



pennsylvania
DEPARTMENT OF HUMAN SERVICES

SENT VIA EMAIL: indianasquarepch@gmail.com
wamalone123@yahoo.com

MAILING DATE: March 23, 2020

Mr. William Malone
Treasurer
Premier Quality Enterprises, Inc.
1703 Warren Road
Indiana, Pennsylvania 15701

RE: Indiana Square Personal Care Home
License #: 447440

Dear Mr. Malone:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on December 4, 2019, of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

A handwritten signature in black ink that reads "Suzy Quinn".

Suzy Quinn
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

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MAR 07 2020

Violation Report

WEST REGION FIELD OFFICE
Human Services Licensing

Facility Information	
Name: INDIANA SQUARE PERSONAL CARE HOME	License Number: 44744
Address: 1703 WARREN ROAD,, INDIANA, PA 15701	
County: INDIANA	Region: WESTERN

Administrator		
Name: Sherri Reno	Phone: 7244712140	Email: indianasquarepch@gmail.com

Legal Entity	
Name: PREMIER QUALITY ENTERPRISE INC	
Address: 1703 WARREN ROAD, INDIANA, PA, 15701	

Certificate(s) of Occupancy		
Type: C-2 LP	Date:	Issued By:

Staffing Hours		
Resident Support Staff: 0	Total Daily Staff: 46	Waking Staff: 35

Inspection		
Type: Partial	BHA Docket #:	Notice: Unannounced
Reason: Complaint, Incident		

Inspection Dates and Department Representative	
12/04/2019 - On-Site: Joe Eves, Tom Smith	

Resident Demographic Data as of Inspection Dates

General Information			
License Capacity: 50	Residents Served: 32		
Secured Dementia Care Unit			
In Home: Yes	Area: Ground Floor	Capacity: 16	Residents Served: 8
Hospice			
Current Residents: 6			
Number of Residents Who:			
Receive Supplemental Security Income: 2	Are 60 Years of Age or Older: 32		
Diagnosed with Mental Illness: 12	Diagnosed with Intellectual Disability: 0		
Have Mobility Need: 14	Have Physical Disability: 0		

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INDIANA SQUARE PERSONAL CARE HOME

44744

Title

Regulation

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Incident

On 11/9/19 at approximately 9:45 AM, resident #1 eloped from the home's ground floor secure dementia care unit (SDCU) and was missing until approximately 10:17 AM, when he was returned to the home by members of the community. The home failed to report this incident to the Department until 11/15/19.

Plan of Correction (POC)

2600.16c

11/14/2019 All staff were immediately educated on the importance of immediately reporting of incidents to the Administrator or Designated person. Immediately, then at least weekly, the administrator or designated person shall review all reportable incidents and conditions to ensure all reportable incidents and conditions are reported to the Department in accordance with regulation 2600.16c.

Legal Representative

[Handwritten Signature]
Signature

Sherrileno Administrator 3/7/2020
Printed Name and Title Date

DEPARTMENT

The above plan of correction is approved as of 3/13/20 (Date) Plan of correction implementation status as of 3/13/20 (Date)

The above plan of correction was approved by SE (Initials) Implemented Not Implemented

INDIANA SQUARE PERSONAL CARE HOME

MAR 07 2020

44744



Regulations

2600.233.d. Doors that open onto areas such as parking lots, or other potentially unsafe areas, shall be locked by an electronic or magnetic system.

Description

On 11/9/19 at approximately 9:45 AM, resident #1 eloped from the home's ground floor SDCU and was missing until approximately 10:17 AM. He exited the SDCU via door #4, which leads to the rear stairwell and exits to the rear of the building by the designated smoking area. Multiple staff interviews indicate the magnetic lock on this door was known to be inoperable and was not locking prior to the incident.

Plan of Correction

2600.233d: Immediately on 11/15/2019 all doors were checked by Rampart Security systems. The maglock on door #4 was repaired. On 11/18/2019 maintenance/housekeeping began daily checks on all doors in the secured dementia care unit and documentation is kept. On 11/14/2019 staff were educated to report any malfunctioning locks immediately to their supervisor.

Approval

Sherril Reno
Signature

Sherril Reno Administrator 3/7/2020
Printed Name and Title Date

Implementation

The above plan of correction is approved as of 3/13/20 (Date) Plan of correction implementation status as of 3/13/20 (Date)
The above plan of correction was approved by *SR* (Initials) Implemented Not Implemented