

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  <b>HAL023045</b>	(X2) MULTIPLE CONSTRUCTION A. BUILDING: <b>01</b>  B. WING _____	(X3) DATE SURVEY COMPLETED  <b>07/09/2025</b>
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NAME OF PROVIDER OR SUPPLIER  <b>CLEVELAND HOUSE</b>	STREET ADDRESS, CITY, STATE, ZIP CODE <b>950 HARDIN DRIVE SHELBY, NC 28150</b>
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(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	<p>Initial Comments</p> <p>Report of a Construction Section Biennial Survey by Tod Hancock, conducted on July 9, 2025.</p> <p>Records indicate this facility was first licensed as a Home for the Aged on or about May 10, 1991, for 72 beds. Therefore, the facility is required to meet the 1991 Rules for Adult Care Homes, 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.</p> <p>Deficiencies were cited that require a Plan of Correction.</p>	C 000		
C 033	<p>10A NCAC 13F .0302 (e) Current Sanitation and Fire Safety Inspection</p> <p>10A NCAC 13F .0302 Design And Construction</p> <p>(e) The facility shall maintain in the facility and have available for review current sanitation and fire safety inspection reports.</p> <p>This Rule is not met as evidenced by:</p> <ol style="list-style-type: none"> <li>1. Based on an interview with the Executive Director, the facility failed to maintain in the facility, and current (completed within the last twelve months) sanitation and fire and building safety inspection reports available for review. Findings on July 9, 2025:               <ol style="list-style-type: none"> <li>a. A copy of the current Fire Official's Annual Inspection report was not available for review.</li> <li>b. A copy of the current fire alarm system</li> </ol> </li> </ol>	C 033		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_ (X6) DATE \_\_\_\_\_

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C 033	Continued From page 1  inspection report was not available for review. c. A copy of the current fire sprinkler system inspection report was not available for review.	C 033		
C 040	10A NCAC 13F .0304(a) Plans&Specs-Submit Const Drawing  10A NCAC 13F .0304 Plans And Specifications (a) When construction or remodeling of an adult care home is planned, the adult care licensee or licensee's appointed representative shall submit one copy of construction drawings and specifications to the Division for review and approval. Schematic design drawings and design development drawings may be submitted for review and approval prior to the required submission of construction drawings.  This Rule is not met as evidenced by: 1. Based on observation and interviews with Staff the facility is performing renovation and did not submit Construction Documents for review and approval. Findings on July 9, 2025: a. Hickory Hall/Rooms 11-20- The interior partitions, plumbing and electrical in these rooms have been removed and Staff indicate that a new layout will include replacement of interior finishes, plumbing and electrical.	C 040		
C 121	10A NCAC 13F .0311(a) Building equipment maintained safe, operating  10A NCAC 13F .0311 Other Requirements	C 121		

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C 121	<p>Continued From page 2</p> <p>(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.</p> <p>This Rule is not met as evidenced by:</p> <p>1. Observations revealed that the electrical equipment was not maintained in a safe and operating condition.</p> <p>Findings on July 9, 2025:</p> <p>a. Dogwood Hall Exit- The screamer box for the emergency release switch at the door did not alarm when the box was opened.</p> <p>2. Based on observation there is a failure to maintain the facility's fire safety equipment in a safe operating condition. Occupants in the smoke compartment could be exposed to smoke or fire if doors do not completely close and latch to help limit the spread of smoke or fire to the area of origin.</p> <p>Findings on July 9, 2025:</p> <p>a. Service Hall - The door does not fit into its jamb.</p>	C 121		