

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

**Facility Information**

Name: *NEURORESTORATIVE PENNSYLVANIA* License #: *44696* License Expiration Date: *11/05/2021*  
Address: *4155 ROXBURY DRIVE, ERIE, PA 16506*  
County: *ERIE* Region: *WESTERN*

**Administrator**

Name: [REDACTED] Phone: *8144741977* Email: [REDACTED]

**Legal Entity**

Name: *MENTOR ABI LLC*  
Address: *6816 WEST LAKE ROAD, FAIRVIEW, PA, 16415*  
Phone: *8144741977* Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *R-4* Date: *08/21/2015* Issued By: *Millcreek Township*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *6* Waking Staff: *5*

**Inspection**

Type: *Full* Notice: *Unannounced* BHA Docket #:  
Reason: *Renewal* Exit Conference Date: *08/02/2021*

**Inspection Dates and Department Representative**

*08/02/2021 - On-Site: Lori Gillette*

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *6* Residents Served: *6*

**Secured Dementia Care Unit**

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

**Hospice**

Current Residents: *0*

**Number of Residents Who:**

Receive Supplemental Security Income: *1* Are 60 Years of Age or Older: *0*  
Diagnosed with Mental Illness: *6* Diagnosed with Intellectual Disability: *0*  
Have Mobility Need: *0* Have Physical Disability: *2*

## Inspections / Reviews

08/02/2021 - Full

Lead Inspector: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *09/12/2021*

9/22/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*Follow-Up Date: *09/29/2021*

11/9/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*Follow-Up Date: *11/16/2021*

11/18/2021 - Document Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

## 23a - Activities of Daily Living Assistance

### 1. Requirements

2600.

23.a. A home shall provide each resident with assistance with ADLs as indicated in the resident's assessment and support plan.

#### Description of Violation

Resident #1's assessment and support plan, dated [REDACTED], indicates a diagnosis of [REDACTED]. To meet this need, staff are to ensure bed mats are in place. However, the mat utilized by the home is a thin, yoga-style mat and not appropriate.

#### Plan of Correction

Accept

The appropriate fall mat was ordered for the participant. This was put in place on August 9, 2021.

Education will be provided to the Residential Supervisor and staff of the home on an appropriate fall mat and ensuring it is placed at the participants bed side when he is in bed. This will be completed by 10/15/2021.

Moving forward the MAR will include checking the fall mat every night to ensure it is in place.

Completion Date: 10/12/2021

#### Document Submission

Implemented

Education attached.

Picture of MAR attached.

## 85d - Trash Receptacles

### 1. Requirements

2600.

85.d. Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.

#### Description of Violation

At approximately 10:30am there was an uncovered trash can in each of the 3 shared bathrooms of the home.

#### Plan of Correction

Accept

Trash can lids were replaced at the time of the inspection.

Education will be provided to the Residential Supervisor and the staff of the home regarding the requirement for all trash cans to have lids in place at all times. This will be completed by 10/16/2021.

Moving forward the home will utilize a daily Cleaning checklist that will assist with ensuring all trash cans have lids; this will begin October 17, 2021.

Completion Date: 10/12/2021

#### Document Submission

Implemented

Education attached.

Daily cleaning checklist attached.

## 162c - Menus Posted

### 1. Requirements

2600.

**162c - Menus Posted (continued)**

162.c. Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.

**Description of Violation**

*The home's menu for the week of 8/1/21 was posted. However, the home's menu for the future week of 8/8/21 was not posted.*

**Plan of Correction****Accept**

*The menu was placed at the time of the inspection.*

*Education will be provided to the Residential Supervisor and the staff of the home regarding the requirement of ensuring the menu is hung for the current week and the following two weeks at all times. this education will be completed by 10/16/21.*

*Moving forward the program will utilize the Regulatory Compliance Checklist to ensure menu's are hung appropriately; this will be completed weekly by the designated staff.*

**Completion Date:** 10/12/2021

**Document Submission****Implemented**

*Education attached.*

*Regulatory Compliance Checklist attached.*