, 3716 Arrowwood Drive, Raleigh, NC 27604**  
**MHL # 092-791**  
**E-mail Address: juliet@alphahealthservices.com**

Dear Ms. Okwoshah:

Based on the findings of this agency from a survey completed on January 22, 2019, we find that Alpha Home Care Services, Inc. has operated Alpha Home Care Services, Inc. III in violation of North Carolina General Statute (N.C.G.S.) § 122C, Article 2, the licensing rules for Mental Health, Developmental Disabilities, and Substance Abuse Services and/or N.C.G.S. § 122C, Article 3, Clients' Rights for individuals with mental illness, developmental disabilities, or substance abuse issues. After a review of the findings, this agency is taking the following action:

**Administrative Penalty** – Pursuant to N.C.G.S. § 122C-24.1, the Division of Health Service Regulation, Department of Health and Human Services (DHHS), is hereby assessing a Type A1 administrative penalty of \$2,000 (two thousand dollars) against Alpha Home Care Services, Inc. for violation of 10A NCAC 27D .0304 Protection from Harm, Abuse, Neglect or Exploitation (V512). Payment of the penalty is to be made to the Division of Health Service Regulation, and mailed to the Mental Health Licensure and Certification Section, 2718 Mail Service Center, Raleigh, North Carolina 27699-2718. If the penalty is not paid within sixty (60) days of this notification, a 6% penalty plus accrued interest will be added to the initial penalty amount as per N.C.G.S. § 147-86.23. In addition, the Department has the right to initiate judicial actions to recover the amount of the administrative penalty. The facts upon which the administrative penalty is based and the statutes and rules which were violated are set out in the attached Statement of Deficiencies which are incorporated by reference as though fully set out herein.

**Appeal Notice** – You have the right to contest the above action by filing a petition for a contested case hearing with the Office of Administrative Hearings within thirty (30) days of mailing of this letter. *Please write the facility's Mental Health License (MHL) number at the top of your petition.* For complete instructions on the filing of petitions, please contact the Office of

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION

LOCATION: 1800 Umstead Drive, Williams Building, Raleigh, NC 27603  
MAILING ADDRESS: 2718 Mail Service Center, Raleigh, NC 27699-2718  
www.ncdhhs.gov/dhsr • TEL: 919-855-3795 • FAX: 919-715-8078

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER

February 11, 2019  
Juliet Okwoshah  
Alpha Home Care Services, Inc.

Administrative Hearings at (919) 431-3000. The mailing address for the Office of Administrative Hearings is as follows:

Office of Administrative Hearings  
6714 Mail Service Center  
Raleigh, NC 27699-6714

North Carolina General Statute § 150B-23 provides that you must also serve a copy of the petition on all other parties, which includes the Department of Health and Human Services. The Department's representative for such actions is Ms. Lisa G. Corbett, General Counsel. This person may receive service of process by mail at the following address:

Ms. Lisa G. Corbett, General Counsel  
Department of Health and Human Services  
Office of Legal Affairs  
Adams Building  
2001 Mail Service Center  
Raleigh, NC 27699-2001

If you do not file a petition within the thirty (30) day period, you lose your right to appeal and the action explained in this letter will become effective as described above. *Please note that each appealable action has a separate, distinct appeal process and the proper procedures must be completed for each appealable action*

In addition to your right to file a petition for a contested case hearing, N.C.G.S. § 150B-22 encourages the settlement of disputes through informal procedures. The Division of Health Service Regulation is available at the provider's request for discussion or consultation that might resolve this matter. To arrange for an informal meeting, you must contact DHSR at 919-397-6856. Please note that the use of informal procedures does not extend the 30 days allowed to file for a contested case hearing as explained above.

Should you have any questions regarding any aspect of this letter, please do not hesitate to contact us at the Department of Health and Human Services, Division of Health Service Regulation, Mental Health Licensure and Certification Section, 2718 Mail Service Center, Raleigh, NC 27699-2718 or call Michiele Elliott, Eastern Branch Manager at 919-397-6856.

Sincerely,

*Stephanie Gilliam*

Stephanie Gilliam, Chief  
Mental Health Licensure & Certification Section

Cc: [dhsreports@dhhs.nc.gov](mailto:dhsreports@dhhs.nc.gov), DMH/DD/SAS  
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[DHSR@Alliancebhc.org](mailto:DHSR@Alliancebhc.org)  
Regina Y. Petteway, Director, Wake County DSS  
Pam Pridgen, Administrative Assistant