

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL045115	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 08/22/2024
NAME OF PROVIDER OR SUPPLIER CHERRY SPRINGS VILLAGE		STREET ADDRESS, CITY, STATE, ZIP CODE 358 CLEAR CREEK ROAD HENDERSONVILLE, NC 28792		
(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 a Construction Section Biennial Survey by Suzanna Fay conducted on August 22, 2024. This facility was licensed on May 28, 1997 for 60 beds. Based on this information, this facility was surveyed for conformance with the 1996 edition of the North Carolina State Building Code, Institutional Occupancy, the 1996 Rules for Homes for the Aged and Infirm Minimum Desired Standards and Regulations and the applicable portions of the 2005 Rules for Adult Care Homes of Seven or More Beds. Deficiencies have been cited and a Plan of Correction is required.	C 000	Responses to the cited deficiencies do not constitute and admission by the facility of the truth of the facts alleged or conclusions set forth in the statement of deficiencies or corrective action report. The plan of correction is prepared solely as a matter of compliance with state laws.	
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:	C 101		

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LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

M. M. M. M.

TITLE

Executive Director

(X6) DATE

11/6/2025

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C 101	Continued From page 1 1. Observations revealed that the facility is not in compliance with code requirements in effect at the time of construction, change in service or bed count, addition, renovation or alteration. For licensed facilities equipped with special locking the doors shall unlock upon actuation of the automatic fire detection system or automatic sprinkler system.	C 101		
C 110	Findings on August 22, 2024: a. The magnetic locks, except for the exit door by Room 21, did not release upon activation of the fire alarm. An email received on August 23, 2024 indicated that this had been corrected. Construction-Meet Sanitary Requirements SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0302 DESIGN AND CONSTRUCTION (e) The sanitation, water supply, sewage disposal and dietary facilities shall comply with the rules of the North Carolina Division of Environmental Health, which are incorporated by reference, including all subsequent amendments. The "Rules Governing the Sanitation of Hospitals, Nursing and Rest Homes, Sanitariums, Sanatoriums, and Educational and Other Institutions", 15A NCAC 18A .1300 are available for inspection at the Department of Environment and Natural Resources, Division of Environmental Health, 2728 Capital Boulevard, Raleigh, North Carolina. Copies may be obtained from Environmental Health Services Section, 1632 Mail Service Center, Raleigh, North Carolina 27699-1632 at no cost.	C 110	As stated in the summary, Magnetic locks were corrected.	8/22/2024

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C 110	Continued From page 2 This Rule is not met as evidenced by: 1. Based on observation, interview and review of available records, the facility was not in compliance with The "Rules Governing the Sanitation of Hospitals, Nursing and Rest Homes, Sanitariums, Sanatoriums, and Educational and Other Institutions". Specifically 15A NCAC 18A .1317 (a) [which requires that] Effective measures shall be taken to keep... vermin out of and to prevent their breeding and presence on the premises. Findings on August 22, 2024: a. Rooms 24, 25, 28 and 29 were actively being treated for bed bugs. Interview with staff revealed that the bed bugs came into the facility with the resident in Room 24 and based on proximity, the other three rooms were being treated as well. The pest control company was on site and stated that they had observed two live bed bugs in Room 24 that day while treating. The resident has been moved from the room. Her recliner was bagged and sitting on a back stair. Bed bugs were found in the chair and they were in the process of treating it as well. Clothing and personal items had been cleaned, bagged and currently being stored in an empty room.	C 110		
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:	C 111	Extermination services treated the affected rooms on 8/19, 8/22, and 9/3	9/3/2024

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STATE FORM

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C 150	Continued From page 4 This Rule is not met as evidenced by: 1. Observations revealed that the corridors were not free of all equipment and other obstructions. Findings on August 22, 2024: a. North Corridor - there was a large floor buffer in the corridor obstructing the exit path. The equipment was moved at the time of survey.	C 150	As stated in the SOD, the large floor buffer was removed from the exit path during the completion of the survey. Facility has identified an appropriate storage area for this piece of equipment.	8/22/2024
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Observations revealed that the walls, ceilings and floors were not kept clean and in good repair. Findings on August 22, 2024: a. Room 22 Bath - the shower floor is dirty and the grout along the bottom of the wall tile is stained a dark brown. b. Room 24 - there is a heavy presence of debris and dead bugs on the bed frame. b. Laundry - the mechanical vents have a heavy accumulation of lint and dust. c. Room 9 Bath - the shower had backed up and damaged the floor in the bedroom. The flooring in front of the bathroom has been removed.	C 164	All facility bathrooms have been inspected and repaired/cleaned. All facility bed frames have been inspected and cleaned appropriately. Laundry room mechanical vents have been cleaned and included on a cleaning schedule.	9/13/2024 9/13/2024 8/23/2024

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C 164	Continued From page 5 There is debris in the shower. The tile floor of the shower is stained. 2. Observations revealed that the furnishings were not kept in good repair. Findings on August 22, 2024: a. Room 14 - the door veneer is pulling away from the door.	C 164	Flooring will be replaced/repared in the bedroom area, along with bathroom floor repairs.	2/1/2025
			Resident room door has been repaired.	9/12/2024
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 facility was not maintained free from hazards. Oxygen bottles were improperly stored. Oxygen bottles without any means of restraint to prevent them from falling or being knocked over may present a danger to the occupants of the facility. Findings on August 22, 2024: a. Maintenance Office - there are five oxygen bottles, unsecured, on the floor of the closet. b. Basement - there are two oxygen bottles, unsecured, on the floor of the basement.	C 166		
C 185	Fire Safety-Rehearsals on Each Shift	C 185	All oxygen bottles have been relocated to a designated area and restrained appropriately.	8/23/2024

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C 185	Continued From page 6 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. This Rule is not met as evidenced by: 1. Review of records revealed that the fire rehearsals are not being conducted on each shift per quarter and the rehearsal logs do not contain a short description of what the rehearsal involved. Findings on August 22, 2024: a. There was not a fire drill conducted on the third shift of the first quarter of 2024. b. There was not a fire drill conducted on the second or third shift of the second quarter of 2024. c. The fire rehearsal logs did not contain a short description of what the rehearsal involved.	C 185		
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	C 189	Fire Drills have been corrected to include a short description of what the rehearsal involved.	8/23/2024

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C 189	Continued From page 7 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 and testing there is failure to maintain the facility's emergency fire alarm system devices and equipment in a safe operating condition. All the occupants of the facility could be affected if the equipment failed to alert the occupants in case of a fire. Findings on August 22, 2024: a. The fire alarm panel was indicating trouble due to the sprinkler system being down since May of 2024. Interview with staff revealed that the fire alarm panel had been partially disabled to prevent frequent false alarms. The system was tested and the magnetic locks on the exit doors failed to release. The facility is currently on a fire watch due to the sprinkler system being down. 2. Based on observation the facility's fire safety equipment is not maintained in operating condition. Failure to maintain fire safety equipment in operating condition could affect occupants of the facility if the equipment did not function during a fire. Findings on August 22, 2024: a. The sprinkler system is down. Interview with staff revealed that the system had been down since May. Fire watch records indicated that the system has not been operating consistently since January 28, 2024 when the fire watch records began. 3. Based on observation there is a failure to	C 189			
			The magnetic locks on all exit doors have been repaired and are working appropriately.	8/23/2024	
			Facilities Fire Sprinkler System will be repaired and or replaced.	2/1/2024	

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C 199	Continued From page 9	C 199		
C 199	Exhaust Ventilation	C 199		
	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: 1. Observations revealed that the facility did not maintain exhaust ventilation in specified spaces. Lack of ventilation allows for the build up humidity that can cause mildew and slick areas and prevents the dissipation of odors. Findings on August 22, 2024: a. Guest Bathroom - the exhaust fan is not working. b. Spa - the exhaust fan is not working.		All exhaust fans have been inspected and replaced/repared any not functioning.	8/23/2024