



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

OCT 23 2013

Ms. Jennifer Musone, Executive Director  
Cordia Commons at Meadville, LLC  
400 Boradacres Drive  
Bloomfield, New Jersey 07003

RE: Juniper Village at Meadville  
455 Chestnut Street  
Meadville, Pennsylvania 16335

Dear Ms. Musone:

As a result of the Department of Public Welfare's licensing inspection on September 12, 2013, of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) must be maintained.

Your regular license for the period November 26, 2013 to November 26, 2014 was issued on August 16, 2013. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink, appearing to read "Ronald Melusky".

Ronald Melusky  
Director

Enclosure  
Licensing Inspection Summary



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OCT 07 2013

WEST REGION FIELD OFFICE  
Human Services Licensing

Page 2 of 8

Violation Report: 41019 - 09/12/2013 - McConnell, Deb  
PCH Name: JUNIPER VILLAGE AT MEADVILLE

**1. REGULATION 65 Pa.Code §2800**

2800.81(b) - Wheelchairs, walkers, prosthetic devices and other apparatus used by residents must be clean, in good repair and free of hazards.

**2a. DESCRIPTION OF VIOLATION**

Resident #1, has a bedrail on both sides of the bed. The bedrails have openings of approximately 4 1/2" wide by 24" long which are an entrapment risk.

**3. 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.*

Upon move in Resident #1 and her family were properly informed of DPW recommendations related to side rails. A side rail assessment was completed and a side rail consent was signed by the resident and her POA which outlined the risks associated with side rail usage. Side rails were ordered by the PCP and are suited to the resident's needs and height/weight requirements. Resident side rail usage was re-assessed on 10/1/2013. The resident, family, and PCP are in agreement to continue side rail usage at this time.

All residents with current side rail usage will be assessed and reviewed to determine least restrictive equipment is utilized and equipment will be evaluated for safety by 10/4/2013. Resident side rail usage will be reviewed during Quality Assurance Meetings monthly. All staff will be trained by 10/5/2013 regarding the requirements of this regulation.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

*Jennifer Musone, ED*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page)

*Jennifer Musone, Executive Director*

Date *10/3/13*

**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of

*10/9/13*  
(Date)

Plan of correction implementation status as of

*10/8/13*  
(Date)

The above plan of correction was approved by

*[Signature]*  
(Initials)

- Fully implemented
- Partially Implemented - Adequate Progress *[Signature]*
- Partially Implemented - Inadequate Progress
- Not Implemented

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OCT 07 2013

WEST REGION FIELD OFFICE  
Human Services Licensing

Page 3 of 6

Violation Report: 41019 - 06/12/2013 - McConnell, Deb  
PCH Name: JUNIPER VILLAGE AT MEADVILLE

1. REGULATION 55 Pa. Code §2800  
2800.88(a) - Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION

The fire safe doors on the east side stairwell are rusted through and have a gap of approximately 1/2 inch, allowing light and air through.

The main dining room has an area approximately 4 inches by 3 inches where carpet is removed and two areas of frayed carpet with threads approximately 1 foot long, posing a potential tripping hazard.

3. 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.

Plan of Correction: Bids will be obtained for Fire Safe Doors by 10/31/2013. Until bids are obtained, Environmental Service Director will patch rust spots and fill gaps. Quote for main dining room carpet was presented at the time of inspection. Carpet is currently being shipped to warehouse and will be installed once it arrives and installer sets a date with ED. Frayed threads in carpet were immediately trimmed to alleviate further tripping hazards. Any issues identified during daily safety rounds will be corrected and all issues will be reviewed during monthly Quality Assurance Meetings. All associates were trained on 10/4/2013 regarding the requirements of this regulation.

Repeat Violation: Yes

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

*Jennifer Musone, ED*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page)

Jennifer Musone, Executive Director

Date

10/3/13

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10/8/13  
(Date)

Plan of correction implementation status as of

10/8/13  
(Date)

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*Jennifer Musone*  
(Initials)

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WEST REGION FIELD OFFICE  
Human Services Licensing

Violation Report: 41019 - 09/12/2013 - McConnell, Deb  
PCH Name: JUNIPER VILLAGE AT MEADVILLE

1. REGULATION 68 Pa.Code §2600  
2600.100(a) - The exterior of the building and the building grounds or yard must be in good repair and free of hazards.

2a. DESCRIPTION OF VIOLATION  
On 9/12/13, the walkway in the courtyard had foliage and vines growing across it. A 12" by 12" cement pad was lifted approximately 1/2" and bricks were missing from the walkway.

3. 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.

Foliage and vines were removed at the time of inspection. Plan of Correction: All foliage and vines will be free from area walkways. Executive Director to review Landscaping contract with current vendor to ensure they are clearing any brush that is overlapping walk areas around the building per contract. ESD, LT, and Safety Committee will monitor exterior areas of the building during daily safety rounds and any issues identified will be corrected and reviewed during monthly Quality Assurance meetings. All associates were trained on 10/4/2013 regarding the requirements of this regulation.  
Plan of Correction for Brick Walkway: Quotes to be obtained by 10/31/2013 to fix missing bricks. Safety Committee Team Members & Leadership Team members will continue to monitor all areas on their daily rounds, morning Stand Up meetings, and through monthly Quality Assurance meetings. All associates were trained on 10/4/2013 regarding the requirements of this regulation.

Repeat Violation: No      Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page) *Jennifer Musone, ES*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) *Jennifer Musone, Executive Director*      Date *10/3/13*

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(Date)

Plan of correction implementation status as of 10/8/13  
(Date)

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(Initials)

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WEST REGION FIELD OFFICE  
Human Services Licensing

Violation Report: 41019 - 09/12/2013 - McConnell, Deb  
PCH Name: JUNIPER VILLAGE AT MEADVILLE

1. REGULATION 55 Pa.Code §2800

2800.187(a) - A medication record shall be kept to include the following for each resident for whom medications are administered:

- (1) Resident's name.
- (2) Drug allergies.
- (3) Name of medication.
- (4) Strength.
- (5) Dosage form.
- (6) Dose.
- (7) Route of administration.
- (8) Frequency of administration.
- (9) Administration times.
- (10) Duration of therapy, if applicable.
- (11) Special precautions, if applicable.
- (12) Diagnosis or purpose for the medication, including pro re nata (PRN).
- (13) Date and time of medication administration.
- (14) Name and initials of the staff person administering the medication.

2a. DESCRIPTION OF VIOLATION

The medication administration record for resident #2, does not include Vitamin E, 400 IU, as used for cramping.

3. 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.

All MARS will be audited by October 18th, 2013 to review for any inaccuracies as well as correct diagnosis's. DOW will also audit and review residents with multiple doctors to make sure all orders are necessary and up to date. This will continue to occur each month as new MARS are being completed. DOW will also continue to schedule cart audits with pharmacy provider on a quarterly or as needed basis to review residents current medications and compliance with this regulation. DOW and Medication Associates were trained on 10/4/2013 regarding the requirements of this regulation.

*The MAR for resident #2 was updated to include Vitamin E.*

Repeat Violation: Yes

Date(s) of Previous Violation(s):

09/19/2012

Signature of Legal Entity Representative  
(Required on EVERY Page)

*Jennifer Musone, EO*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page)

*Jennifer Musone, Executive Dir.*

Date

*10/3/13*

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*10/8/13*  
(Date)

Plan of correction implementation status as of

*10/8/13*  
(Date)

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Violation Report: 41019 - 09/12/2013 - McConnell, Deb  
PCH Name: JUNIPER VILLAGE AT MEADVILLE

1. REGULATION 55 Pa.Code 52800

2800.224(a) - A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

2a. DESCRIPTION OF VIOLATION

The pre-admission screening for resident #3, does not include a determination that the home can meet the service needs of the resident.

3. 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.

Although Resident #3 pre-screening did not include all required documentation, Resident's #3 DME and RASP did clearly document the resident's appropriateness for PCH placement. An audit of all resident's files was completed on 10/1/2013 to ensure compliance with this regulation. All pre-admission screenings are now completed within our electronic medical record. The electronic form is devised so that all sections of the form must be completed to ensure ongoing compliance with this regulation. The DOW and DCR were trained on 10/1/2013 regarding the requirements of this regulation.

Repeat Violation: Yes

Date(s) of Previous Violation(s):

09/19/2012

Signature of Legal Entity Representative  
(Required on EVERY Page)

*Jennifer Musone, ED*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page)

Jennifer Musone, ED

Date

10/3/13

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20/8/13  
(Date)

Plan of correction implementation status as of

10/8/13  
(Date)

The above plan of correction was approved by

*[Signature]*  
(Initials)

- Fully Implemented *[Signature]*
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented