



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

**CERTIFIED MAIL – RETURN RECEIPT REQUESTED**  
**MAILING DATE: December 14, 2018**

Ms. Lynn Katzmann  
President  
Juniper Village at Forest Hills, LLC  
400 Broadacres Drive  
Bloomfield, New Jersey 07003

RE: Juniper Village at Forest Hills  
107 Fall Run Road  
Pittsburgh, Pennsylvania 15221  
Certificate #: 433780

Dear Ms. Katzmann:

As a result of the Department's Bureau of Human Services Licensing inspection on November 5, 2018, 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 must be maintained.

Sincerely,

A handwritten signature in black ink that reads "Jon B. Kimberland".

Jon Kimberland  
Human Services Licensing Supervisor

Enclosure  
Licensing Inspection Summary



Violation Report: 43378 - 11/05/2018 - Bartlett, Patricia

PCH Name: JUNIPER VILLAGE AT FOREST HILLS

**1. REGULATION 55 Pa.Code §2600**

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.

**2a. DESCRIPTION OF VIOLATION**

On 10/15/18, resident #1's family member informed the home of the resident's frequent depression and verbal expression of wanting to die. The home did not follow up with requesting a mental health consult or with reporting the suicidal ideation to the resident's physician.

**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.*

**Regulation 2600.142(a):**

Juniper Village at Forest Hills recognizes this Violation and made the necessary and appropriate referrals for Resident #1 to both the Primary Care Physician and Heartland Hospice prior to end of the site inspection. Additionally, Resident #1's Resident and Assessment and Support Plan were also updated as required. (See Appendix #1 Attached).

The Director of Wellness will share with the Executive Director any verbal or written correspondence with concerns or comments shared by families during our daily Stand Up meeting. Upon this notification, the ED will initiate a review of the Residents Assessment and Support Plan and coordinate and secure any medical care or services necessary for the safety and security of the Residents within the Community. All updates will be documented on the Addendum page of the RASP.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

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

JANET WANGLER

Date 12/4/18

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

The above plan of correction is approved as of 12/10/18  
(Date)

Plan of correction implementation status as of 12/10/18  
(Date)

The above plan of correction was approved by   
(Initials)

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

Violation Report: 43378 - 11/05/2018 - Bartlett, Patricia

PCH Name: JUNIPER VILLAGE AT FOREST HILLS

**1. REGULATION 55 Pa.Code §2600**

2600.225(c) - The resident shall have additional assessments as follows:

- (1) Annually.
- (2) If the condition of the resident significantly changes prior to the annual assessment.
- (3) At the request of the Department upon cause to believe that an update is required.

**2a. DESCRIPTION OF VIOLATION**

On 10/15/18, resident #1's family member informed the home of the resident's frequent depression and verbal expression of wanting to die. However, the resident's assessment dated 10/17/18 did not indicate the resident's suicidal ideation.

**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.*

**Regulation 2600.225(c):**

Juniper Village at Forest Hills recognizes this Violation and updated Resident #1's Resident Assessment and Service Plan prior to the end of the site inspection. (See Appendix #2 Attached).

The Director of Wellness met with all Wellness staff and reviewed the Policy and Procedure regarding Reportable Events-PA Addendum, with the emphasis on changes in Resident's metal status. (See attached In-service sign in sheet, Appendix #3 Attached). The Director of Wellness will share with the Executive Director any verbal or written correspondence with concerns or comments shared by families during our daily Stand Up meeting. Upon this notification, the ED will initiate a review of the Residents Assessment and Support Plan and coordinate and secure any Assessments or services necessary for the safety and security of the Residents within the Community. All updates will be documented on the Addendum page of the RASP.

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

*[Handwritten Signature]*

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

JANET WANGLER

Date 12/4/18

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The above plan of correction was approved by *[Handwritten Initials]*  
(Initials)