



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Mailing Date: November 19, 2019

Mr. Robert D. Hand
Owner
Cornerstone Personal Care Home, LLC
969 Bedford Street
Claysburg, Pennsylvania 16625

RE: Cornerstone Personal Care Home
Certificate #: 333270

Dear Mr. Hand:

As a result of the Department's Bureau of Human Services Licensing inspection on and September 11, 2019 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All violations cited on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

A handwritten signature in black ink, appearing to read "Brett Swanger".

Brett Swanger
Human Services Licensing Supervisor

Enclosure
Violation Report

Violation Report

Facility Information

Name: CORNERSTONE PERSONAL CARE HOME
Address: 969 BEDFORD STREET,, CLAYSBURG, PA 16625
County: BLAIR **Region:** CENTRAL

License Number: 33327

Administrator

Name: Denise Moyer-Hand **Phone:** 8143305431 **Email:**

Legal Entity

Name: CORNERSTONE PERSONAL CARE HOME LLC
Address: 969 BEDFORD STREET, CLAYSBURG, PA, 16625

Certificate(s) of Occupancy

Type: Other **Date:** **Issued By:**

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 17 **Waking Staff:** 13

Inspection

Type: Partial **BHA Docket #:** **Notice:** Unannounced
Reason: Complaint

Inspection Dates and Department Representative

09/11/2019 - On-Site: Jason McCloskey, Cybil Bomberger

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 24 **Residents Served:** 17

Secured Dementia Care Unit

In Home: No **Area:** **Capacity:** **Residents Served:**

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 9 **Are 60 Years of Age or Older:** 12
Diagnosed with Mental Illness: 3 **Diagnosed with Intellectual Disability:** 2
Have Mobility Need: 0 **Have Physical Disability:** 0

25a - Written Contract and Review

Regulations

2600.

25.a. Prior to admission, or within 24 hours after admission, a written resident-home contract between the resident and the home shall be in place. The administrator or a designee shall complete this contract and review and explain its contents to the resident and the resident's designated person if any, prior to signature.

Description of Violation

Resident 1 was admitted on 3/9/19. The contract was not signed by the resident or a representative of the home until 3/20/19.

Plan of Correction (POC)

(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

Resident 1 was scheduled to arrive the weekend of 3/15/19. An agreement was made between the Home and Nason Hospital on 3/9/19 for payment for resident 1 as he did not have any money and was not eligible for his social security until May 2019. Resident 1 was given all of the "addendums" to the contract upon his arrival including residents rights, house rules, how to report abuse, etc... but did not actually agree to sign the contract until the 20th. From now forward, each new resident entering the home will meet with the Administrator and review and sign the contract within 24 hours.

Legal Entity Representative

(Continued on Page 2A)

DH 9-26-19

Denise Moyer-Hand
Signature

Denise Moyer-Hand
Administrator/Owner 9-24-19
Printed Name and Title Date

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 9/27/2019 Plan of correction implementation status as of 11/19/2019
(Date) (Date)

The above plan of correction was approved by BAS Fully Implemented
(Initials) Partially Implemented - Adequate Progress
 Partially Implemented - Inadequate Progress
 Not Implemented

2600.25(a)

The administrator will complete an audit all current resident records to ensure that each resident has a signed contract in place. The audit and correction of all unsigned contracts shall be completed by 10/11/2019.

BAS 9/27/2019

OK

Denise Moyer-Hand

Denise Moyer-Hand
Administrator / owner

9-26-19

51 - Criminal Background Check

Regulations

2600.

51. Criminal History Checks - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. § 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).

Description of Violation

There was no background check performed for Direct Care Staff Person A, hired 7/1/19.

Plan of Correction (POC)

(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

A background check was performed for direct care staff person A on 9-25-19.

When he was hired on 6-30-19 and "trained" by our former disgruntled employee the background check was simply overlooked. Staff person A provided us with some information at the time of the interview so we had a good idea, we just overlooked the check because it was a hectic time at the home.

(Continued on Page 3A)

Legal Entity Representative

~~DA~~ 9-26-19
Denise Moyer-Hand
Signature

Denise Moyer-Hand
Administrator/owner 9-25-19
Printed Name and Title Date

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 Not Implemented

2600.51

The administrator will complete an audit all current staff records to ensure that each staff person has a criminal history background check completed. The audit and submission for a background check, for all staff lacking this document, shall be completed by 10/11/2019. All staff members without a criminal history background check will not be permitted to provide unsupervised care until a check has been completed.

BAS 9/27/2019


Denise Mayer-Hand
Denise Mayer-Hand
Owner/Administrator
9-26-19

85b - Infestation

Regulations

2600.

85.b. There may be no evidence of infestation of insects or rodents in the home.

Description of Violation

The home is infested by bedbugs as evidenced by numerous live bugs found throughout the home including on a chair in the downstairs living room and on the floors and beds in bedrooms 1, 2, 3, 22, 24, and 26.

Plan of Correction (POC)

(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

The Home has found bedbugs brought in from a former resident a few months ago. We have had numerous products tested and had professional exterminators in to treat the entire building on 6/18-19, 2019. We paid over \$6,000 and had a 60-day warranty. The exterminators were called back on 7/23, 8/2, 8/5, 8/9 and 8/15 for spot treatments. They have since refunded our money because their product was not effective (100%). We have consulted Ehrlich Co. and Susan was here on 9/19 for a quote. She is going to help us with our protocol and we will be moving forward with her to eradicate the bugs for good.

(Continued on Page 4A)

Legal Entity Representative

~~Denise Moyer-Hand~~ 9-26-19
Denise Moyer-Hand
Signature

Denise Moyer-Hand
Administrator/owner 9-24-19
Printed Name and Title Date

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Plan of Correction for state inspection 9-25-19

Violation 2600.85b

All of the receipts for the products we bought for the treatment of the bedbugs were provided to the state inspectors and scanned while they were here. We spoke to our local professional exterminators, Robert's Pest Control about the ineffectiveness of their treatment (Apprehend). We spoke to Steve Genter who is the CEO of the company who decided to refund our investment of almost \$6,000.

We have consulted Ehrlich and had a run-through with Susan Sprain, the field representative on September 19, 2019 and we currently working on a plan to treat the Home again, either through chemicals, or heat treatment. In the interim, we are using another product that seems to be fairly effective, and we believe we are about 85% clear of the problem. The rooms where the state inspectors noticed the live bugs have all been treated and we continue to do so on a weekly basis. We strip the rooms, launder all of the sheets and bedding, vacuum all of the product and re-apply as needed. We are careful with visitors and family and spot treat whenever we see something. All of the residents are aware of the problem and all of their families have been notified to be extra careful until we can eradicate the problem. We have also stopped using the Blair Senior Services (Area on Aging) van rides as we are fairly certain that is where the problem originated. We are working with the resident's insurance providers to find alternate transportation so that we are not re-infesting the Home through travel.

We hope to receive the quote from Ehrlich by the end of the month for their solution, and we hope to go from there. Of course it would depend on the price and what we can afford, as well as the safety of the product for the residents and the treatment plan (as far as logistics.)

✓ { **Within 15 days from the Plan of Correction Approval Date on Page 6, the home, in conjunction with a licensed professional extermination agency/exterminator, will develop a plan for the eradication of the bedbugs. As soon as the plan is developed it will be provided to the Department for review. Upon Department approval, the plan will be implemented as soon as possible, but in no less than 30 days. Documentation for the completion of the plan and verification of eradication by a licensed professional extermination agency/exterminator will be provided to the Department.

90 days after the completion of the eradication plan, the home will be inspected for infestation by a licensed professional extermination agency/exterminator. Documentation of this inspection and all services provided will be submitted to the Department.

BAS 9/27/2019

(OK)

~~BA~~ 9-27-19

9-25-19

Denise Moyer Hand

Denise Moyer-Hand.
Owner/Administrator

101n - Bedroom - opposite sex

Regulations

2600.

101.n. A resident may not be required to share a bedroom with an individual of the opposite sex.

Description of Violation

After being asked by the home management, Resident 2 (a female) is currently sharing her bedroom with Resident 3 (a male). Resident 2 does not want to share the room with Resident 3 stating that it makes her feel uncomfortable and she has privacy concerns.

Plan of Correction (POC)

(Attach pages as necessary. Remember that you must sign and date any attached pages. Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.)

Resident 2 was asked to share a room with resident 3 as he recovers from knee surgery (his room is on the 2nd floor) She has never expressed any concerns about privacy until she told the inspectors. It has been more than a few months as we originally thought as his recovery is slow. We will be moving him into another room on the 1st floor until he is able to return to his room upstairs. We are hoping to do this by September 28th weekend. Resident 2 is in agreement with this date.

(Continued on Page 5A)

Legal Entity Representative

~~DA~~ 9-26-19
Denise Moyer-Hand
Signature

Denise Moyer-Hand
Administrator, Owner 9-24-19
Printed Name and Title Date

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- Not Implemented

2600.101n

*Going forward, the home will not be the party to initiate the discussion regarding the sharing of bedroom space by residents of the opposite sex. Residents will be responsible for initiating the request, and both residents and Administration shall sign and date a document (created by the home) agreeing to the shared bedroom space between individuals of the opposite sex.

BAS 9/27/2019

OK

~~Denise Moyer - Hand~~
Denise Moyer - Hand
Owner/Administrator