STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL023045	A. BUILDING: **01** B. WING _____	**02/19/2015**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CLEVELAND HOUSE	**950 HARDIN DRIVE** **SHELBY, NC 28150**

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C 000	Initial Comments This report is of a Biennial Construction Survey done by Bob Getchell and Dennis Harrell on February 19, 2015. This Facility was first licensed or submitted for licensure as a Home for the Aged on or about May 10, 1991 for Seventy-Two (72) Beds. Therefore the facility is required to meet the 1991 and the applicable portions of the 2005 Rules for the Licensing of Adult Care Homes of Seven or More Beds, and, the 1991 North Carolina State Building Code, Section 409.1 Group I-Unrestrained Occupancy. Deficiencies were noted which will require a new plan of correction.	C 000		
C 101	Existing Licensed Fac- No less than '71 Rules SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS The physical plant requirements for each adult care home shall be applied as follows: (2) Except where otherwise specified, existing licensed facilities or portions of existing licensed facilities shall meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation, or alteration; however in no case shall the requirements for any licensed facility where no addition or renovation has been made, be less than those requirements found in the 1971 "Minimum and Desired Standards and Regulations" for "Homes for the Aged and Infirm", copies of which are available at the Division of Health Service Regulation, 701 Barbour Drive, Raleigh, North Carolina, 27603 at no cost;	C 101		

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1. Based on observation, the building fire sprinkler equipment was not maintained in a safe manner. This would effect all residents by not replacing damaged fire protection equipment immediately. Findings on 2-19-15: a. Room 33 has a hole in the ceiling where a sprinkler head has been removed b. Room 17 has a hole in the ceiling where a sprinkler head has been removed. c. The most recent sprinkler report indicates the following: i. The Backflow Preventer at the street could not be tested by the sprinkler company. ii. Sprinkler company recommended replacing flex hose with pipe on air compressor, get enough spare heads, and get rebuild kits to rebuild 2 valves. Provide service invoice indicating this work is completed.	C 101		
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) The building and all fire safety, electrical, mechanical, and plumbing equipment in an adult care home shall be maintained in a safe and operating condition. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities.	C 189		

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C 189	Continued From page 2 This Rule is not met as evidenced by: 1. Based on observation, the building was not maintained in a safe manner by not maintaining the fire-resistance rating of building components. This would effect all residents by not containing smoke and fire in the room or smoke compartment of origin. Findings on 2-19-15: a. The attic smoke barrier wall over the cross corridor doors at Hickory Court has unprotected openings cut for cable and pipe. b. The attic smoke barrier wall over the cross corridor doors at Maple Court has unprotected penetrations by cable and pipe, and a 4" vent pipe in the wall is disconnected. c. The attic smoke barrier wall over the cross corridor doors at Sycamore Court has unprotected penetrations by cable and pipe. d. There are no radiation dampers in the high/low make up air for each of the following ducts: i. 1-hour fire resistance rated Attic HVAC Mechanical Rooms, ii. Central Hot Water Heater Room iii. Tankless Hot Water Heater Room iiii. Laundry. Each high/low duct connects to plastic flexible duct once it enters the attic and must be protected. e. The attic access door in the smoke barrier wall above room 10 is damaged. f. There is an opening in the closet ceiling in room 15 where a sprinkler head has dropped	C 189		

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C 189	Continued From page 3 down. g. There is an opening in the ceiling in room 17 where a sprinkler head has been removed. h. There is an opening in the corridor ceiling outside the Beauty Shop where a sprinkler escutcheon is missing. I. There is an unprotected wall penetration by pipe in the kitchen next to the service corridor. j. There is 4"PVC penetration in the Kitchen Mop Room ceiling that is not protected by a fire collar. NOTE: Penetrations by PVC pipe > 2 inches in diameter require a 'fire collar' or similar system for protection. k. There are unprotected penetrations in the Kitchen ceiling by Ansul pipes near the hood. l. The carpet cleaner Storage Room has unprotected penetrations in the wall. m. The Hopper Room has an unprotected penetration in the ceiling. n. The wall behind the door in the Library is damaged. o. There is an opening in the ceiling in room 33 where a sprinkler head has been removed. p. There are openings in the ceiling in room 35 where two sprinkler escutcheons are missing. q. There are openings in the ceiling in room 35 where two sprinklers are offset from their escutcheons.	C 189		

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C 189	Continued From page 4 These unprotected openings are not in conformance with the requirement to use a through penetration fire stop system that has been tested in accordance with ASTM E-814. 2. Based on observation, the building fire protection equipment was not maintained in a safe manner. This would effect all residents by not detecting smoke and activating the fire alarm or obstructing sprinkler coverage. Findings on 2-19-15: a. The sample tubes for the HVAC duct mounted smoke detectors were dirty throughout the building b. Items are stored within 18" of sprinkler head in the closet in room 15. 3. Based on observation, the building emergency lighting was not maintained in a safe manner. This would effect all residents by not keeping the exits visible in an emergency. Findings on 2-19-15: Emergency lights are not working in the corridor near room 25 4. Based on observation, the building was not maintained in a safe manner because a handrail has come loose from the wall. This would effect all residents using the handrail by exposing them to fall hazards. Findings on 2-19-15: The handrail in the Sycamore Spa has come loose from the wall. Secure. 5. Based on observation, the building electrical system was not maintained in a safe manner	C 189		

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C 189	Continued From page 5 because fixtures are hanging by wires. This would effect all residents by exposing them to electrical hazards. Findings on 2-19-15: a. The bathroom heater off room 37 is hanging from the ceiling by the wires. b. In the kitchen electrical panel a knockout has been installed that is too small to cover the hole. Install a knockout large enough to cover the hole 6. Based on observation, the building was not maintained in a safe manner because oxygen bottles were improperly secured. This would effect all residents by exposing them to hazards should the bottle fall over and rupture. Findings on 2-19-15: There are oxygen bottles unsecured in room 27. 7. Based on observation, the building was not maintained in a safe manner because the ice machine drain was improperly installed. This would effect all residents by exposing them to contaminated ice should the drain line back up. Findings on 2-19-15: The ice machine drain line has no 2" air gap be discharge pipe and floor level. 8. Based on observation, the building was not maintained in a safe manner by not maintaining the fire-resistance rating of building components. This would effect all residents by not containing smoke and fire in the room or smoke compartment of origin. Findings on 2-19-15:	C 189		

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C 189	Continued From page 6 The door to the Activity Room Storage has two holes by the door handle. 9. Based on observation, the building plumbing equipment was not maintained in a safe manner by allowing cross connects. This would effect all residents by potentially siphoning waste water into the potable water system. Findings on 2-19-15: The spray hose on the tub in room 12 bathroom has no vacuum breaker.	C 189		
C 199	Exhaust Ventilation SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (g) The spaces listed in this Paragraph shall be provided with exhaust ventilation at the rate of two cubic feet per minute per square foot. This requirement does not apply to facilities licensed before April 1, 1984, with natural ventilation in these specified spaces: (1) soiled linen storage; (2) soil utility room; (3) bathrooms and toilet rooms; (4) housekeeping closets; and (5) laundry area. (k) This Rule shall apply to new and existing facilities with the exception of Paragraph (e) which shall not apply to existing facilities. This Rule is not met as evidenced by: Based on observation, the building exhaust ventilation was not maintained in accordance with this Rule.	C 199		

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C 199	Continued From page 7 Findings on 2-19-15: The following exhaust fan issues were noted: a. The Exhaust is not moving any air in room 6, b. The Exhaust is not moving any air in room 25, c. The Exhaust is not moving any air in room 27, d. The Exhaust is not moving any air in the Beauty Shop, e. The Kitchen Mop Closet has no exhaust fan,	C 199		