pennsylvania
DEPARTMENT OF HUMAN SERVICES

MAILING DATE: November 5, 2019

Mr. Dave MacKenzie
Program Director
Mentor ABI, LLC
6816 West Lake Road
Fairview, Pennsylvania 16415

RE: NeuroRestorative Pennsylvania
1331 Dutch Road
Farview, Pennsylvania 16415
License / COC #: 448180

Dear Mr. MacKenzie:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on October 8, 2019, of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

Jon B Kimberland

Jon Kimberland
Human Services Licensing Supervisor

Enclosure
<Licensing Inspection Summary>

Received BHSL
10/25/19

Violation Report

Facility Information

Name: *NEURORESTORATIVE PENNSYLVANIA* License Number: *44818*
Address: *1331 DUTCH ROAD,, FAIRVIEW, PA 16415*
County: *ERIE* Region: *WESTERN*

Administrator

Name: *Tiffany Fellows* Phone: *8144741977* Email: *DAVID.MACKENZIE@NEURORESTORATIVE.COM*

Legal Entity

Name: *MENTOR ABI LLC*
Address: *6816 WEST LAKE ROAD, FAIRVIEW, PA, 16415*

Certificate(s) of Occupancy

Type: *R-3* Date: *10/24/2016* Issued By: *Fairview Township*

Staffing Hours

Resident Support Staff: Total Daily Staff: *6* Waking Staff: *5*

Inspection

Type: *Full* BHA Docket #: Notice: *Unannounced*
Reason: *Renewal*

Inspection Dates and Department Representative

10/08/2019 - On-Site: Vicki Siegert

Resident Demographic Data as of Inspection Dates

General Information

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

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *5*
Diagnosed with Mental Illness: *3*
Have Mobility Need: *1*
Are 60 Years of Age or Older: *1*
Diagnosed with Intellectual Disability: *0*
Have Physical Disability: *0*

65g - Annual Training Content

Regulations

2600.

65.g. Direct care staff persons, ancillary staff persons, substitute personnel and regularly scheduled volunteers shall be trained annually in the following areas:

1. Fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert. Videos prepared by a fire safety expert are acceptable for the training if accompanied by an onsite staff person trained by a fire safety expert.

Description of Violation

Staff persons A and B did not receive training in fire safety completed by a fire safety expert or by a staff person trained by a fire safety expert during the 2018 staff training year (1/1/18 through 12/31/18).

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 Persons A and B did not receive fire safety training by a fire safety expert in 2018. In March of 2019, all Program Administrators received training in Employee Fire Safety/Train the Trainer. (see Attached)
- Starting in March of 2019, the Program Administrators are completing Fire Safety Training as part of the Program's Annual Day Training. Staff Person A and B are both scheduled to receive this training on December 3rd, 2019. A training record will be submitted once completed.
- The program's training needs are reviewed as part of the Quality Management process.

Legal Entity Representative

Dave MacKenzie — Signature

Dave Mackenzie P.D. — Printed Name and Title

10/04/19 — Date

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The above plan of correction is approved as of 11/4/19 (Date)

The above plan of correction was approved by _____ (Initials)

Plan of correction implementation status as of 11/4/19 (Date)

☒ Fully Implemented

☐ Not Implemented

101j7 - Lighting/Operable Lamp

Regulations

2600.

101.j. Each resident shall have the following in the bedroom:

7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

At approximately 10:00 a.m., there was no operable lamp or other source of lighting that could be turned on at bedside in resident bedroom #1.

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.)

- A bedside light was placed in resident #1's bedroom at time of inspection. (See attached picture.)
- Resident #1 has a history of removing the bedside lamp from next to his bed. This information has been added to Resident #1's Support Plan and reviewed with program staff.
- The Administrator or designee will ensure all residents have an operable lamp next to their bed as part of their weekly environmental walk-throughs.

Legal Entity Representative

Signature | Dave MacKenzie · P.D. (Printed Name and Title) | 10/24/19 (Date)

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☒ Fully Implemented

☐ Not Implemented

105g - Lint Removal and Duct Cleaning

Regulations

2600.

105.g. To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use. Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.

Description of Violation

At approximately 11:45 a.m., there was approximately a 1/16" layer of lint covering the entire lint filter of the home's dryer.

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.)

- Dryer lint was removed from the lint trap at the time of inspection.
- Dryer lint removal and dryer vent cleaning is part of the monthly Environmental Inspection/surveys completed by the Program Administrator or designee. (See Attached)
- Program Administrator will complete weekly dryer checks to ensure they remain lint free and will educate staff if there are any concerns.

Legal Entity Representative

Signature

Dave MacKenzie P.D. 10/24/19
Printed Name and Title Date

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[X] Fully Implemented

[ ] Not Implemented