March 7, 2019

Ed Miller, Architect
DHSR – Construction Section
2705 Mail Service Center
Raleigh, North Carolina 27699-2705

Re: HA Construction Survey 2/5/19
FID # 971201
Facility: Cambridge House
114 Tenth Street NE
Hildebran, NC 28637
License Number: HAL-012010
County: Burke

Dear Mr. Miller:

Please find the following documents for the deficiencies noted in the Construction Survey of Cambridge House on February 5, 2019.

- Signed Statement of Deficiency
- Plan of Correction

The items have been completed, as indicated on the Plan of Correction.

If you have any questions or requests regarding this Plan of Correction, please do not hesitate to call.

We strive to continuously improve the quality of care and services delivered to our residents and appreciate your partnership in attaining that goal. Thank you for all you do.

Respectfully,

Amber Minton

Amber Minton
Administrator

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
	HAL012010	A. BUILDING: 01 B. WING _____	02/05/2019

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CAMBRIDGE HOUSE	114 TENTH STREET NE HILDEBRAN, NC 28637

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C 000	Initial Comments Report of a Construction Section Biennial Survey by Ed Miller, conducted on February 5, 2019. Records indicate this facility was first licensed on 10-13-1997, as an HA for 60 residents. Based on this information, we are requiring the facility to meet the 1996 "Homes for the Aged and Disabled - Minimum Standards and Regulations", the applicable portions of the 2005 Rules for Adult Care Homes for Seven or More Beds, and the 1996 w/ ' 99 rev Edition of the North Carolina State Building Code; Section 409 Institutional Occupancy - Group I. 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;	C 101	See attached Plan of Correction.	

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1. Based on observation, the facility failed to meet the Code requirements in effect at the time of construction or alteration by not having the proper means of egress. This could affect residents, staff and visitors if they cannot exit or exit quickly. Findings on February 5, 2019: a. Courtyard - the paired-gate secured together with several heavy duty sip ties ties, which would require the usage of a tool to open. The building has an exit that discharges into the courtyard and there is no refuge area/"safe dispersal area" within the courtyard.	C 101		
C 135	Bathrooms-Not to Be Utilized for Storage SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL ENVIRONMENT (e) The requirements for bathrooms and toilet rooms are: (10) Resident toilet rooms and bathrooms shall not be utilized for storage or purposes other than those indicated in Item (4) of this Rule; This Rule is not met as evidenced by: 1. Based on observation, the facility failed to ensure that resident bathrooms are not utilized for storage or purposes other than those indicated in the Rule. This deficiency affects all residents and staff who would not have the fixtures and/or space for the services needed. Findings on February 5, 2019: a. 100 Hall Spa - this area is being utilized to store supplies, wheelchairs and other devices.	C 135		
C 164	Housekeeping and Furnishings-Clean, Repaired	C 164		

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C 164	Continued From page 2 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. Based on observation, the building mechanical systems are not kept clean and in good repair. Findings on February 5, 2019: a. Bedroom 209 - the ventilation system with its radiation damper has an excessive accumulation of dust/lint.	C 164		
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.	C 166		

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C 166	Continued From page 3 Findings on February 5, 2019: a. Nurse Station - six portable medical oxygen cylinders are standing up on the floor in a plastic crate not physically secured in racks, stands or chained to the structure.	C 166		
C 175	Bedroom Furnishings-Clean Towel, Towel Bar SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (b) Each bedroom shall have the following furnishings in good repair and clean for each resident: (7) individual clean towel, wash cloth and towel bar in the bedroom or an adjoining bathroom; and (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1. Based on observation, the facility failed to provide residents areas, with the required individual towels and/or towel bars for each resident. Findings on February 5, 2019: a. Bedroom 300 Bathroom- this double occupancy bedroom has one of its two towel bars missing.	C 175		
C 188	Electrical Outlets in Wet Locations SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0310 ELECTRICAL OUTLETS All adult care home electrical outlets in wet locations at sinks, bathrooms and outside of building shall have ground fault interrupters. This Rule is not met as evidenced by:	C 188		

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C 188	Continued From page 4 1. Based on Observation, the facility failed to provide electrical outlets in wet locations at sinks with ground fault interrupters. This would affect residents, staff, and visitors by not providing ground fault protection to these devices. Findings on February 5, 2019: a. 100 Hall Beauty Shop - an electrical power receptacle, on the corridor wall, is within six feet of the shampoo bowl and does not provide ground fault protection.	C 188		
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. This Rule is not met as evidenced by: 1. Based on observation, the building's Structural system is not maintained in a safe and operating condition. This would affect all if the roof become unstable and a collapse happens. Findings on February 5, 2019: a. Attic above Dining - a roof truss had part of a web member removed during the replacement of a HVAC unit. In addition, the continuous lateral bracing for this web member was cut into, disrupting it function. The two pieces of lateral bracing are now ½ to 3/4 inch out of alignment with each other. Wood truss members and components shall not be cut, notched, drilled,	C 189		

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C 189	Continued From page 5 spliced or altered in any way without written concurrence and approval of a registered design professional. b. Attic above Entrance Lobby - a roof truss had part of a web member removed during the replacement of a HVAC unit. Wood truss members and components shall not be cut, notched, drilled, spliced or altered in any way without written concurrence and approval of a registered design professional. 2. Based on observation, the building's emergency equipment was not maintained in a 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 5, 2019: a. 200 Hall Staff Restroom -the wall-mounted self-contained emergency light is making a buzzing sound and has no light output when the test button is pushed. 3. Based on observation, the Building was not maintained in a safe and operating condition, because the corridor doors do not resist the passage of smoke. Corridor door must positively latch into their frame under normal closing force. This could affect all residents, staff, and visitors if the doors did not latch to contain smoke/fire in the room of origin. Findings on February 5, 2019: a. Living room - the "inactive leaf" of the pair of corridor doors is equipped with a manual flush bolt that is circumventing the requirement for these doors to be positive latching. b. Dining room - the "inactive leaf" of the pair of corridor doors is equipped with a manual flush bolt that is circumventing the requirement for these doors to be positive latching.	C 189		

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C 189	Continued From page 6 4. Based on Observation, the corridor doors are not maintained in a safe and operating condition. This affects all by not containing smoke and fire in the room of origin. Findings on February 5, 2019: a. Bedroom 306 - the corridor door has a trashcan holding the door open. This prevents the rapid release of the door with a light push or pull of the door, to close and latch. 5. 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 5, 2019: a. Kitchen Office - there is a gap around a cable not firestopped as it penetrates the fire-resistance-rated ceiling assembly.	C 189		
C 193	Ovens, Ranges in Activity or Res. Rooms SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0311 OTHER REQUIREMENTS (4) Ovens, ranges and cook tops located in resident activity or recreational areas shall not be used except under facility staff supervision. The degree of staff supervision shall be based on the facility's assessment of the capabilities of each resident. The operation of the equipment shall have a locking feature provided, that shall be controlled by staff. (5) Ovens, ranges and cook tops located in resident rooms shall have a locking feature provided, controlled by staff, to limit the use of the equipment by residents who have been assessed by the facility to be incapable of operating the equipment in a safe manner. (k) This Rule shall apply to new and existing	C 193		

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C 193	Continued From page 7 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 interview with Staff the facility failed to provide an environment in accordance with Rule by not providing proper control over the range. Findings on February 5, 2019: a. Activity - the range appears to be equipped with a locking feature, but no one knew where a key was and the burners had power. In addition, no staff was in the room to supervise usage of range and combustibles were on the burners.	C 193		

Cambridge House

1. FID #: 971201

License #: HAL-012010

DHSR Construction Survey of February 5, 2019

Section .0300 – Physical Plant
10A NCAC 13F .0301 Application of Physical Plant Requirements
Tag # C 101

1. The gates have been removed from the fencing and obtaining estimates to replace/repair fence.

Section .0300 – Physical Plant
10A NCAC 13F .0305 Physical Environment
Tag # C 135

1. All items to be removed from Spa Bathroom and staff have been educated on this rule. Administrator and/or Maintenance Director will ensure spa bathroom is not being used for storage during daily walk through of facility.

Section .0300 – Physical Plant
10A NCAC 13F .0306 Housekeeping and Furnishings
Tag # C 164

1. The ventilation system has been cleaned and Maintenance Director will monitor all rooms on a routine basis.

Tag # C 166

1. Oxygen supply company, "Lincare", was contacted by Administrator and proper metal oxygen storage container was brought. Administrator expressed the importance of properly storing Oxygen containers. Staff educated on Rule and Supervisors will be monitoring all residents on oxygen to ensure proper storage.

Tag # C 175

1. Towel Bar has been replaced and Maintenance Director has ensured that all rooms have the required furnishings.

Section .0300 – Physical Plant
10A NCAC 13F .0310 Electrical Outlets
Tag # C 188

1. Electrician notified and will be replaced with a GFI receptacle.

Section .0300 – Physical Plant
10A NCAC 13F .0311 Other Requirements
Tag # C 189

1. a) Professional Engineer consulted and repairs to trusses/framework were completed by Maintenance Director. Engineer inspected completed work (see certification letter attached)
   b) Same as noted above in 1a.
2. The emergency light in Staff Restroom was replaced. Maintenance Director has checked all emergency lights to ensure working properly.
3. a) Automatic Flush Bolts ordered and will be installed by Maintenance Director upon arrival.
   b) Automatic Flush Bolts ordered and will be installed by Maintenance Director upon arrival.
4. Trash can removed. Administrator and/or Maintenance Director will ensure doors not propped open improperly during daily walk through.
5. Gap has been repaired with Fire Caulk.

Tag # C 193

1. The main breaker for the range, which is located in the kitchen and accessible only to staff, will be off at all times. A note is posted above the range stating that power is off and must be turned on and supervised by staff at all times while in use. Administrator and/or Maintenance Director will ensure power off during daily walk through.

The completion date for the above listed violations will be Friday April 5, 2019.

Amber Minton — 3-7-2019

Amber Minton, Administrator — Date

Ray Burris Engineering, NC PE #14033, 231 Forest Drive, NE Valdese, NC 28690

Ph. 828-448-0829 **E-mail: Lrburris3@gmail.com**

March 1, 2019

Project: Repairs to Roof Framing and Repairs to Roof Trusses, Engineer Certification
Location: Cambridge House, 114 10th Street NE, Hildebran, NC

To Whom It May Concern:

This letter is regarding engineering certification of **Repairs that have been Completed for Roof Framing and Repairs to Roof Trusses** at the above building located in Hildebran, NC.

I inspected Roof Truss Framing in the Attic at this location on 2-28-2019.

Inspected at All Locations in Attic Area and inspected All Roof Trusses Framing at locations where trusses and framing members were cut for access to Mechanical Units.

Inspected repaired Roof Truss Framing Including Vertical Truss Web Members that were cut and repaired, and Horizontal 2x Bracing from truss to truss that was cut and is now repaired.

All repairs have been properly completed using accepted construction methods and using splice pieces with metal framing connectors, and 3/4" plywood scabs both sides, and epoxy bond.

I have no reservations concerning the completed repairs, and this is to certify that the Roof Truss Framing for this building will properly support loading in accordance with the requirements of the NC Building Code.

It is my opinion and this is to certify that the Repairs have been **Properly Completed at Roof Framing and Roof Trusses** as described above, and this is to certify that the Roof Framing and Roof Trusses for this building are in accordance with the requirements of the NC Building Code.

Please contact me should you have any questions about this matter.

Respectfully Submitted by:

Ray Burris, P.E.

3/1/2019