STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	HAL006007	A. BUILDING: 01 B. WING _____	02/14/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CRANBERRY HOUSE	6255 US HIGHWAY 19 EAST NEWLAND, NC 28657

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Ed Miller, conducted on February 14, 2019. Records indicate the facility was licensed on 03/25/1998 for a 60 BED SCU. Therefore, this facility was surveyed for conformance with the 1996 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 1996 North Carolina Building Code for Institutional Unrestrained Occupancies. Deficiencies were cited that require a 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 at no cost; This Rule is not met as evidenced by: 1. Based on observation, the Building does not	C 101	C 101 SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0301 APPLICATION OF PHYSICAL PLANT REQUIREMENTS 1. (a) Smoke Barrier near Bedroom 307 – Exit sign directing you to exit through the Smoke Barrier Doors installed. 3/31/19 2. (a) Oxygen Room - automatic fire sprinkler installed. 3/31/19	

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C 101	Continued From page 1 meet the code requirements in effect at the time of initial Licensing or alteration, by not providing all required exits or exit access doors with exit signs. This could affect residents, staff, and visitors by not providing egress directions for a prompt evacuation of the building. Findings on February 14, 2019: a. Smoke Barrier near Bedroom 307 - there is no exit sign directing you to exit through these Smoke Barrier Doors. The corridor is more than 30 feet long from the Smoke Barrier to the intersecting corridor where you can choice two ways to exit. 2. Based on observation, the Building does not meet the code requirements in effect at the time of initial Licensing or alteration, by not having all required areas protected with sprinklers. This could affect all residents, staff, and visitors if smoke/fire is not contained in the Room or compartment of origin. Findings on February 14, 2019: a. Oxygen Room - there is no automatic fire sprinkler protection in this room.	C 101		
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: 1. Based on record review, and interview with Executive Director, the facility has unresolved deficiencies cited on their current (completed	C 111	C 111 SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION (f) 1. (a) The Annual Fire Sprinkler System Inspection, Testing, and Maintenance Report, in accordance with NFPA 25 performed on June 1, 2018, listed nine items not completed. Items were corrected.	3/31/19

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C 111	Continued From page 2 within the last twelve months) annual inspection report(s) required by this Rule. Findings on February 14, 2019: a. The Annual Fire Sprinkler System Inspection, Testing, and Maintenance Report, in accordance with NFPA 25 performed on June 1, 2018, listed nine items. At the time of survey it was not known if all items were required to be repaired or if some of them were recomendations for upgrades.	C 111		
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and 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, the Building was not maintained free of hazards, if oxygen cylinders fall, breaking their valves, propelling the cylinder, and turning it into a dangerous projectile. Findings on February 14, 2019: a. Oxygen Room - 2 portable medical oxygen cylinders are standing up on the floor and 8 portable medical oxygen cylinders are standing up on the floor in a plastic beverage crate not physically secured in racks, stands or chained to the structure.	C 166	C 166 SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS. 1. (a) Oxygen Room - 2 portable medical oxygen cylinders placed in appropriate rack plastic beverage crate removed and replaced with appropriate rack for cylinder storage.	2/22/19
C 189	Building Equipment Maintained Safe, Operating SECTION .0300 - PHYSICAL PLANT	C 189	C 189 SECTION .0300 - PHYSICAL PLANT	

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C 189	Continued From page 3 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. This Rule is not met as evidenced by: 1. Based on observation, the Building was not maintained in a safe and operating condition, because areas requiring fire sprinkler protection have partial coverage. This would affect all, by not providing the required protection that fire sprinklers provide. Findings on February 14, 2019: a. Private Dining - a dry pendent fire sprinkler head was removed for repairs b. Kitchen - two dry pendent fire sprinkler heads were removed for repairs 2. Based on observation, the Building was not maintained in a safe and operating condition, because the door(s) protecting the opening in the smoke barrier did not close completely and latch to restrict fire and smoke. This could affect all residents, staff, and visitors by not containing the smoke of the fire in the compartment of origin. Findings on February 14, 2019: a. 100 Hall Smoke Barrier - the back leaf, of the double-egress cross-corridor doors, did not latch when the fire alarm system released the doors. b. Bedroom 307 - the corridor door does not latch into its frame when closed. 3. Based on observation, the building's emergency equipment was not maintained in a	C 189	10A NCAC 13F .0311 OTHER REQUIREMENTS 1. (a) Private Dining - a dry pendent fire sprinkler head was removed for repairs. Sprinkler head replaced. b. Kitchen - two dry pendent fire sprinkler heads were removed for repairs. Sprinkler head replaced. 2. (a) 100 Hall Smoke Barrier - the back leaf, of the double-egress cross-corridor doors, did not latch when the fire alarm system released the doors. 100 Hall smoke barrier doors adjusted and latches. (b) Bedroom 307 - the corridor door does not latch into its frame when closed. Corridor adjusted and latches. 3. (a) Front Door - the self-contained combination exit sign/emergency light does not illuminate on backup power when the test button is pushed. Exit sign/emergency light operational. (b) 300 Hall - the self-contained combination exit sign/emergency light does not illuminate on backup power when the test button is pushed. Exit sign/emergency light operational.	3/31/19 3/31/19 3/31/19 3/31/19 3/31/19

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C 189	Continued From page 4 safe and operating condition. This would affect all if they could not promptly find their way to an exit during an emergency. Findings on February 14, 2019: a. Front Door - the self-contained combination exit sign/emergency light does not illuminate on backup power when the test button is pushed b. 300 Hall - the self-contained combination exit sign/emergency light does not illuminate on backup power when the test button is pushed c. Dining Room - the self-contained combination exit sign/emergency light does not illuminate on backup power when the test button is pushed 4. Based on observations, the Building fire safety was not maintained in a safe and operating condition. This could expose all to fire/smoke if not contained in room of origin. Findings on February 14, 2019: a. 200 Hall Electrical room - there are gaps around conduits not completed firestopped as they penetrate the fire-resistance-rated ceiling assembly. b. 100 Hall near Nurse Station - there is a gap around a cable not sealed as it penetrates the corridor wall. c. 400 Hall Electrical room - there are gaps around conduits not completed firestopped as they penetrate the fire-resistance-rated ceiling assembly. d. Corridor near Bedroom 410 - there is a gap around the combination exit sign/emergency light base not firestopped as it penetrates the fire-resistance-rated ceiling assembly. e. Electrical room near Executive Director - there are gaps around conduits not completed firestopped as they penetrate the fire-resistance-rated ceiling assembly f. Exterior Electrical Equipment Room - there is an open-ended sleeve with a cable not	C 189	Cont. (c) Dining Room - the self-contained combination exit sign/emergency light does not illuminate on backup power when the test button is pushed. Exit sign/emergency light operational. 4. (a) 200 Hall Electrical room - there are gaps around conduits not completed firestopped as they penetrate the fire-resistance-rated ceiling assembly. Gaps filled. (b) 100 Hall near Nurse Station - there is a gap around a cable not sealed as it penetrates the corridor wall. Gaps filled. (c) 400 Hall Electrical room - there are gaps around conduits not completed firestopped as they penetrate the fire-resistance-rated ceiling assembly. Gaps filled. (d) Corridor near Bedroom 410 - there is a gap around the combination exit. sign/emergency light base not firestopped as it penetrates the fire-resistance-rated ceiling assembly. Gaps filled. (e) Electrical room near Executive Director - There are gaps around conduits not completed firestopped as they penetrate the fire-resistance-rated ceiling assembly. Gaps filled.	3/31/19 3/21/19 3/21/19 3/21/19 3/21/19

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C 189	Continued From page 5 firestopped as it penetrates the fire-resistance-rated ceiling assembly. g. Laundry -a conduit's firestopped sealant has dropped down from the penetration of the fire-resistance-rated ceiling, leaving an unprotected opening. 5. Based on observations, the Building was not maintained in a safe and operating condition. The fire sprinkler heads have become obstructed with debris. This could affect all residents, staff and visitors if the fire sprinkler heads' have their thermal elements insulated with debris causing a delay in the response to a fire. Findings on February 14, 2019: a. Exterior Dryer Roo, - the fire sprinkler head is debris-loaded with lint. 6. Based on observation, the Facility failed to maintain the electrical system in a safe and operating condition. Findings on February 14, 2019: a. Bedroom 205 - a multiple plug adaptor, without integral overcurrent protection, is attached to an electrical power receptacle. 7. Based on observation, the Building was not maintained in a safe and operating condition, because some corridor doors did not resist the passage of smoke due to holes in the leaf of the doors. This could affect all residents, staff and visitors if the doors did not contain smoke/fire in the room of origin. Findings on February 14, 2019: a. Bedroom 203- there are two 1/4 inch diameter holes through the corridor door around the door handle. b. Library - the pair of corridor doors are hitting screws that have backed out of the overhead doorstop, keep the doors from closing and	C 189	Cont. (f) Exterior Electrical Equipment Room - there is an open-ended sleeve with a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly. Gaps filled. (g) Laundry -a conduit's firestopped sealant has dropped down from the penetration of the fire-resistance-rated ceiling, leaving an unprotected opening. Gaps filled. 5. (a) Exterior Dryer Roo, - the fire sprinkler head is debris-loaded with lint. Lint and debris removed. 6. (a) Bedroom 205 - a multiple plug adaptor, without integral overcurrent protection, is attached to an electrical power receptacle. Replaced with a multiple plug adaptor with integral overcurrent. 7. (a) Bedroom 203- there are two 1/4 inch diameter holes through the corridor door around the door handle. ¼ inch diameter hole fixed. (b) Library - the pair of corridor doors are hitting screws that have backed out of the overhead doorstop, keep the doors from closing and latching. Doors adjusted to allow closing and latching.	3/21/19 3/21/19 3/21/19 3/21/19 3/21/19 3/21/19

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C 189	Continued From page 6 latching. c. Bedroom near Marketing - there a 1/4 inch diameter hole through the corridor door around the door handle.	C 189	Cont. (c) Bedroom near Marketing - there a 1/4 inch diameter hole through the corridor door around the door handle. ¼ inch diameter hole around the door handle repaired.	3/21/19
C 191	Unvented & Portable Elec. Heaters Prohibited SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (b) There shall be a heating system sufficient to maintain 75 degrees F (24 degrees C) under winter design conditions. In addition, the following shall apply to heaters and cooking appliances. (2) Unvented fuel burning room heaters and portable electric heaters are prohibited. (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: 1. Based on Observation, the facility failed to prevent the use of portable electric heaters in an Adult Care Home. This could affect residents, staff, and visitors if heater is the ignition source of a fire. The danger increases if used by resident or combustible material is near. Findings on February 14, 2019: a. Director of Resident Care Office - a portable electric heater was found in this room.	C 191	C191 SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (a) Director of Resident Care Office - portable electric heater was removed.	2/14/19