

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 R 12/05/2024
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 Biennial Follow Up Construction Survey by Suzanna Fay conducted on December 5, 2024. There are deficiencies cited in the Biennial Construction Survey that remain to be corrected and one new deficiency has been added.	{C 000}		
{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 December 5, 2024: d. Laundry - The dryer exhaust duct does not have a flange to cover the gap around the duct where it penetrates the ceiling. Caulk was inserted in the gaps but is already separating from the opening. 2. Based on observation there is a failure to maintain the facility's fire safety equipment in a	{C 189}		

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

TITLE

(X6) DATE

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{C 189}	Continued From page 1 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 December 5, 2024: b. Room 302 - the missing latch plate was installed but the door still does not latch when closed. New Deficiency: 3. 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 December 5, 2024: a. At the time of the follow up survey, the fire alarm was in trouble mode. The system was tested and appeared to be in working order. Interview with staff revealed that the error was related to one of the phone lines.	{C 189}		