

Department of Human Services
Bureau of Human Service Licensing

October 21, 2021

[REDACTED], EXECUTIVE DIRECTOR
[REDACTED]
[REDACTED]
[REDACTED]

RE: I & A RESIDENTIAL SERVICES,
BUILDING A
111 EAST PIKE
INDIANA, PA, 15701
LICENSE/COCC#: 42723

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/13/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
[REDACTED]

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: *I & A RESIDENTIAL SERVICES, BUILDING A* License #: *42723* License Expiration Date: *02/26/2022*
Address: *111 EAST PIKE, INDIANA, PA 15701*
County: *INDIANA* Region: *WESTERN*

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

[REDACTED]

Certificate(s) of Occupancy

Type: *Other* Date: *07/21/1995* Issued By: *L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *2* Waking Staff: *2*

Inspection

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *09/13/2021*

Inspection Dates and Department Representative

09/13/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *5* Residents Served: *2*

Secured Dementia Care Unit

In Home: *No* Area: Capacity: Residents Served:

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *2* Are 60 Years of Age or Older: *1*
Diagnosed with Mental Illness: *2* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

09/13/2021 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *10/17/2021*

Inspections / Reviews *(continued)*

10/18/2021 - POC Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *10/20/2021*

10/19/2021 - POC Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *10/22/2021*

10/21/2021 - Document Submission

Lead Reviewer: [REDACTED] Follow-Up Type: *Not Required*

18 - Compliance With Laws

1. Requirements

2600.

18. Applicable Health and Safety Laws - A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

The Care Facility Carbon Monoxide Alarms Standards Act, enacted 6/23/16, requires carbon monoxide alarms to be installed in close proximity of, but not less than 15 feet from, any fossil-fuel burning device or appliance. The home has a carbon monoxide alarm approximately 9 feet from the gas stove in the kitchen.

Plan of Correction

Accept

Maintenance staff moved the carbon monoxide alarm 16 feet from the gas stove in the kitchen on 10/8/21. It is installed in the living room area of the home. Residential Program Directors will monitor the location weekly during a walk through of the home.

Completion Date: 10/08/2021

Document Submission

Implemented

No documentation to submit.

93a - Handrails

1. Requirements

2600.

- 93.a. Each ramp, interior stairway and outside steps must have a well-secured handrail.

Description of Violation

The handrail on the right side of the second flight of stairs leading to the second floor is loose and the mounting screws are coming out of the wall, posing a fall hazard

Plan of Correction

Accept

Maintenance staff fixed the hand rail on 9/13/21. Longer screws were installed to secure the rail and the wall was patched and then painted. A temporary sign was hung on 9/13/21 when the dry wall was wet instructing staff and residents not to use the rail. That sign has since been removed.

Staff and residents were reminded on 9/13/21 to alert Maintenance at the time any damage occurs so that repairs can be made in a timely manner to ensure everyone's safety.

Established practice already includes that agency management staff and maintenance staff complete a facility checklist quarterly when all aspects of the unit are checked for safety, wear and tear, damage, and potential problems. This practice will continue.

Completion Date: 09/13/2021

Document Submission

Implemented

Please see documentation submitted on 10/15/21.

103f - Refrigerator/Freezer Temps

1. Requirements

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.

Description of Violation

On 9/13/21 at 10:18 a.m., the temperature in the kitchen refrigerator was 53 degrees Fahrenheit and at 11:32 a.m., it was 41 degrees Fahrenheit.

Plan of Correction**Accept**

The agency secured County approval to replace the kitchen refrigerator on October 6, 2021. The new refrigerator was purchased on 10/7/21 and delivered and installed by Lowes on 10/8/21.

The refrigerator temperatures on the new refrigerator will be monitored by Residential Program Workers on each shift weekly beginning 10/8/21.

Completion Date: 10/08/2021

Document Submission**Implemented**

Please see documentation submitted on 10/15/21 and 10/18/2021.

185a - Implement Storage Procedures

1. 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 #1's glucometer was not calibrated to correct time. On 9/9/21 at 1:16 p.m., resident #1's glucometer read 12:08 a.m.

Plan of Correction**Accept**

The glucometer's time was correctly calibrated on 9/13/21 while licensing staff was present. Residential Program Workers to monitor the glucometer at each daily use to ensure it is operating properly according to the Manufacturer's specifications. Residential Program Workers will record the blood sugar readings along with the date and time at each reading.

Completion Date: 09/13/2021

Document Submission**Implemented**

No documentation to submit.