

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

December 21, 2022

[REDACTED]  
I & A RESIDENTIAL SERVICES INC  
[REDACTED]  
[REDACTED]

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

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 11/08/2022 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: I &amp; A RESIDENTIAL SERVICES, BUILDING A

License #: 42723

License Expiration: 02/26/2023

Address: 111 EAST PIKE, INDIANA, PA 15701

County: INDIANA

Region: WESTERN

## Administrator

Name: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

## Legal Entity

Name: I &amp; A RESIDENTIAL SERVICES INC

Address: [REDACTED]

Phone: [REDACTED] Email: [REDACTED]

## Certificate(s) of Occupancy

Type: Other

Date: 07/21/1994

Issued By: L&amp;I

## Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 3

Waking Staff: 2

## Inspection Information

Type: Full

Notice: Unannounced

BHA Docket #:

Reason: Renewal

Exit Conference Date: 11/08/2022

## Inspection Dates and Department Representative

11/08/2022 - On-Site: [REDACTED]

## Resident Demographic Data as of Inspection Dates

## General Information

License Capacity: 5

Resident Served: 3

## Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Resident Served:

## Hospice

Current Resident : 0

## Number of Residents Who:

Receive Supplemental Security Income: 2

Are 60 Years of Age or Older: 1

Diagnosed with Mental Illness: 3

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 0

Have Physical Disability: 0

## Inspections / Reviews

11/08/2022 Full

Lead Inspector: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 12/09/2022

Inspections / Reviews *(continued)*

12/20/2022 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 12/20/2022

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 12/27/2022

12/21/2022 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/20/2022

Reviewer: [REDACTED]

Follow-Up Type: Not Required

## 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

*At 9:45a.m., the temperature in the top freezer of the refrigerator/freezer in the kitchen was 6 degrees Fahrenheit.*

*Repeat Violation: 9/13/21*

## Plan of Correction

Accept (JW - 12/20/2022)

*This temperature was turned down on site in the presence of [REDACTED]. When checked later during the licensing inspection, it was -4 degrees. The refrigerator/freezer in question was purchased 10/7/21 (see attached receipt) in response to the last violation on 9/13/21. A temperature control knob cover kit was purchased for this refrigerator/freezer on 11/30/22, see attached. The temperature control knob cover installed by Maintenance staff in conjunction with third shift Residential Program Workers checking the temperature daily has been implemented. Third shift is to ensure the temperature is at the lowest setting daily when they check the temperature. See attached daily chore list for third shift Residential Program Workers. This ongoing procedure has been implemented and will continue indefinitely to address this ongoing problem.*

**Licensee's Proposed Overall Completion Date: 12/08/2022**

Implemented ([REDACTED] - 12/21/2022)

## 185a - Implement Storage Procedures

## 2. 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 #2's [REDACTED] was not labeled with the resident's name.*

*Repeat Violation: 9/13/22*

## Plan of Correction

Accept ([REDACTED] - 12/20/2022)

*Resident #2's [REDACTED] was labeled with the resident's name on site at the time of inspection. Staff education conducted by [REDACTED] Administrator, took place at the regularly scheduled staff meeting on 11/17/22 regarding properly labeling each resident's [REDACTED] case. See attached. Ensuring each [REDACTED] case is labeled with the resident's name was added to our existing Monthly Medication Audit sheets that are completed by Residential Program Workers on 11/17/22, see attached. This topic was also added to our already established Semi Annual Medication Refresher Training conducted by [REDACTED], Administrator, that occurs every February. The attached notes for that training are a working document that is revised as necessary up until the training occurs. This topic was also added to our established Semi Annual Medication Refresher Training conducted by [REDACTED] Administrator, that occurs every August. The working agenda is attached. Again, this is a working document revised as needed up until the training occurs. The Semi Annual Medication Refresher mandatory trainings are attended by all staff who work in the home.*

**Licensee's Proposed Overall Completion Date: 12/08/2022**

Implemented ([REDACTED] - 12/21/2022)

185a - Implement Storage Procedures (continued)

187a - Medication Record

3. Requirements

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

12. Diagnosis or purpose for the medication, including pro re nata (PRN).

Description of Violation

Resident #2 is prescribed [REDACTED]. However, resident's November 2022 medication administration record does not indicate the diagnosis or purpose.

In addition, resident #2 has [REDACTED]. However, resident's November 2022 medication administration record does not indicate the diagnosis or purpose.

Plan of Correction

Accept [REDACTED] - 12/20/2022)

These concerns were addressed on site at the time of inspection. Education regarding regulation 2600.187.a was provided to staff on 11/17/22 by [REDACTED], Administrator, in the form of a new idea entitled "Medication Tip of the Day." Please see the attached indicating what was taught, by whom and to whom on this day. In addition, ensuring each medication has a diagnosis/purpose listed under the name of the medication entry on each MAR was added to our existing Monthly Medication Audit sheets on 11/17/22, see attached. These are completed monthly by Residential Program Workers. This topic was also added to our already established Semi Annual Medication Refresher Training conducted by [REDACTED], Administrator, that occurs every February. The attached notes for that training are a working document that is revised as necessary up until the training occurs. This topic was also added to our established Semi Annual Medication Refresher Training conducted by [REDACTED], Administrator, that occurs every August. The working agenda is attached. Again, this is a working document revised as needed up until the training occurs. The Semi Annual Medication Refresher mandatory trainings are attended by all staff who work in the home.

Licensee's Proposed Overall Completion Date: 12/08/2022

Implemented [REDACTED] - 12/21/2022)