

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY PUBLIC

September 18, 2024

[REDACTED], OWNER / ADMINISTRATOR
CORNERSTONE OF CLAYSBURG LLC
[REDACTED]

RE: CORNERSTONE OF CLAYSBURG
969 BEDFORD STREET
CLAYSBURG, PA, 16625
LICENSE/COC#: 33327

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/23/2024 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: CORNERSTONE OF CLAYSBURG License #: 33327 License Expiration: 07/17/2025
 Address: 969 BEDFORD STREET, CLAYSBURG, PA 16625
 County: BLAIR Region: CENTRAL

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

Name: CORNERSTONE OF CLAYSBURG LLC
 Address: [REDACTED]

Certificate(s) of Occupancy

Type: Other Date: 03/14/1984 Issued By: Labor & Industry

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 24 Waking Staff: 18

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
 Reason: Interim Exit Conference Date: 07/23/2024

Inspection Dates and Department Representative

07/23/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 24 Residents Served: 21
 Secured Dementia Care Unit
 In Home: No Area: Capacity: Residents Served:
 Hospice
 Current Residents: 0
 Number of Residents Who:
 Receive Supplemental Security Income: 16 Are 60 Years of Age or Older: 16
 Diagnosed with Mental Illness: 3 Diagnosed with Intellectual Disability: 6
 Have Mobility Need: 3 Have Physical Disability: 2

Inspections / Reviews

07/23/2024 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 08/04/2024

08/06/2024 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 09/13/2024
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 08/13/2024

Inspections / Reviews *(continued)*

08/15/2024 POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/13/2024

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 09/14/2024

09/18/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/13/2024

Reviewer: [REDACTED]

Follow Up Type: Not Required

142b Refusal Medical Treatment

1. Requirements

2600.

142.b. If a resident refuses routine medical or dental examination or treatment, the refusal and the continued attempts to educate and inform the resident about the need for health care shall be documented in the resident's record.

Description of Violation

Resident #1 has refused medical treatments and has not had a medical evaluation since [REDACTED]. However, there is no documentation in the resident's record of the home's continued attempts to educate and inform the resident about the need for health care.

Plan of Correction

Accept ([REDACTED] - 08/15/2024)

The Administrator has discussed the importance of regular visits to the Provider. This resident only recently agreed to switch providers when [REDACTED] talked with [REDACTED] the state inspector on [REDACTED]. The administrator contacted the (current) provider to obtain medical records and also spoke with the resident's POA and grandson on [REDACTED] to make sure [REDACTED] was onboard. The new provider was contacted by the administrator on [REDACTED] and agreed to take on this resident. The provider was busy for a few weeks, but agreed since there were not any imminent issues, the provider would schedule a time to see the resident on or around the time of [REDACTED]. The administrator discussed this issue as well as a review of this resident's RASP's at a staff meeting that was held on [REDACTED] (quality management team and aides.) The administrator relayed this information to the resident on [REDACTED] and gathered all additional information copied to provider via fax. Going forward - the next Quality Management team meeting will be held on September 13, 2024 where the administrator and management team will review and update resident's RASP's (as needed) and include documentation as such for any refusals, treatments, medication changes, discussions and/or education provided to the resident at that time between the administrator, QM team and the resident.

Proposed Overall Completion Date: 09/13/2024

Licensee's Proposed Overall Completion Date: 09/13/2024

Implemented ([REDACTED] - 09/18/2024)