



STATE OF WASHINGTON
DEPARTMENT OF SOCIAL AND HEALTH SERVICES
AGING AND LONG-TERM SUPPORT ADMINISTRATION
1200 Alder Street, Union Gap, WA 98903

CENTRAL COLUMBIA SENIOR LIVING
THE CAMBRIDGE
301 H ST SW
QUINCY, WA 98848

RE: THE CAMBRIDGE License # 1716

Dear Administrator:

This letter addresses Compliance Determination(s) 44400 (Completion Date 07/19/2024) and 41813 (Completion Date 05/28/2024).

The Department completed a follow-up inspection of your Assisted Living Facility on 07/19/2024 and found no deficiencies. Your facility meets the Assisted Living Facility licensing requirements.

The Department found that deficiencies for the following licensing laws and regulations were corrected:
WAC 388-78A-2040-1, WAC 388-78A-2040-2, WAC 388-78A-2040

The Department staff who did the on-site verification:
Nicole Velazquez, Community Complaint Investigator

If you have any questions, please contact me at (509)572-7394.

Sincerely,

Michelle Closner

Michelle Closner, Field Manager
Region 1, Unit Z
Residential Care Services



Residential Care Services Investigation Summary Report

Provider/Facility: THE CAMBRIDGE

Provider Type: Assisted Living Facility

License/Cert.#: 1716

Compliance Determination #: 41813

Intake ID: 130915

Investigator: Brittney Shull

Region/Unit #: RCS Region 1 / Unit G

Investigation Date(s): 05/28/2024 through 05/28/2024

Complainant Contact Date(s):

Allegation(s):

There was a failed Fire Marshall follow up inspection.

Investigation Methods:

Sample:	Total residents: 21 Resident sample size: 3 Closed records sample size: 0
Observations:	Residents, Staff, Resident to Staff interaction, Environment, Smoke detectors, Sprinklers.
Interviews:	Residents, Staff.
Record Reviews:	Characteristic Roster, Washington State Patrol Fire Protection Bureau Inspection Reports, Facility Policy, Firewatch Documentation, Plan of correction for failed fire marshal follow up inspection.

Investigation Summary:

Interview and record review showed that the facility had failed a Fire Marshall follow up inspection. Failed Practice Identified, WAC 388-78A-2040, reference Statement of Deficiencies dated 06/04/2024.

Conclusion / Action:

- ☒ Failed Provider Practice Identified / Citation(s) Written
- ☐ Failed Provider Practice Not Identified / No Citation Written
- ☐ N/A



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Statement of Deficiencies	License # 1716	Compliance Determination # 41813
Plan of Correction	THE CAMBRIDGE	Completion Date
Page 1 of 3	Licenses: CENTRAL COLUMBIA SENIOR LIVING	05/28/2024

You are required to be in compliance at all times with all licensing laws and regulations to maintain your Assisted Living Facility license.

The department completed data collection for an unannounced on-site complaint investigation on 05/28/2024 and 06/26/2024 of:

THE CAMBRIDGE
301 H ST SW
QUINCY, WA 98849

This document references the following complaint number(s): 130915

The following sample was selected for review during the unannounced on-site visit: 3 of 21 current residents and 0 former residents.

The department staff that investigated the Assisted Living Facility:

Brittney Shull, Community Complaint Investigator

From:
DSHS, Aging and Long-Term Support Administration
Residential Care Services, Region 1, Unit 2
1200 Alder Street
Union Gap, WA 98903

As a result of the on-site visit(s), the department found that you are not in compliance with the licensing laws and regulations as stated in the cited deficiencies in the enclosed report

Michelle Clooner
Residential Care Services

06/04/2024
Date

I understand that to maintain an Assisted Living Facility license, the facility must be in compliance with all the licensing laws and regulations at all times.

Statement of Deficiencies	License #: 1716	Compliance Determination # 41813
Plan of Correction	THE CAMBRIDGE	Completion Date
Page 2 of 3	Licensee: CENTRAL COLUMBIA SENIOR LIVING	05/28/2024


Administrator (or Representative)


Date

WAC 388-78A-2040 Other requirements.

- (1) The assisted living facility must comply with all other applicable federal, state, county and municipal statutes, rules, codes and ordinances, including without limitations those that prohibit discrimination
- (2) The assisted living facility must have its building approved by the Washington state fire marshal in order to be licensed

This requirement was not met as evidenced by:

Based on interview and record review, Assisted Living Facility (ALF) failed to maintain compliance with the Washington State Patrol Fire Protection Bureau when the Deputy State Fire Marshall (DSFM) found the ALF in violation of several codes on initial inspection on 12/21/2023, and reinspection on 03/18/2024. This failure placed residents at risk for harm in the event of a fire

Findings included...

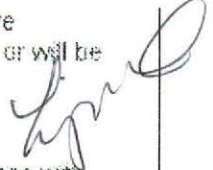
Record review of the DSFM facility inspection checklist dated 12/21/2023 showed that the ALF had violations that included files stored in the mechanical room, lamp fuel stored within 36 inches of electrical panels, a fire door was propped open, a fire alarm breaker was not tagged, sprinkler, fire alarm sensitivity, and generator inspections were not done, an oxygen cylinder was not secured, fire drill records were not produced, and emergency light failures were not documented as corrected.

Record review of the DSFM facility inspection checklist dated 03/18/2024 showed that the ALF had not corrected all the previous violations cited on 12/21/2023, which included a fire alarm breaker was not tagged, inspections of the sprinklers, fire alarm sensitivity, and generators were not done.

In an interview on 05/28/2024 at 11:31AM, Staff A, Executive Director, stated that they had failed to conduct required inspections because they had difficulty locating a fire suppression service that could meet the ALF's needs.

Plan/Attestation Statement

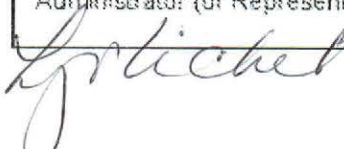
Statement of Deficiencies	License #: 1716	Compliance Determination #41813
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I hereby certify that I have reviewed this report and have taken or will take active measures to correct this deficiency. By taking this action, THE CAMBRIDGE is or will be in compliance with this law and / or regulation on (Date) ~~7/19/2024~~ 7-12-2024 

In addition, I will implement a system to monitor and ensure continued compliance with this requirement.

Stephanie Rubio
Administrator (or Representative)

6/11/2024
Date



Plan of attestation

RE: non-compliance of fire/sprinkler inspections

Complaint # 130915

The Cambridge Assisted Living
301 H Street SW
Quincy, WA 98848

We appreciate the opportunity to address this matter and assure you of our commitment to rectify it promptly.

Here is a summary of what we have to put in place to stay in compliance,

We have arrangements in place with Guardian to perform and assist in tracking all our fire/sprinkler inspections, including the suppression inspection.

A system of tracking is being developed with our Safety coordinator to stay on top of all these inspections - and he has been given a deadline to have a list of inspections and their due dates on a calendar so missed inspection would not happen on our behalf

Once again, we appreciate your attention to this matter and apologize for any inconvenience caused. We are fully committed to achieving compliance and ensuring the highest standards of safety and quality.

Thank you kindly,

Stephanie Rubio