



NC DEPARTMENT OF HEALTH AND HUMAN SERVICES

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

VIA EMAIL ONLY

October 26, 2020

Lateefah Irvine
lmemorycare@gmail.com

Exempt from Review – Acquisition of Facility

Record #: 3393
Facility Name: Care One Memory Care Unit of Kinston
Type of Facility: ACH
FID #: 941256
Acquisition by: Legacy Memory Care at Kinston, LLC
Business #: 3286
County: Lenoir

Dear Ms. Irvine:

The Healthcare Planning and Certificate of Need Section, Division of Health Service Regulation (Agency) determined that based on your representations, the above referenced proposal is exempt from certificate of need (CON) review in accordance with N.C. Gen. Stat. §131E-184(a)(8). Therefore, the above referenced business may proceed to acquire the health service facility identified above and change the licensee without first obtaining a CON. The Agency’s determination is limited to the question of whether the above referenced business would have to obtain a CON if the current owners of the health service facility do in fact sell it to the business listed above. Note that pursuant to N.C. Gen. Stat. §131E-181(b): “A recipient of a certificate of need, or any person who may subsequently acquire, in any manner whatsoever permitted by law, the service for which that certificate of need was issued, is required to materially comply with the representations made in its application for that certificate of need.”

If the business listed above does acquire the facility, you should contact the Agency’s Adult Care Licensure Section to obtain instructions for changing ownership of the existing facility.

It should be noted that this Agency's position is based solely on the facts represented by you and that any change in facts as represented would require further consideration by this Agency and a separate determination regarding whether a certificate of need would be required. If you have any questions concerning this matter, please feel free to contact this office.

Sincerely,

[Handwritten signature of Gregory F. Yakaboski]

Gregory F. Yakaboski
Project Analyst

[Handwritten signature of Martha J. Frisone]

Martha J. Frisone
Chief

cc: Adult Care Licensure Section

NC DEPARTMENT OF HEALTH AND HUMAN SERVICES • DIVISION OF HEALTH SERVICE REGULATION
HEALTHCARE PLANNING AND CERTIFICATE OF NEED SECTION

LOCATION: 809 Ruggles Drive, Edgerton Building, Raleigh, NC 27603
MAILING ADDRESS: 809 Ruggles Drive, 2704 Mail Service Center, Raleigh, NC 27699-2704
https://info.ncdhhs.gov/dhsr/ • TEL: 919-855-3873

From: [Lateefah Irvine](#)
To: [Waller, Martha K](#)
Subject: Re: [External] CON Exemption Request
Date: Wednesday, October 14, 2020 1:18:06 PM

CAUTION: External email. Do not click links or open attachments unless you verify. Send all suspicious email as an attachment to report.spam@nc.gov

Name of facility as it appears on the license: Trinity Manor Inc DBA Care One Memory Unit of Kinston

License Number: HAL-054-064

Street Address: 1406 E. Shine Street

County: Lenoir

Current owner of the bricks and mortar: Kuburat Ganiyu

Identify of the new owner of the bricks and mortar: Lateefah Irvine

Lateefah Irvine, LPN, BA, CDP, LALA
Care One Assisted Living of Greenville
2060 West Fifth Street
Greenville, NC 27834
252-752-3402
252-754-2367

"Challenge yourself with something you know you could never do, and what you'll find is that you can overcome anything". – **Anonymous**

On Wed, Oct 14, 2020 at 1:01 PM Frisone, Martha <martha.frisone@dhhs.nc.gov> wrote:

In order to process your notice, please provide the following information:

Name of facility as it appears on the license:

License Number:

Facility ID Number:

Street Address:

County:

Current owner of the bricks and mortar:

Identify of the new owner of the bricks and mortar:

Please email the information to Martha Waller. I've copied her on this email so you will have her email address.

Thanks.

Martha J. Frisone

Chief

[Division of Health Service Regulation](#), Healthcare Planning and Certificate of Need
[NC Department of Health and Human Services](#)

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#StayStrongNC and get the latest at nc.gov/covid19.

Office: 919-855-3879

martha.frisone@dhhs.nc.gov

809 Ruggles, Edgerton

2704 Mail Service Center

Raleigh, NC 27699-2704

[Twitter](#) | [Facebook](#) | [Instagram](#) | [YouTube](#) | [LinkedIn](#)

From: Lateefah Irvine <administrator@careoneal.com>
Sent: Tuesday, October 13, 2020 8:46 PM
To: Frisone, Martha <martha.frisone@dhhs.nc.gov>
Subject: [External] CON Exemption Request

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Hello,

My name is Lateefah Irvine. I am a prospective Licensee. I am requesting a letter of exemption from review from Certificate of Need prior obligation to purchase a building located at 1406 E. Shine Street Kinston, NC 28501, Trinity Manor, Inc DBA Care One Memory Unit of Kinston.

I would appreciate it if I can obtain the letter on or before the 15th. I can pick up the letter, if needed.

I appreciate any assistance you can provide.

Lateefah Irvine, LPN, BA, CDP, LALA

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From: [Frisone, Martha](#)
To: ["Lateefah Irvine"](#)
Cc: [Waller, Martha K](#)
Subject: RE: [External] CON Exemption Request
Date: Wednesday, October 14, 2020 1:01:36 PM

In order to process your notice, please provide the following information:

Name of facility as it appears on the license:
License Number:
Facility ID Number:
Street Address:
County:
Current owner of the bricks and mortar:
Identify of the new owner of the bricks and mortar:

Please email the information to Martha Waller. I've copied her on this email so you will have her email address.

Thanks.

Martha J. Frisone

Chief

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From: [Yakaboski, Greg](#)
To: [Waller, Martha K](#)
Subject: FW: [External] Requesting a letter of no review
Date: Thursday, October 15, 2020 10:21:59 AM

Martha,

Below is a “No Review” Request that I received today.

This is different than the “Exemption” Request that Ms. Irvine submitted yesterday and you already had placed in my 1Drafts_Signatures/ Administrative Determinations Folder.

Thanks,
Greg

Sincerely,

Gregory F. Yakaboski

Gregory F. Yakaboski
Project Analyst
[Division of Health Service Regulation](#), Certificate of Need
[NC Department of Health and Human Services](#)

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Greg.Yakaboski@dhhs.nc.gov

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From: Lateefah Irvine <administrator@careoneal.com>
Sent: Thursday, October 15, 2020 9:33 AM

To: Yakaboski, Greg <greg.yakaboski@dhhs.nc.gov>

Subject: [External] Requesting a letter of no review

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I am requesting a letter of no review. Legacy Memory Care who will be taking over as operator and license holder from the current operator and license holder which Trinity Manor, Inc dba Care One Memory Care unit of Kinston. The facility is a 24 bed facility located at 1406 E.Shine Street Kinston, NC --

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From: [Lateefah Irvine](#)
To: [Yakaboski, Greg](#)
Subject: [External] Requesting a letter of no review
Date: Thursday, October 15, 2020 9:33:26 AM

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I am requesting a letter of no review. Legacy Memory Care who will be taking over as operator and license holder from the current operator and license holder which Trinity Manor, Inc dba Care One Memory Care unit of Kinston. The facility is a 24 bed facility located at 1406 E.Shine Street Kinston, NC --

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From: [Lateefah Irvine](#)
To: [Yakaboski, Greg](#)
Subject: Re: [External] Correction
Date: Thursday, October 15, 2020 11:15:58 AM

CAUTION: External email. Do not click links or open attachments unless you verify. Send all suspicious email as an attachment to report.spam@nc.gov

Lmemorycare@gmail.com

On Thu, Oct 15, 2020 at 10:28 AM Yakaboski, Greg <greg.yakaboski@dhhs.nc.gov> wrote:

Lateefah,

What is the email address for your business/you?

Thanks,

Greg

Sincerely,

Gregory F. Yakaboski

Gregory F. Yakaboski

Project Analyst

[Division of Health Service Regulation](#), Certificate of Need

[NC Department of Health and Human Services](#)

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From: Lateefah Irvine <administrator@careoneal.com>
Sent: Thursday, October 15, 2020 10:22 AM
To: Yakaboski, Greg <greg.yakaboski@dhhs.nc.gov>
Subject: Re: [External] Correction

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Greenville, NC 27934

On Thu, Oct 15, 2020 at 10:15 AM Yakaboski, Greg <greg.yakaboski@dhhs.nc.gov> wrote:

Lateefah,

I have the street address ([3532 Lena Lane](#)) for your business (Legacy Memory Care at Kinston LLC) however, I do not know what city your business is located in.... please provide along with the zip code.

Thanks,

Greg

Sincerely,

Gregory F. Yakaboski

Gregory F. Yakaboski

Project Analyst

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From: Lateefah Irvine <administrator@careoneal.com>
Sent: Thursday, October 15, 2020 9:55 AM
To: Yakaboski, Greg <greg.yakaboski@dhhs.nc.gov>
Subject: [External] Correction

CAUTION: External email. Do not click links or open attachments unless you verify. Send all suspicious email as an attachment to report.spam@nc.gov

Greg,

It was a pleasure speaking to you. Please note correction. I will be the owner but the ownership will not be in my name. I would like it to be that of the company which is Legacy Memory Care at Kinston LLC

----- Forwarded message -----

From: **Lateefah Irvine** <administrator@careoneal.com>
Date: Thu, Oct 15, 2020 at 9:23 AM
Subject: Owner and Business address
To: greg.yakaboski@dhhs.nc.gov <greg.yakaboski@dhhs.nc.gov>

Following up on my email for The exemption I will be purchasing the real property and building my business address is 3532 Lena Ln and I will be the owner and the ownership will be in my name Lateefah Irvine. I am purchasing facility with 24 bed adult care home. Trinity Manor, Inc dba Care One Memory Unit of Kinston. --

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