

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

September 22, 2026

[REDACTED]
BALL PAVILION INC
[REDACTED]
[REDACTED]

RE: BARNABAS COURT AT BREVILLIER
VILLAGE
5416 EAST LAKE ROAD
ERIE, PA, 16511
LICENSE/COC#: 45306

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/04/2026, 07/06/2026 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: BARNABAS COURT AT BREVILLIER VILLAGE

License #: 45306

License Expiration: 12/08/2026

Address: 5416 EAST LAKE ROAD, ERIE, PA 16511

County: ERIE

Region: WESTERN

Administrator

Name:

Phone:

Email:

Legal Entity

Name: BALL PAVILION INC

Address:

Phone:

Email:

Certificate(s) of Occupancy

Type: C-2 LP

Date: 11/16/1989

Issued By: Dept. of Labor & Industry

Type: I-2

Date: 02/22/2018

Issued By: Harborcreek Township

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 101

Waking Staff: 76

Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Complaint, Incident

Exit Conference Date: 07/06/2026

Inspection Dates and Department Representative

06/04/2026 - On-Site:

07/06/2026 - Off-Site:

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 120

Residents Served: 61

Secured Dementia Care Unit

In Home: Yes

Area: North

Capacity: 60

Residents Served: 39

Hospice

Current Residents: 1

Number of Residents Who:

Receive Supplemental Security Income: 0

Are 60 Years of Age or Older: 61

Diagnosed with Mental Illness: 2

Diagnosed with Intellectual Disability: 1

Have Mobility Need: 40

Have Physical Disability: 0

Inspections / Reviews

06/04/2026 Partial

Lead Inspector:

Follow-Up Type: POC Submission

Follow-Up Date: 08/06/2026

Inspections / Reviews (*continued*)

08/17/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/14/2026

Reviewer: [REDACTED]

Follow Up Type: POC Submission

Follow Up Date: 08/24/2026

09/09/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/14/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 09/14/2026

09/22/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/14/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

90b - Staff Communication

1. Requirements

2600.

90.b. For a home serving 9 or more residents, there shall be a system or method of communication that enables staff persons to immediately contact other staff persons in the home for assistance in an emergency.

Description of Violation

The home has a system that allows staff in different parts of the home to communicate with each other in the event of an emergency. On [REDACTED] at approximately 8:40 a.m., staff person A was performing care with resident [REDACTED] in [REDACTED] room. When staff person A turned around to grab a towel, resident [REDACTED] fell and was complaining of severe lower back pain. Staff person A left resident [REDACTED] alone to locate another staff person to assist because the home's system that allows staff to communicate with each other in the event of an emergency is not reliable and often does not function properly.

Plan of Correction

Accept [REDACTED] - 08/17/2026

After receiving the LIS on 7/27/26 and learning of the 90b Violation, PCHA discovered that not all Personal Care Aides were following existing policies and procedures for communication during an emergency with a resident. LPN reported the 2-way radios have not worked for several weeks and the cellphones connected to the nurse call system often lose connection and are not fully charged.

All direct care staff are supposed to carry cellphone connected to nurse call system and use phone to communicate with each other and/or the nurse. In the event a phone is not working properly, PCA's are then supposed to use a 2-way radio/"walkie-talkie."

PCHA checked nurse call system cell phones and two-way radios on 8/4/26 and discovered not all pieces of equipment were in working order. PCHA sent an email and placed a work order to IT and Maintenance Departments on 8/4/26. Director of Maintenance replaced batteries in 2 out of 3 two-way radios and turned the 3rd radio to the proper channel on 8/5/26. Director of Maintenance also ordered 8 new 2-way radios for future use. All phones were plugged in so they could fully charge.

PCHA reviewed violations received from incident investigation with Assessment Team during a meeting on 8/5/26. Assessment Team includes DON, ADON, Nurses, Social Workers, PCHA, and Personal Care Aide, as well as Therapy Staff and Director of Recreation.

Effective 8/5/26, all nursing staff present will instruct PCAs to immediately start using nurse call system phones and/or walkie talkies for communication in the event of an emergency with a resident. Signs were posted at each nurses station on 8/5/26 by the nurse to remind ALL PCAs to carry a phone and/or walkie talkie.

PCHA verified that as of 8/6/26, all phones and 2-way radios are in working order and being used by PCA's at all times while working with residents.

PCHA will review proper procedures for emergency communication with all direct care staff, including nurses and personal care aides (PCA). Meetings to review proper procedures and use of 2-way radios and/or cellphones connected to nurse call system that are already in place, will be held on 8/11/26 and 8/20/26. All Direct Care Staff are required to attend these meetings. If staff are absent from meetings, PCHA will review information packets with those direct care staff individually.

90b Staff Communication (continued)

Starting the week of 8/10/26, PCHA will complete weekly audit of phones and 2 way radios to ensure they are in working order. Weekly Audits will take place for 4 weeks from 8/10/26 8/31/26 to ensure equipment is working properly and all PCA's are using them daily.

Also during the Assessment Team meeting on 8/5/26, PCHA instructed all nurses present to report any issues with phones and/or 2 way radios to Maintenance and/or IT department immediately. PCHA will also review regulations and PCH policies for failing to report unsafe working conditions as well as employee job descriptions that include knowledge of safety and communication policies and procedures at the meetings scheduled for 8/11/26 and 8/20/26.

In the future if Nurses and/or PCA's fail to report the phones or 2 way radios are not working properly, those staff will receive disciplinary action in writing.

Licensee's Proposed Overall Completion Date: 08/31/2026

Implemented [REDACTED] 09/22/2026)

142a - Secure Medical Care**2. Requirements**

2600.

142.a. The home shall assist the resident to secure medical care if a resident's health status declines. The home shall document the resident's need for the medical care, including updating the resident's assessment and support plan.

Description of Violation

On [REDACTED], resident [REDACTED] had an unwitnessed fall in [REDACTED] room and was found on the floor at approximately 8:00 a.m. Resident [REDACTED] was assessed and had a skin tear to [REDACTED] right elbow. On [REDACTED] at approximately 1:00a.m., resident [REDACTED] was found attempting to self transfer but was unable to stand up. The resident required extensive assistance getting into bed and the resident complained of foot pain, describing it as a sharp, yet aching pain. At approximately 8:00 a.m. resident [REDACTED] again had a difficult time transferring and staff noticed [REDACTED] ankle to be swollen with bruising. Resident received a mobile Xray and was diagnosed with a right ankle fracture at 3:30 p.m. and was sent out to the hospital at 4:30 p.m.

Plan of Correction

Accept [REDACTED] 09/09/2026)

On 5/21/26, Resident [REDACTED] returned to PCH facility with a non weight bearing status due to the fracture of [REDACTED] right ankle. Resident [REDACTED] moved to skilled nursing facility on 5/21/26 and will remain there for long term care due to an overall health decline in recent months.

Over several days during the first 2 weeks in June of 2026, PCHA completed an audit of all residents current health conditions to determine if they are still appropriate for a Personal Care setting or if a long term care/skilled nursing facility is necessary to meet their care needs. PCHA identified 3 residents who were all showing signs and symptoms of an overall health decline, increased falls, poor safety awareness, and near end dementia staging. All 3 residents moved to facility's neighboring SNF for long term care needs. The time frame of these moves were from 6/24/26 through 7/2/26.

142a Secure Medical Care (continued)

DON has provided Direct Care Staff LPN's with detailed "INTERACT" Change In Condition Cards as a tool to help determine when a resident should seek immediate medical attention vs. non immediate medical attention. ALL LPN's in PCH have access to these cards as they have been used in the past for trainings.

Effective immediately and on an ongoing basis, INTERACT cards will continue to be used in PCH by all LPNs. INTERACT cards will be used for training at the next monthly nursing meeting scheduled 8/11/26. All LPN's are required to attend this meeting. If any LPN is absent, DON or PCHA will review Interact Cards with LPN on their next scheduled day of work.

At the meeting on 8/11/26, PCHA and/or DON will also review procedures for contacting residents PCP's after a fall or new onset of pain to ensure medical evaluations are happening within an appropriate time frame. Additional fall policies and procedures will also be reviewed with LPN's at meeting on 8/11/26.

UPDATE: INTERACT cards are used as a Quality Improvement tool to help nursing staff determine when a resident needs further medical attention at the hospital. Our facility has been using the cards since we received information from a BHSL bulletin in May 2024.

"Developed by Pathway Health, Interventions to Reduce Acute Care Transfers (INTERACT) is a publicly available quality improvement program that focuses on improving the identification, evaluation, and management of acute changes in condition. Effective implementation of the INTERACT program has been associated with substantial reductions in hospitalization. Originally designed in a project supported by the Centers for Medicare and Medicaid Services (CMS), INTERACT has updated a recently released set of Assisted Living Quality Improvement Tools. These tools can be used by both Personal Care Homes (PCH) and Assisted Living Residences (ALR)."

The cards cover what to do for a change in condition, what requires immediate vs. non immediate medical attention, and lists several signs and symptoms in an organized, easy to follow system.

INTERACT Cards will be attached with Document Submission.

Licensee's Proposed Overall Completion Date: 08/31/2026

Implemented  09/22/2026)