

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL012010	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING _____	(X3) DATE SURVEY COMPLETED 06/25/2024
NAME OF PROVIDER OR SUPPLIER CAMBRIDGE HOUSE		STREET ADDRESS, CITY, STATE, ZIP CODE 114 TENTH STREET NE HILDEBRAN, NC 28637		
(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 June 25, 2024. A Follow Up Construction Survey was conducted at the same time. Records indicate this facility was first licensed on October 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 Unrestrained Occupancy. 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		

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

TITLE

(X6) DATE

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C 101	Continued From page 1 This Rule is not met as evidenced by: 1. Observations revealed that the facility does not meet the requirements of NFPA 72. All doors that are required to be unlocked by the fire alarm system shall remain unlocked until the fire alarm condition is manually reset. Findings on June 25, 2024: a. All of the exit doors' locks re-engaged when the fire alarm was placed in silence mode. b. The magnetic hold open devices on the cross corridor doors re-magnetized when the fire alarm was placed in silence mode. 2. Observations revealed that the facility does not meet licensure and code requirements in effect at the time of construction, change in service or bed count, addition, renovation or alteration. Electromagnetic locks shall have an on/off emergency release switch capable of interrupting power to all electromagnetically locked doors in the facility. Release switches shall be located and properly identified at each nurses station serving the locked unit. An additional emergency release switch shall be provided for each locked door and located within 3 feet of the door. Findings on June 25, 2024: a. The release switch located at the Nurses' Station did not release the electromagnetic locks at the exit doors.	C 101		
C 160	Outside Premises-Clean, Safe SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0305 PHYSICAL	C 160		

Division of Health Service Regulation

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C 160	Continued From page 2 ENVIRONMENT (m) The requirements for outside premises are: (1) The outside grounds of new and existing facilities shall be maintained in a clean and safe condition; This Rule is not met as evidenced by: 1. Observations revealed that the outside grounds were not maintained in a clean and safe condition. Findings on June 25, 2024: a. The downspout sleeve at the back corner of the 100 hall has a crack and water is ponding around the gate creating a hazardous condition.	C 160		
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 and floors were not kept in good repair. Findings on June 25, 2024: a. Room 300 Bath - the floor drain for the shower was not secured creating a possible trip hazard. b. Room 300 Bath - a section of the cove base	C 164		

Division of Health Service Regulation

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C 164	Continued From page 3 was loose and detaching from the wall beside the toilet.	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 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 June 25, 2024: a. Nurse Station - there are seven oxygen bottles sitting unsecured in a shallow plastic tray. b. Room 207 - there is one unsecured oxygen bottle on the floor in front of the window. This was corrected at the time of survey. c. Oxygen Storage - there is one tall and two short oxygen bottles unsecured on the floor of the room. 2. Based on observation there is a failure to maintain the facility free from hazards. Means of egress or exit paths that are obstructed or blocked could delay or hinder emergency evacuation of the occupants from the facility.	C 166		

Division of Health Service Regulation

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C 166	Continued From page 4 Findings on June 25, 2024: a. Activity Room - there are stacks of chairs partially blocking the exit to the porch.	C 166		
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 there is a failure to maintain the building's fire safety systems in a safe condition. Holes or gaps at penetrations through fire resistant rated ceilings could allow fire and smoke to spread beyond the area of origin. Findings on June 25, 2024: a. Front door - there is a small hole at the base of the exit sign. b. Med Room - there is a 1" diameter hole in the ceiling at the light fixture. c. There is a nail pop in the ceiling outside of Room 308 that has left a 1/4" hole in the ceiling. d. Laundry - there is one unsealed conduit over the emergency light. The dryer exhaust duct does not have a flange to cover the gap around the duct where it penetrates the ceiling. e. Business Manager's Office - there is an	C 189		

Division of Health Service Regulation

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C 189	Continued From page 5 unsealed cable bundle in the front corner of the room. 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. Findings on June 25, 2024: a. Clock Room - the door hits the frame and does not close and latch. b. Room 302 - the front bed overlaps the door frame so that the door cannot close and latch. The latch plate is also missing. c. Room 310 - the latch plate is missing from the door so that it doesn't close completely to prevent the passage of smoke. d. Activity Room - the door hits the frame preventing it from closing and latching. 3. Based on observation, the electrical equipment is not being maintained in a safe operating condition. Missing or broken cover plates on electrical devices may cause injury to the occupants of the facility if wiring is exposed. Findings on June 25, 2024: a. Beauty Shop - the outlet on the long wall is not secure to the junction box. 4. Based on observation there is a failure to maintain the building's fire safety components in a safe operating condition. Any unapproved device used to keep a door open is an impediment to quickly closing the door. The occupants in the facility could be affected if doors cannot be closed as required so as to limit the	C 189		

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C 189	Continued From page 6 spread of smoke and/or fire to the area of origin. Findings on June 25, 2024: a. Dry Storage - the door was tied back with a bungee cord. The cord was removed at the time of survey. 5. Observations revealed that the electrical equipment was not maintained in a safe and operating condition. Findings on June 25, 2024: a. Smoking Porch - the exterior outlet by the Activity Room door is missing its weatherproof cover. b. Activity Room - the screamer box for the emergency release switch at the door did not alarm when the box was opened.	C 189		
C 199	Exhaust Ventilation 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.	C 199		

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C 199	Continued From page 7 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 June 25, 2024: a. Clock Room - the exhaust fan is not working. b. 100 Hall Spa - the exhaust fan is not working. c. 200 Hall - the Staff Bathroom and Guest Bathroom fans are not working. d. Laundry - the exhaust fan is not working.	C 199		