

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

March 6, 2025

[REDACTED]  
MENTOR ABI LLC  
[REDACTED]

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

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/23/2025 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* License #: *44663* License Expiration: *09/26/2024*  
 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: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

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

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *15* Waking Staff: *11*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #: [REDACTED]  
 Reason: *Complaint, Incident* Exit Conference Date: *01/23/2025*

**Inspection Dates and Department Representative**

01/23/2025 On Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: *8* Residents Served: *8*

Secured Dementia Care Unit  
 In Home: *No* Area: [REDACTED] Capacity: [REDACTED] Residents Served: [REDACTED]

Hospice  
 Current Residents: *0*

Number of Residents Who:  
 Receive Supplemental Security Income: *6* Are 60 Years of Age or Older: *2*  
 Diagnosed with Mental Illness: *8* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *7* Have Physical Disability: *7*

**Inspections / Reviews**

01/23/2025 - Partial  
 Lead Inspector: [REDACTED] Follow Up Type: *POC Submission* Follow Up Date: *02/23/2025*

Inspections / Reviews *(continued)*

02/18/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 02/25/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 02/28/2025

03/06/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/25/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

## 15b - Supervisor Plan

## 1. Requirements

2600.

15.b. If there is an allegation of abuse of a resident involving a home's staff person, the home shall immediately develop and implement a plan of supervision or suspend the staff person involved in the alleged incident.

## Description of Violation

On [REDACTED] at approximately 6:00p.m. resident [REDACTED] was found in soiled briefs that had not been changed since [REDACTED] at 7:00a.m. The home suspended staff person A for neglect of care to resident [REDACTED] pending the outcome of the investigation. The home allowed staff person A to return to work before an investigation was completed.

## Plan of Correction

Accept [REDACTED] - 02/18/2025)

Licensing educated the program at the time of the investigation on the requirements for returning staff following an allegation.

Moving forward the program will not allow a staff member to return without the approval of licensing.

The program will review all Serious Abuse Events during the monthly Quality call to ensure all requirements were met.

Proposed Overall Completion Date: 02/14/2025

Licensee's Proposed Overall Completion Date: 02/14/2025

Implemented [REDACTED] - 03/06/2025)

## 23a - Activities of Daily Living Assistance

## 2. 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

The assessment and support plan, dated [REDACTED], for resident [REDACTED] indicates the resident requires staff assistance with toileting to include bladder and bowel management, and staff are to provide the resident with the opportunity to use the bathroom right after waking and right before bed, before all meals, before and after transports, before and after major activities, before using medical equipment, and hourly outside of these events. Resident [REDACTED] did not receive this assistance as required. On [REDACTED] at 6:00p.m., resident [REDACTED] was found wearing a heavily soiled brief, with a date and time written on the brief indicating they were last checked/changed on [REDACTED] at 7:00a.m.

The assessment and support plan dated [REDACTED] for resident [REDACTED] indicates the resident requires staff assistance with toileting to include bladder and bowel management and staff are to provide the resident with 1 hour incontinence checks and toileted every two hours. Resident [REDACTED] did not receive this assistance as required. On [REDACTED] at 7:00a.m., the resident was found in heavily soiled briefs.

The assessment and support plan dated [REDACTED] for resident [REDACTED] indicates the resident requires staff assistance with toileting to include bladder and bowel management and the resident is on a 2-hour toileting schedule. Resident #3 did not receive this assistance as required. On [REDACTED] at 7:00a.m. the resident was found wearing heavily soiled briefs with a date and time written on the brief indicating they were last checked/changed on [REDACTED] at 2:30p.m.

**23a Activities of Daily Living Assistance (continued)****Plan of Correction****Accept** [REDACTED] **- 02/18/2025)**

*Beginning in January 2025 the program completed face to face education with the staff on all participant RASPs.  
Beginning in February 2025 the program began the requirement of monthly face to face education with the staff on all participant RASPs.*

*To ensure compliance the program completes at least monthly routine reviews of required training requirements to ensure education requirements are met.*

*Proposed Overall Completion Date: 02/28/2025*

**Licensee's Proposed Overall Completion Date: 02/28/2025**

**Implemented** [REDACTED] **03/06/2025)**