



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Mailing Date: October 25, 2019

Mr. Daniel Guill
Authorized Representative
McCullough AID OPCO, LLC
McCullough PLace
500 Cheney Oak Drive
Johnstown, Pennsylvania 15905

RE: McCullough Place
License #: 330640

Dear Mr. Guill:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Office of Long-term Living) review on October 1, 2019 of the above facility, we have determined that your submitted plan of correction is:

Fully implemented and in compliance. Continued compliance must be maintained.

If you need assistance, please contact me at 717-418-9656 or email: bswanger@pa.gov.

Sincerely,

A handwritten signature in black ink that reads "Brett Swanger".

Brett Swanger
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: MCCULLOUGH PLACE

License Number: 33064

Address: 500 CHENEY OAK DRIVE,, JOHNSTOWN, PA 15905

County: CAMBRIA

Region: CENTRAL

Administrator

Name: Stacy Murphy

Phone: 8142552213

Email:

Legal Entity

Name: MCCULLOUGH AID OPCO LLC

Address: 500 CHENEY OAK DRIVE, JOHNSTOWN, PA, 15905

Certificate(s) of Occupancy

Type: C-2 LP

Date: 03/26/1998

Issued By: Labor & Industry

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 61

Waking Staff: 46

Inspection

Type: Full

BHA Docket #:

Notice: Unannounced

Reason: Renewal

Inspection Dates and Department Representative

10/01/2019 - On-Site: Jason McCloskey, Michael Showers

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 55

Residents Served: 41

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 3

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 41

Diagnosed with Mental Illness: 1

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 20

Have Physical Disability: 0

109b - Rabies Vaccination

Regulations

2600.

109.b. Cats and dogs present at the home shall have a current rabies vaccination. A current certificate of rabies vaccination from a licensed veterinarian shall be kept.

Description of Violation

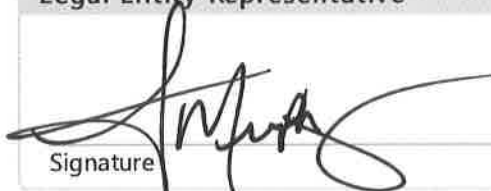
On 10/1/19, a dog belonging to Resident 1 was present in the home. The most recent rabies vaccination for this animal expired on 8/21/19.

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.)

See attached Page 3A

Legal Entity Representative



Signature

Stacy Murphy Executive Director 10/8

Printed Name and Title

Date

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The above plan of correction is approved as of 10/9/2019 Plan of correction implementation status as of 10/25/2019
(Date) (Date)

Implemented

The above plan of correction was approved by BAS
(Initials)

Not Implemented

183d - Prescription Current

Regulations

2600.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

Description of Violation

A partially used box of Ipratropium Bromide 0.5mg solution belonging to Resident 2 was present in the home's PM medication cart. This medication was marked with an expiration date of June 2019.

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.)

See attached Page 3A

Legal Entity Representative


Signature

Stacy Murphy Executive Director 10/8/19
Printed Name and Title Date

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The above plan of correction is approved as of 10/9/2019 Plan of correction implementation status as of _____
(Date) (Date)

Implemented

The above plan of correction was approved by BAS
(Initials)

Not Implemented

Plan of correction for McCullough Place licensing inspection October 1, 2019

109b 1. The family was notified on September 30, 2019 that the rabies vaccination for the dog had expired and the dog was picked up from the facility. Vaccination to be updated Thursday October 3, 2019. (Attachment 1)

~~2. Audit was completed on current pets for up to date vaccinations. (Attachment 2)~~

3. Executive Director and Designee were trained on regulation 109b. (Attachment 3)

4. A tickler system will be created and reviewed monthly by the Executive Director or designee. Continued auditing will be based on sustained compliance for 3 months and monitoring will be on going. *Documentation of the audits will be retained by the home for Department review.

BAS 10/9/19

183d 1.Expired Ipratropium Bromide 0.5 mg solution was removed from the cart and destroyed by the Care Service Manager on October 1, 2019.

2. Med cart was audited on October 1, 2019 by Care Service Manager and Licensed Nurse to assure that no expired medications were left in the cart. (Attachment 4)

3. Executive Director, Care Service Manager and Licensed Nurse were educated on regulation 183d. (Attachment 3)

4. Licensed Nurse and Medication Administrators will be educated on regulation 183d by October 11, 2019. *Documentation of the education will be submitted to the Department for review.

BAS 10/9/19

5. Licensed Nurse will mark all PRN medications with a large label including the expiration date.

6. Care Service Manager will perform cart audits for 4 weeks then monthly for 2 months to ensure only current prescriptions, OTC, sample and CAM for individuals living in the home were kept in the med cart. Results of the audit will be reviewed in monthly QI. Continued auditing will be based on sustained compliance for three months. Monitoring will be ongoing.

*Documentation of the audits will be submitted to the Department for review.

BAS 10/9/19