



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

NOV 07 2016

Ms. Heather Gelles, Executive Director  
I&A Residential Services, Inc.  
1019 Philadelphia Street, Suite 2  
Indiana, Pennsylvania 15701

RE: I&A Residential Services Building C  
286 Hood School Road  
Indiana, Pennsylvania 15701  
License #: 427270

Dear Ms. Gelles:

As a result of the Department of Human Services' annual licensing inspection on August 9, 2016 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

Sincerely,

A handwritten signature in black ink, appearing to read 'J. Rowe'.

Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary



RECEIVED

SEP 23 2016

Violation Report: 42727 - 08/09/2016 - McConnell, Deb  
PCH Name: I & A RESIDENTIAL SERVICES BUILDING C

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa. Code §2600

2600.42(q) - A resident shall be compensated in accordance with State and Federal labor laws for labor performed on behalf of the home.

2a. DESCRIPTION OF VIOLATION

Residents including resident #1 and resident #2 required to clean their own rooms and the common bathroom in the hallway every Saturday. There residents are not compensated in accordance with State and Federal labor laws for this work performed on behalf of the home.

3. 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.

On August 16, 17, and 18, 2016, all direct-line staff received an in-person training by Administrator [redacted]. The topics covered included a re-training on regulation 2600.42(q). All staff were given explicit instructions to immediately stop permitting residents to complete chores of any type. Specific examples were given of what qualifies as a chore, including those listed in this violation.

Administrator [redacted] will continue to educate staff about this regulation during weekly staff meetings and will randomly check with residents to ensure that they are not doing any chores.

Immediately: The administrator shall interview at least one different resident on a weekly basis for three months to ensure no residents are performing labor on behalf of the home. 9-29-16

Repeat Violation: No      Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page) HEATHER GELLES, EXECUTIVE DIRECTOR

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) HEATHER GELLES, EXECUTIVE DIRECTOR      Date 9/23/2016

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of 9-29-16 (Date)

The above plan of correction was approved by [initials] (Initials)

Plan of correction implementation status as of 9-29-16 (Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 42727 - 08/09/2016 - McConnell, Deb  
PCH Name: I & A RESIDENTIAL SERVICES BUILDING C

1. REGULATION 55 Pa.Code §2600

2600.65(f) - Training topics for the annual training for direct care staff persons shall include the following:

- (1) Medication self-administration training.
- (2) Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.
- (3) Care for residents with dementia and cognitive impairments.
- (4) Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers; incontinence, malnutrition and dehydration.
- (5) Personal care service needs of the resident.
- (6) Safe management techniques.
- (7) Care for residents with mental illness or mental retardation, or both, if the population is served in the home.

2a. DESCRIPTION OF VIOLATION

Direct care staff persons A, B and C did not receive training in instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan and personal care service needs of the resident during the 2015 training year.

3. 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.*

On August 16, 17, and 18, 2016, all direct-line staff received an in-person training by Administrator [REDACTED]. This training was announced to our staff on July 18, 2016 and documentation of the upcoming training was provided to the inspector on 8/9/16. All topics included in this violation were covered. Please see the attached attendance record. This training is now a mandatory annual training every August. Administrator [REDACTED] will ensure that all staff attend and are trained in every subsection of regulation 2600.65(f) annually. The August mandatory training has been added to the agency's Year Staff Training Schedule.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
(Required on EVERY Page) *Heather Gelles, Ex. Director*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) **HEATHER GELLES, EXECUTIVE DIRECTOR** Date *9/23/2016*

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The above plan of correction is approved as of <u>9-29-16</u> (Date)	Plan of correction implementation status as of <u>9-29-16</u> (Date)
The above plan of correction was approved by <u>[Signature]</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress ✓ <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 42727 - 08/09/2016 - McConnell, Deb  
PCH Name: I & A RESIDENTIAL SERVICES BUILDING C

WEST REGION FIELD OFFICE  
Human Services Licensing

1. REGULATION 55 Pa.Code §2600

2600.103(f) - Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

2a. DESCRIPTION OF VIOLATION

The temperature of the upright freezer in the basement measured 8 degrees Fahrenheit.

3. 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.

Maintenance person [redacted] removed the thermometer from inside this upright freezer on 8/10/16. It was found to be malfunctioning. [redacted] purchased and installed a new thermometer, which shows a reading of 0 degrees for this freezer. Maintenance will continue to monitor refrigerator and freezer temperatures during quarterly regularly scheduled facility inspections.

Immediately: The administrator or designee shall check all refrigerators and freezers at least weekly to ensure all refrigerators and freezers have thermometers and food requiring refrigeration is stored at or below 40 degrees Fahrenheit and frozen food is stored at or below 0 degrees Fahrenheit. 9-29-16

Within 30 days of receipt of the plan of correction: All staff persons involved in food storage and preparation will be re-educated on safe food storage including all refrigerators and freezers have thermometers and food requiring refrigeration is stored at or below 40 degrees Fahrenheit and frozen food is stored at or below 0 degrees Fahrenheit. Documentation of education shall be kept. 9-29-16

Repeat Violation: No      Date(s) of Previous Violation(s):

Signature of Legal Entity Representative (Required on EVERY Page) *Heather Gelles, EXECUTIVE DIRECTOR*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *HEATHER GELLES, EXECUTIVE DIRECTOR*      Date *9/23/2016*

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