

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

April 8, 2025

[REDACTED]  
THE GATHERING PLACE PERSONAL CARE LLC  
[REDACTED]

RE: THE GATHERING PLACE PERSONAL  
CARE  
390 MOUNTAIN ROAD  
UNIONTOWN, PA, 15401  
LICENSE/COC#: 45417

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 03/05/2025 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: THE GATHERING PLACE PERSONAL CARE License #: 45417 License Expiration: 03/03/2025
Address: 390 MOUNTAIN ROAD, UNIONTOWN, PA 15401
County: FAYETTE Region: WESTERN

Administrator

Name: [Redacted] Phone: [Redacted] Email: [Redacted]

Legal Entity

Name: THE GATHERING PLACE PERSONAL CARE LLC
Address: [Redacted]
Phone: [Redacted] Email: [Redacted]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: Total Daily Staff: 18 Waking Staff: 14

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Provisional, Monitoring Exit Conference Date: 03/05/2025

Inspection Dates and Department Representative

03/05/2025 - On-Site: [Redacted]

Resident Demographic Data as of Inspection Dates

General Information
License Capacity: 16 Residents Served: 15
Secured Dementia Care Unit
In Home: No Area: Capacity: Residents Served:
Hospice
Current Residents: 5
Number of Residents Who:
Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 15
Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 3 Have Physical Disability: 1

Inspections / Reviews

03/05/2025 Partial
Lead Inspector: [Redacted] Follow-Up Type: POC Submission Follow-Up Date: 03/20/2025

03/21/2025 - POC Submission
Submitted By: [Redacted] Date Submitted: 04/08/2025
Reviewer: [Redacted] Follow-Up Type: POC Submission Follow-Up Date: 03/27/2025

Inspections / Reviews (*continued*)

## 03/26/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 04/08/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 04/07/2025

## 04/08/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 04/08/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

183b - Meds and Syringes Locked

1. Requirements

2600.

183.b. Prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked. This includes medications and syringes kept in the resident's room.

Description of Violation

At [REDACTED] the locking system on the medication cart was loose. An agent of the Department was able to open the top drawer of the medication cart with the locking system in place and pull out a bottle of [REDACTED].

Plan of Correction

Directed [REDACTED] - 03/26/2025)

On [REDACTED], during an unannounced inspection, it was discovered that the locking system on the treatment cart was not effective. The agent was able to pull the top drawer open to access treatment medications. It appeared that one of the screws that held the chain in place had come out. On the day of the inspection, [REDACTED] the treatment cart was taken out of the facility by the owner. Because there are no residents on any type of treatment orders, there was nothing needed at the time. There were no residents in the facility in need of wound care or fungal powders. All open powders and creams were discarded immediately. The wound supplies were put in the locked supply closet. If treatment supplies are needed in the future for a resident, their supplies will be properly stored in supply closet where it will be locked at all times. This will place us in compliance of PA Code 2600.183b.

DIRECTED: By 4/7/25: All staff persons qualified to administer medications shall be re-educated by the administrator that all prescription medications, OTC medications, CAM and syringes shall be kept in an area or container that is locked, which includes medications and syringes kept in the resident's room. Documentation of the staff education shall be kept in accordance with 2600.65i. [REDACTED] 3/26/25

DIRECTED: Beginning on 3/28/25: The administrator shall inspect the home and all medication storage areas daily for 1 week then weekly thereafter to ensure compliance with 2600.183b. [REDACTED] 3/26/25

Proposed Overall Completion Date: 03/24/2025

Directed Completion Date: 04/07/2025

Implemented ([REDACTED] - 04/08/2025)

183d - Prescription Current

2. Requirements

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

At approximately [REDACTED], resident [REDACTED] [REDACTED] tablets were present in the home; however, this medication was discontinued on [REDACTED].

Plan of Correction

Directed [REDACTED] - 03/26/2025)

During an unannounced inspection visit on [REDACTED], it was discovered during a medication check that medication was still in the drawer that had been discontinued a couple of days prior. The medication was disposed of immediately

**183d Prescription Current (continued)**

by the Administrator. In order to be compliant with PA Code 1600.183d, to prevent this from happening in the future, a weekly medication audit will be performed by the Administrator and their designated employee. This audit was started on 3/8/25. (DIRECTED: Each weekly audit shall include a review of all current residents' medications to ensure only current prescription, OTC, sample and CAM for individuals living in the home are present in the home. [REDACTED] 3/26/25). This will ensure that any added/discontinued medications are added or disposed of properly. A log sheet will be kept and initialed off on by the persons doing the audit and will be available to agents upon request. In addition to the weekly audit that began on 3/8/25, all employees will be re educated on 3/24/25 by [REDACTED] LPN, owner, on how to properly dispose of medications that have been discontinued or expired. All employees will acknowledge this training by signing the DHS training form. This documentation will be kept in accordance with PA Code 2600.65i.

Proposed Overall Completion Date: 03/24/2025

Directed Completion Date: 03/26/2025

Implemented [REDACTED] - 04/08/2025)

**183e - Storing Medications****3. Requirements**

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

**Description of Violation**

A 60 gram bottle of [REDACTED], which contained no pharmacy label, expired in January, 2025; however, was still present in the home's medication cart.

REPEAT VIOLATION: [REDACTED]

**Plan of Correction**

Directed [REDACTED] - 03/26/2025)

During an unannounced inspection visit on [REDACTED], it was discovered during a medication check that medication was still in the drawer that had been discontinued a couple of days prior. The medication was disposed of immediately by the Administrator. In order to be compliant with PA Code 1600.183d, to prevent this from happening in the future, a weekly medication audit will be performed by the Administrator and their designated employee. This audit was started on 3/8/25. This audit included all areas of the facility that contained any type of medication for any residents. These areas will also be part of the weekly audit that will be performed. This will ensure that any added/discontinued medications are added or disposed of properly. (DIRECTED: The weekly audits shall also include ensuring no expired medications are present in the home in accordance with 2600.183e. [REDACTED] 3/26/25). A log sheet will be kept and initialed off on by the persons doing the audit and will be available to agents upon request. In addition to the weekly audit that began on 3/8/25, all employees will be re educated on 3/24/25 by [REDACTED] LPN, owner, on how to properly dispose of medications that have been discontinued or expired. All employees will acknowledge this training by signing the DHS training form. This documentation will be kept in accordance with PA Code 2600.65i.

Proposed Overall Completion Date: 03/24/2025

Directed Completion Date: 03/26/2025

## 183e - Storing Medications (continued)

Implemented [REDACTED] - 04/08/2025)

## 184a - Resident's Meds Labeled

## 4. Requirements

2600.

184.a. The original container for prescription medications shall be labeled with a pharmacy label that includes the following:

1. The resident's name.
2. The name of the medication.
3. The date the prescription was issued.
4. The prescribed dosage and instructions for administration.
5. The name and title of the prescriber.

## Description of Violation

At [REDACTED], there was a 60 gram bottle of [REDACTED] present in the home's medication cart which contained no pharmacy label.

REPEAT VIOLATION: [REDACTED]

## Plan of Correction

Directed [REDACTED] - 03/26/2025)

On [REDACTED] during an unannounced inspection, it was discovered that the locking system on the treatment cart was not effective. The agent was able to pull the top drawer open to access treatment medications. It appeared that one of the screws that held the chain in place had come out. On the day of the inspection, [REDACTED], the treatment cart was taken out of the facility by the owner. Because there are no residents on any type of treatment orders, there was nothing needed at the time. All open powders and creams were discarded immediately when the cart was removed from the personal care home. The wound supplies were put in the locked supply closet. If treatment supplies are needed in the future for a resident, their supplies will be properly stored in supply closet where it will be locked at all times. In order to be compliant with PA Code 1600.183d, to prevent this from happening in the future, a weekly medication audit will be performed by the Administrator and their designated employee. This audit was started on 3/8/25. This audit included all areas of the facility that contained any type of medication for any residents. (DIRECTED: All resident medications shall be reviewed during each weekly audit to ensure each medication has an accurate and complete pharmacy label present in accordance with 2600.184a. [REDACTED] 3/26/25). These areas will also be part of the weekly audit that will be performed. This will ensure that any added/discontinued medications are added or disposed of properly. A log sheet will be kept and initialed off on by the persons doing the audit and will be available to agents upon request. In addition to the weekly audit that began on 3/8/25, all employees will be re-educated on 3/24/25 by [REDACTED] LPN, owner, on how to properly dispose of medications that have been discontinued or expired. All employees will acknowledge this training by signing the DHS training form. This documentation will be kept in accordance with PA Code 2600.65i.

DIRECTED: By 4/7/25: All staff persons qualified to administer medications shall be re-educated by the administrator that all resident medications must contain an accurate and complete pharmacy label in accordance with 2600.184a. Documentation of the staff education shall be kept in accordance with 2600.65i. [REDACTED] 3/26/25

Proposed Overall Completion Date: 03/24/2025

Directed Completion Date: 04/07/2025

Implemented [REDACTED] - 04/08/2025)

184a - Resident's Meds Labeled (*continued*)

## 185a - Implement Storage Procedures

**5. Requirements**

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

**Description of Violation**

Resident [REDACTED] is prescribed [REDACTED] tablet-Take 1 tablet by mouth twice a day. According to resident [REDACTED] March 2025 medication administration record (MAR), this medication was administered twice daily to resident [REDACTED] at 8:00pm on [REDACTED] through 8:00am on [REDACTED] however, the most recent medication administration documentation present on the controlled drug record for resident [REDACTED] [REDACTED] is at 8:00am on [REDACTED].

REPEAT VIOLATION: 6/29/2023

**Plan of Correction**

**Directed [REDACTED] - 03/26/2025)**

On [REDACTED] during an unannounced inspection, it was discovered the controlled drug sheet was not current with doses that had been given. The number of medications remaining was correct with the dosing times but were not signed off on by the med techs. In order to be compliant of PA Code 2600.185a, a weekly medication audit will be performed by the Administrator and their designated employee. This audit was started on [REDACTED]. This audit included all areas of the facility that contained any type of medication for any residents, including treatment creams and powders and controlled substances. (DIRECTED: The weekly audits shall also include a review of the MAR's and controlled drug records for all residents prescribed a controlled substance to ensure accurate and complete documentation is present [REDACTED] 3/26/25). This will ensure that any added/discontinued medications are added or disposed of properly. A log sheet will be kept and initialed off on by the persons doing the audit, which was started on 3/8/25, and will be available to agents upon request. In addition to the weekly audit that began on 3/8/25, all employees will be re-educated on 3/24/25 by [REDACTED] LPN, owner, on how to properly document the disbursement of medications, including narcotics to ensure accuracy. All med techs will acknowledge this training by signing the DHS training form. A log sheet will be kept and initialed off on by the persons doing the weekly audit and will be available to agents upon request. This documentation will be kept in accordance with PA Code 2600.65i.

Proposed Overall Completion Date: 03/24/2025

Directed Completion Date: 03/26/2025

**Implemented [REDACTED] - 04/08/2025)**