Office of Inspector General

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	100007	A. BUILDING _____ B. WING _____	C 03/04/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
CORNERSTONE MANOR I LLC	515 WATER STREET SCOTTSVILLE, KY 42164

(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
P 000	Initial Comments AMENDED A Complaint Survey investigating Complaint KY41921 was initiated on 03/04/2024 and concluded on 03/04/2024. There was no deficient practice was identifed with KY41921. The facility census was twenty-six (26).	P 000		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE

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P 000	Initial Comments A Complaint Survey investigating Complaint KY41921 was initiated on 03/04/2024 and concluded on 03/04/2024. Deficient practice was identifed with KY41921 and a deficiency was cited. The facility census was twenty-six (26).	P 000		
P 015	902 KAR 20:036 3(1)(a-d) Section 3. Administration and Operation (1) Licensee. The licensee shall be legally responsible for: (a) The operation of the PCH or SPCH; (b) Compliance with federal, state, and local laws and administrative regulations pertaining to the operation of the facility; (c) The development and implementation of policies related to administration and operation of the facility, and (d) If the licensee is an SPCH, the development and implementation of written transition procedures to ensure cooperation with an individual or entity that assists with transitioning residents with an SMI to community living arrangements. This requirement is not met as evidenced by: Based on interview, record review, and review of	P 015	Cornerstone Manor will continue to comply with the PCH regulations in determining when a background check needs to be completed. As is stated in the regulation, a background check is to be completed on an individual who is employed by a long term care facility in a direct care position.	

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE — TITLE — (X6) DATE

Amanda Robledo · manager 5-14-24

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P 015	Continued From page 1 906 KAR 1:190, it was determined the facility failed to maintain compliance with administrative regulations pertaining to the operation of the facility. It was determined that the facility's ownership contracted with an individual, Contracted Maintenance #1, to provide maintenance work at the facility. Contracted Maintenance #1 was determined to be ineligible to work around residents, however, due to a disqualifying offense. Record review revealed there had been no background check conducted on Contracted Maintenance #1. Upon being informed by the State Ombudsman for the facility of Contracted Maintenance #1's background and ineligibility to work in long-term care settings, the facility's ownership took no action. The findings include: Review of 906 KAR 1:190 Kentucky Applicant Registry and Employment Screening Program, (4) "Disqualifying Offense" revealed it included individuals guilty of a felony offense as described in Kentucky Revised Statute (KRS) 507, which included charges of Reckless Homicide. Continued review of 906 KAR 1:190 defined "Employee" as an individual who was hired directly or through contract by an employer of a long-term care facility and had duties that involved or might involve one-on-one (1:1) contact with a patient, resident, or client. In an interview with the Administrator on 03/04/2024 at 4:20 PM, she stated that currently the facility does not have maintenance staff, and if something breaks they call an outside vendor to come and fix it. She stated she was familiar with Contracted Maintenance #1 was considered an	P 015	Amanda Robledo manager 5-14-24	

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P 015	Continued From page 2 outside vendor service. The Administrator stated he came into the facility around Christmas time this past year to repair the baseboard heaters and hooked up the new ice machines. She further stated that she does not know anything about his background and that he was not considered an employee of the facility or its parent company. The Administrator stated she had nothing to do with his hiring so she is not sure if there was a criminal background check performed on Contracted Maintenance #1. In an interview with the Facility Owner on 03/04/2024 at 4:30 PM, she stated that Contracted Maintenance #1 was an independent contractor and he hasn't been in the facility recently. She further stated that nothing has changed regarding her stance on contracted employees and everything is the same as she stated in her prior interviews with State Surveyor's during complaint surveys conducted at her other facilities last week. The Facility Owner had previously stated that she was in compliance because they were not required to do background checks on independent contracted personnel	P 015	Amanda Kobledo - manager 5-14-24	