



MAILING DATE: April 1, 2019

Mr. Dave McKenzie
Program Director
Mentor ABI, LLC
6816 West Lake Road, Bldg. 3&4
Fairview, Pennsylvania 16415

RE: Neurorestorative Pennsylvania
4155 Roxbury Road
Erie, Pennsylvania 16506
Certificate #: 446960

Dear Mr. McKenzie:

As a result of the Department's Bureau of Human Services Licensing inspection on December 6, 2018, of the above facility, the citations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations specified on the enclosed violation report must be corrected by the dates specified on the violation report and continued compliance with 55 Pa. Code Ch. 2600 must be maintained.

Sincerely,

A handwritten signature in black ink, appearing to read "Jason Williams", written in a cursive style.

Jason Williams
Human Services Licensing Supervisor

Enclosure
Violation Report

Violation Report: 44696 - 12/06/2018 - Gillette, Lori
PCH Name: NEURORESTORATIVE PENNSYLVANIA

1. REGULATION 55 Pa.Code §2600

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 section 2600.15 (relating to abuse reporting covered by law).

2a. DESCRIPTION OF VIOLATION

On 11/16/18 at approximately 3:30pm, resident #1 became physically and verbally aggressive with staff person A while at an offsite location. Staff person A was asked several times by staff person B to just leave and take other residents home in the van, however staff person A continued to argue with Resident #1 by making statements such as: 'You will have to find your own ride home' and 'I'll be working at the house tonight and there is nothing you can do about it'. As a result, resident #1 remained agitated until staff person A left the offside location. The home did not report this incident to the Department until 11/19/18.

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.

The program was aware the incident occurred on Friday 11/16/18 at 3:30. At that time we did not have all the details and waited until Monday 11/19/18 to report the incident.

We reviewed our process for completing and reporting incidents to DHS with the program's Administrative and on-call staff. We reviewed the expectation that incidents are to be reported within 24 hours, even if we do not have all the information at the time the report is filed.

This information will be reviewed at program staff meetings and Annual Day Trainings in 2019.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Dave Mackenzie*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Dave Mackenzie - Program Director* Date *2/26/19*

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

The above plan of correction is approved as of <u>3/28/19</u> (Date)	Plan of correction implementation status as of <u>3/28/19</u> (Date)
The above plan of correction was approved by <u><i>JW</i></u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <i>JW</i> <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 44696 - 12/06/2018 - Gillette, Lori
PCH Name: NEURORESTORATIVE PENNSYLVANIA

1. REGULATION 55 Pa.Code §2600
 2600.42(c) - A resident shall be treated with dignity and respect.

2a. DESCRIPTION OF VIOLATION

On 11/16/18 at approximately 3:30pm, resident #1 became physically and verbally aggressive with staff person A while at an offsite location. Staff person A was asked several times by staff person B to just leave and take other residents home in the van, however staff person A continued to argue with Resident #1 by making statements such as: 'You will have to find your own ride home' and 'I'll be working at the house tonight and there is nothing you can do about it'. As a result, resident #1 remained agitated until staff person A left the offside location.

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.

Staff Person A was terminated from the program following an internal investigation.

The program plans to incorporate added Respect and Dignity training. We are expanding the scope of Clinical Training offered at new employee orientation to focus on maintaining therapeutic interactions with residents. Attached is a Respect and Dignity training article that will be reviewed and discussed with all Staff as part of Annual Day Trainings in 2019.

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative
 (Required on EVERY Page) *Dave Mackenzie*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) *Dave Mackenzie - Program Director* Date *2/26/19*

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