



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

Ms. Debra K. Miller,  
Executive Director  
Juniper Village at Mount Joy, LLC  
607 Hearthstone Lane  
Mount Joy, Pennsylvania 17552

APR 23 2018

RE: Juniper Village at Mount Joy  
Certificate #: 330040

Dear Ms. Miller:

As a result of the Department of Human Services' annual licensing inspection on February 8, 2018 of the above facility, the violation with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary was found.

The violation 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 must be maintained.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to [https://www.surveymonkey.com/r/BHSL\\_Inspection](https://www.surveymonkey.com/r/BHSL_Inspection).

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read 'J. Rowe'.

Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary



Violation Report: 33004 - 02/08/2018 - Hoover, Douglas

PCH Name: JUNIPER VILLAGE AT MOUNT JOY

**1. REGULATION 55 Pa.Code §2600**

2600.65(f) - Training topics for the annual training for direct care staff persons shall include the following:

- (1) Medication self-administration training.
- (2) Instruction on meeting the needs of the residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan.
- (3) Care for residents with dementia and cognitive impairments.
- (4) Infection control and general principles of cleanliness and hygiene and areas associated with immobility, such as prevention of decubitus ulcers, incontinence, malnutrition and dehydration.
- (5) Personal care service needs of the resident.
- (6) Safe management techniques.
- (7) Care for residents with mental illness or mental retardation, or both, if the population is served in the home.

**2a. DESCRIPTION OF VIOLATION**

Direct Care Staff Member A did not receive training in the following areas for training year 2017:

- Meeting the needs of residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan
- Personal care service needs of the resident
- Care for residents with mental illness

Direct Care Staff Member B did not receive training in the following areas for training year 2017:

- Meeting the needs of residents as described in the preadmission screening form, assessment tool, medical evaluation and support plan
- Personal care 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.*

*See attached Page 2A of 2. -BE*

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

*Debra K. Miller*

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

DEBRA K. MILLER

Date 3/1/18

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

The above plan of correction is approved as of 3-6-18  
(Date)

The above plan of correction was approved by BE  
(Initials)

Plan of correction implementation status as of 3-6-18  
(Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

PCH NAME: JUNIPER VILLAGE AT MOUNT JOY

License Number: 330040

JE

What Specific change will be made:

The specific change will be how we conduct our annual training. All direct staff will have their annual training on or before their anniversary date. This will include all training that is listed in 2600.65 as it pertains to direct care staff.

Who will make the change:

The Executive Director will make the change

When will the change be made:

The change was made immediately.

How will the change be made:

The change will be made by having each direct staff person sign off their training annually and keep their sign off sheet in their individual file to assure compliance. The Executive Director and the Director of Wellness will review each file to assure compliance.

What system have you implemented to make sure that the same violation will not occur again and what training will be provided to your staff:

The system implemented is as each direct staff employee approaches their annual date of employment they will have specific training completed according to the regulation 2600.65. This will be kept in their individual file and signed off by the direct staff employee and the trainer. It will then be checked by the Director of Wellness and the Executive Director to assure compliance.

DEBRA K. MILLER - EXECUTIVE DIRECTOR Debra K. Miller 3/1/18

Printed Name & Title of Legal Entity Representative    Signature of Legal Entity Representative    Date