



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**

ROY COOPER • Governor

KODY H. KINSLEY • Secretary

MARK PAYNE • Director, Division of Health Service Regulation

April 28, 2023

Brenda Spence, Clinic Manager
A Woman's Choice Of Raleigh, Inc
3305 Drake Circle
Raleigh, NC 27607

JUL 12 2023

Re: Complaint Investigation and State Licensure Survey

Dear Ms, Spence,

Thank you and your staff for the assistance and cooperation extended during the survey at A Woman's Choice Of Raleigh, Inc in Raleigh, NC from **March 7, 2023 through March 8, 2023**. The survey was conducted in order to determine the facility's compliance with the State Rules for Certification of Clinics for Abortion. As a result of the survey, standard level deficiencies were identified with respect to NC State Rules NCAC 14E 0305 Medical Records and NCAC 14E . 0314 Cleaning of Material and Equipment.

Enclosed please find State Form containing the cited deficiencies. A plan of correction for the deficiencies should be submitted and include the following:

- *The plan of correcting the specific deficiency. The plan should address the processes that lead to the deficiency cited;*
- *The procedure for implementing the acceptable plan of correction for the specific deficiency cited;*
- *The monitoring procedure to ensure that the plan of correction is effective and that specific deficiency cited remains corrected and/or in compliance with the regulatory requirements;*
- *The title of the person responsible for implementing the acceptable plan of correction.*
- *The date by which all corrective action will be completed and the monitoring system will be in place (the date should be no later than 60 days from the date of the survey and should be indicated in the right-hand column.)*

An **original** of the enclosed form CMS 2567, with the plan of correction added, **must be returned to this office, SIGNED AND DATED, WITHIN 10 CALENDAR DAYS OF RECEIPT**. We are unable to accept e-mailed or faxed reports at this time. A response will be sent **ONLY** if the plan of correction is not approved. Please retain a copy for your files. If you have any questions, please feel free to contact me by calling (919) 855-4620.

Sincerely,

Tonya Oakley, RN

Tonya Oakley, RN
Nurse Consultant
Acute and Home Care Licensure and Certification Section

Enclosures: State Form

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

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