PRINTED: 02/02/2017
FORM APPROVED

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL088014	A. BUILDING: 01 B. WING	01/25/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CEDAR MOUNTAIN HOUSE	11 SHERWOOD RIDGE ROAD BREVARD, NC 28712

(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
C 000	Initial Comments Report of Construction Section Biennial Survey on 1-25-2017 by Dennis Harrell. Records indicate this facility was first licensed on 3-24-1998, as a Home for the Aged with 64 beds. Therefore, the facility was surveyed for conformance with the 1998 Rules for the Licensing of Adult Care Homes, the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds, and the 1998 North Carolina Building Code for Institutional Unrestrained Occupancies.	C 000		
C 111	Must Have Current San. & Fire Safety Reports SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION(f) The facility shall have current sanitation and fire and building safety inspection reports which shall be maintained in the home and available for review. This Rule is not met as evidenced by: Based on a review of documents, the most recent Sanitation inspection for the building was dated 8-28-2013. The Sanitation inspection for the kitchen was also last done in 2013. Buildings must be inspected and approved annually as required.	C 111	C111 CF) Administrator contacted Health Department Director on 2/13/17 (see attached response). Director indicates the building inspection will be accomplished "as soon as possible." Administrator will stay in contact until the inspection requested is completed.	2/13/17 Contact date Ongoing
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (6) be maintained in an unaltered, clean and	C 166		

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE: Michael Garcia TITLE: Administrator (X6) DATE: 2/15/17

STATE FORM 6899 H92Y31 If continuation sheet 1 of 4

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	HAL088014	A. BUILDING _____ B. WING _____	01/25/2017

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CEDAR MOUNTAIN HOUSE	11 SHERWOOD RIDGE ROAD BREVARD, NC 28712

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C 166	Continued From page 1 orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, a smoke detector and 3 sprinkler heads had been completely covered with tape at a ceiling repair in the corridor near the employee lounge. Fire detecting devices should be covered during active construction but must be uncovered at the end of work each day. Note, this deficiency was corrected onsite. 2. Based on observation, the ice machine drain line was directly connected to the wall drain. Ice machine drain lines that are not maintained at least 2 inches above the wall drain and with no direct connection, as required by Code, could cause the ice to become contaminated.	C 166	C166 (1) Smoke detector and 3 sprinkler heads ARE now uncovered and operational. Administrator will monitor throughout buildings going forward. C166 (2) Ice machine drain line will be re-routed and re-done according to Code. Administrator will maintain such thereafter.	2/22/17 2/22/17 Ongoing
C 185	Fire Safety-Rehearsals on Each Shift SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0309 PLAN FOR EVACUATION (b) There shall be rehearsals of the fire plan quarterly on each shift in accordance with the requirement of the local Fire Prevention Code Enforcement Official. (c) Records of rehearsals shall be maintained and copies furnished to the county department of social services annually. The records shall include the date and time of the rehearsals, the shift, staff members present, and a short description of what the rehearsal involved. (f) This Rule shall apply to new and existing facilities.	C 185		

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	HAL088014	A. BUILDING: 01 B. WING _____	01/25/2017

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CEDAR MOUNTAIN HOUSE	11 SHERWOOD RIDGE ROAD BREVARD, NC 28712

(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
C 185	Continued From page 2 This Rule is not met as evidenced by: 1. Based on a review of documents, the records available onsite did not include a list of staff members present. 2. Based on a review of documents, the records available onsite included no description of what the rehearsal involved.	C 185	C185 (1) All future documentation of Fire Drills will include a list of staff members present. C185 (2) All future documentation of Fire Drills will include a description of what the rehearsal involved. Administration will review and monitor all Future Fire Drill documentation.	2/28/17 and ongoing
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. (b) This Rule shall apply to new and existing facilities with the exception of Paragraph (a) which shall not apply to existing facilities. This Rule is not met as evidenced by: 1. Based on observation the required one-hour fire rated walls and/or ceilings were compromised in locations. Holes and penetrations that are not sealed with materials approved for use in one-hour fire rated construction present the possibility that a fire that begins in one space can quickly spread to other areas of the facility. Findings include: a. Repairs to a recent sprinkler line rupture included several sheets of gypsum board replaced. The gypsum was poorly cut and fitted and the repair had not been completed with gypsum compound and tape. b. Hole at a wire in the ceiling of the 2nd floor "general storage."	C 189	C189 (1-a) Gypsum board irregularities shall be Repaired professionally to include proper compound and tape as referred to. C189 (1-b) Hole at wire in ceiling of 2nd Floor storage room has been sealed completely.	2/28/17 1/28/17

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	HA4088014	A. BUILDING: 01 B. WING _____	01/26/2017

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C 189	Continued From page 2 c. Sprinkler escutcheon wax missing in soiled linen. 2. Based on observation, corridor doors could not resist the passage of fire and smoke. Corridor doors that cannot resist the passage of fire and smoke present the possibility that a fire that begins in one space can quickly spread to the corridor and the remainder of the facility. Findings include: a. Hole through the door to the kitchen at the latchset. b. Hole through the door to the employee breakroom at the latchset.	C 189	C189 (1-c) Sprinkler Escutcheon has been replaced/installed in soiled linen room. C189 (2-A) Hole through kitchen hallway door has been sealed w/appropriate material. C189 (2-b) Hole through door to employee breakroom has been sealed w/appropriate material. Maintenance personnel will monitor facility closely to ensure compliance.	1/25/17 1/25/17 1/25/17 Ongoing