

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

December 8, 2022

[REDACTED]
MENTOR ABI LLC
6816 WEST LAKE ROAD
FAIRVIEW, PA, 16415

RE: NEURORESTORATIVE
PENNSYLVANIA
6816 WEST LAKE ROAD
FAIRVIEW, PA, 16415
LICENSE/COC#: 44663

Dear Mr. [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/28/2022, 06/29/2022 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: NEURORESTORATIVE PENNSYLVANIA **Licen e #:** 44663 **Licen e Expiration:** 10/30/2022
Address: 6816 WEST LAKE ROAD, FAIRVIEW, PA 16415
County: ERIE **Region:** WESTERN

Administrator

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

Legal Entity

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

Certificate(s) of Occupancy

Type: I-1 **Date:** 01/26/2015 **Issued By:** Fairview Township

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 16 **Waking Staff:** 12

Inspection Information

Type: Full **Notice:** Unannounced **BHA Docket #:**
Reason: Renewal **Exit Conference Date:** 06/29/2022

Inspection Dates and Department Representative

06/28/2022 - On-Site: [REDACTED]
06/29/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information			
Licen e Capacity: 8		Re ident Served: 8	
Secured Dementia Care Unit			
In Home: No	Area:	Capacity:	Re ident Served:
Hospice			
Current Re ident : 0			
Number of Residents Who:			
Receive Supplemental Security Income: 7		Are 60 Years of Age or Older: 1	
Diagnosed with Mental Illness: 7		Diagnosed with Intellectual Disability: 8	
Have Mobility Need: 8		Have Physical Disability: 8	

Inspections / Reviews

06/28/2022 Full
Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 07/28/2022

Inspections / Reviews (*continued*)

08/26/2022 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/07/2022

Reviewer: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 08/29/2022

09/29/2022 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/07/2022

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 10/06/2022

12/08/2022 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/07/2022

Reviewer: [REDACTED]

Follow-Up Type: Not Required

81b - Resident Personal Equipment

1. Requirements

2600.

81.b. Wheelchairs, walkers, prosthetic devices and other apparatus used by residents must be clean, in good repair and free of hazards.

Description of Violation

On [REDACTED]/22, at [REDACTED] a.m., the bed rail facing away from the wall on resident #1's bed was not secure. The bed rail could be turned approximately 180 degrees left, towards the head of the bed and 180 degrees right, towards the foot of the bed.

On [REDACTED] 22, at [REDACTED] a.m., the bed rail facing the wall on resident #1's bed was able to be moved approximately 8 inches away from the wall the bed rail was positioned against.

POC Submission

Accept ([REDACTED] 09/29/2022)

Blackburn's was notified during the inspection that the rails needed to be fixed. The bedrails were fixed on 7/19/22. The program has added daily checks of the bedrails to the participants MAR to ensure they are clean, in good repair and free of hazards. Education will be provided to the program on 8/24/22 for the requirements of bed rails. Moving forward the RS will conduct weekly walk throughs of the program; at that time they will ensure the bed rails are all clean, in good repair and free of hazards.

Licensee's Plan Completion Date: 08/30/2022

Implemented ([REDACTED] - 12/08/2022)

82c - Locking Poisonous Materials

2. Requirements

2600.

82.c. Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.

Description of Violation

On [REDACTED]/22, at [REDACTED] a.m., a metal spray canister of [REDACTED] with the warning label of "may be fatal if swallowed" and a half full, 1 quart container of [REDACTED] with a warning label of "keep out of the reach of children, if swallowed get medical help or contact a poison control center right away" was unlocked, unattended, and accessible to residents in the staff bathroom located next to the home's front exit. [REDACTED]

POC Submission

Accept ([REDACTED] - 08/26/2022)

The chemicals were removed during the inspection.

The program will provide education to the staff regarding requirements for poisonous materials to be locked at all times on 8/24/22.

The program currently utilizes a daily checklist for cleaning and inspections. The checklist has been updated to include ensuring all materials are locked up. These will begin being utilized on 8/24/22.

Licensee's Proposed Overall Completion Date: 08/24/2022

82c - Locking Poisonous Materials (continued)

Implemented [redacted] 12/08/2022)

85a - Sanitary Conditions

3. Requirements

2600.
85.a. Sanitary conditions shall be maintained.

Description of Violation

On [redacted] 22, at approximately [redacted] a.m., there were no paper towels, mechanical blower, individual cloth towels or other sanitary means of hand drying in resident #1's bathroom.

POC Submission Accept [redacted] - 08/26/2022)

Paper towels were placed in the participants bathroom at the time of inspection.
Education will be provided to the program on the requirements for ensuring participants have access to dry hands at all times on 8/24/22.

The program currently utilizes a daily checklist for cleaning and inspections. The checklist has been updated to include ensuring all bathrooms have a sanitary means for drying hands. These will begin being utilized on 8/24/22.

Licensee's Proposed Overall Completion Date: 08/24/2022

Implemented [redacted] 12/08/2022)

88a - Surfaces

4. Requirements

2600.
88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

Description of Violation

On, 6/28/22, the left window in resident #3's room was completely removed. The frame of the window was covered with a piece of Luan Board approximately 3 x 3 feet in size.

POC Submission Accept [redacted] 09/29/2022)

At the time of the inspection the new window had already been ordered. The windows are special ordered and the program was waiting for delivery.

The window was replaced on 8/24/22.

The program reviewed the requirements with the maintenance department and an extra window was ordered to be available in the event something happens to a current window.

Licensee's Plan Completion Date: 08/30/2022

Implemented [redacted] 12/08/2022)

225c - Additional Assessment

5. Requirements

2600.

225c - Additional Assessment (continued)

225.c. The resident shall have additional assessments as follows:

- 2. If the condition of the resident significantly changes prior to the annual assessment.

Description of Violation

Resident #3's most recent assessment completed on [REDACTED] 22, assess the resident's aggression service need as "Participant has a minimal problem with aggression" with the plan to meet the service need "Participant has a history of aggression, no specific concerns noted for physical aggression. [REDACTED] however, multiple staff members to include staff member A, indicate that on or about [REDACTED] 22, the resident ripped [REDACTED] bedrail from [REDACTED] bed and broke [REDACTED] room's left window with it. On [REDACTED] 22, the resident [REDACTED] stated [REDACTED] was going to kill [REDACTED] and that the resident has also [REDACTED].

POC Submission

Accept [REDACTED] - 08/26/2022)

The program will complete a RASP update by 8.26.22 [REDACTED]. Education will be provided to the Case Managers related to time frames on RASP updates. This will be completed on 8.24.22. All high risk participants are reviewed on a weekly basis following a meeting format. The form has been updated to include a to-do list. This will be reviewed weekly to ensure all updates are successfully completed.

Licensee's Proposed Overall Completion Date: 08/24/2022

Implemented [REDACTED] - 12/08/2022)