

Department of Human Services
Bureau of Human Service Licensing

June 1, 2022

[REDACTED], EXECUTIVE DIRECTOR
[REDACTED]
[REDACTED]
[REDACTED]

RE: JUNIPER VILLAGE AT MOUNT JOY
607 HEARTHSTONE LANE
MOUNT JOY, PA, 17552
LICENSE/COC#: 33004

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/04/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
[REDACTED]
[REDACTED]

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: JUNIPER VILLAGE AT MOUNT JOY License #: 33004 License Expiration: 03/14/2023
Address: 607 HEARTHSTONE LANE, MOUNT JOY, PA 17552
County: LANCASTER Region: CENTRAL

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

Name: JUNIPER VILLAGE AT MOUNT JOY LLC
Address: 607 HEARTHSTONE LANE, MOUNT JOY, PA, 17552
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 03/08/2020 Issued By: Labor and Industry

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 71 Waking Staff: 53

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
Reason: Renewal, Complaint Exit Conference Date: 05/06/2022

Inspection Dates and Department Representative

05/04/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 72 Residents Served: 70

Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

Hospice

Current Residents: 6

Number of Residents Who:

Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 70
Diagnosed with Mental Illness: 1 Diagnosed with Intellectual Disability: 0
Have Mobility Need: 1 Have Physical Disability: 2

Inspections / Reviews

05/04/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 05/26/2022

06/01/2022 - POC Submission

Inspections / Reviews *(continued)*

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: *06/08/2022*

06/01/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

29a SOPb1- Hospice Care: Doctor Certification

1. Requirements

2600.

29.a.b. A home that elects to serve one or more residents who receive hospice care and services in accordance with § 2600.29 is not required to evacuate a resident who is actively dying, during a fire drill, if all of the following are met:

- 1. A physician, who is not an employee or contractor of the home, has certified in writing that the resident is actively dying and may suffer bodily injury or a hastened death as a result of participation in a fire drill.

Description of Violation

Resident 1, who was not evacuated during the fire drill conducted on 1/7/22, does not have a written certification from a physician that the resident is actively dying and may be injured or suffer a hastened death as the result of participating in a fire drill.

Plan of Correction

Accept

Residents who receive hospice services and who are actively passing and cannot evacuate need an order from their physician to certify that they cannot evacuate during a fire drill.

- 1. The Medical Concierge or Director of Wellness will seek an order from their physician that the resident does not need to evacuate if they are a hospice resident and "actively dying." and may suffer bodily injury or a hastened death as a result of participation in a fire drill.

Completion Date: 05/16/2022

Document Submission

Implemented

Residents who receive hospice services and who are actively passing and cannot evacuate need an order from their physician to certify that they cannot evacuate during a fire drill.

- 1. The Medical Concierge or Director of Wellness will seek an order from their physician that the resident does not need to evacuate if they are a hospice resident and "actively dying." and may suffer bodily injury or a hastened death as a result of participation in a fire drill.

All steps of this plan have been implemented.

89b - Hot Water Temperature

1. Requirements

2600.

89.b. Hot water temperature in areas accessible to the resident may not exceed 120°F.

Description of Violation

On 5/4/22 at 10:15 AM, the hot water temperature at the bathroom sink in bedroom 406 measured 124.4 degrees Fahrenheit. At 10:30 AM, the hot water at the bathroom sink in bedroom 420 measured 124.1 degrees Fahrenheit. At 10:45 am, the hot water at the bathroom sink in bedroom 228 measured 125.1 degrees Fahrenheit. On 5/6/22 at 3:15 pm, the hot water at the laundry tub in the 200 hallway measured 122.3 degrees Fahrenheit.

Plan of Correction

Accept

On 6/1/22, The ESD will check water temperatures at several areas throughout the building and adjust the hot water heater if necessary.

The ESD will check the water temperature at multiple areas of the home at least 2 times per week, beginning 6/1/22, to ensure the temperature does not exceed 120 degrees.

Hot water temperatures are to be checked frequently to assure that temperature of hot water does not exceed 120

89b - Hot Water Temperature (continued)

degrees Fahrenheit at anytime. Environmental Services Director had our HVAC services professional check water temperature. Water temperature in the community is set not to exceed 120 degrees Fahrenheit. ESD and professional in agreement that temperatures have always been set not to exceed 120 degrees Fahrenheit. Scheduled checks at least 5 days a week will be performed by the ESD or his designee in order to be in compliance and that the water temperature in resident areas DO NOT exceed 120 Fahrenheit.

Completion Date: 06/01/2022

Document Submission**Implemented**

On 6/1/22, The ESD will check water temperatures at several areas throughout the building and adjust the hot water heater if necessary.

The ESD will check the water temperature at multiple areas of the home at least 2 times per week, beginning 6/1/22, to ensure the temperature does not exceed 120 degrees.

Hot water temperatures are to be checked frequently to assure that temperature of hot water does not exceed 120 degrees Fahrenheit at anytime. Environmental Services Director had our HVAC services professional check water temperature. Water temperature in the community is set not to exceed 120 degrees Fahrenheit. ESD and professional in agreement that temperatures have always been set not to exceed 120 degrees Fahrenheit. Scheduled checks at least 5 days a week will be performed by the ESD or his designee in order to be in compliance and that the water temperature in resident areas DO NOT exceed 120 Fahrenheit.

All steps of the plan have been implemented.

103f - Refrigerator/Freezer Temps**1. Requirements**

2600.

103.f. Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

Description of Violation

There was no operable thermometer in the refrigerator or freezer in the 300 hallway kitchen.

Plan of Correction**Accept**

Both thermometers in the refrigerator and freezer in the 300 hallway kitchen were digital and not operable upon inspection. Both of these thermometers were replaced immediately by the Executive Chef by NSF thermometers. These NSF thermometers are more reliable vs. the digital thermometers.

Executive Chef or her designee (Cook) will check daily that that the thermometers are in place and are operable in order to be in compliance.

Completion Date: 05/04/2022

Document Submission**Implemented**

Both thermometers in the refrigerator and freezer in the 300 hallway kitchen were digital and not operable upon inspection. Both of these thermometers were replaced immediately by the Executive Chef by NSF thermometers. These NSF thermometers are more reliable vs. the digital thermometers.

Executive Chef or her designee (Cook) will check daily that that the thermometers are in place and are operable in order to be in compliance. All steps of this plan have been implemented.

224c - Preadmission Screening

1. Requirements

2600.

224.c. The preadmission screening shall be completed by the administrator or designee. If the resident is referred by a State-operated facility, a county mental health and intellectual disability program, a drug and alcohol program or an area agency on aging, a representative of the referral agent may complete the preadmission screening.

Description of Violation

The preadmission screening form, dated [REDACTED], for Resident 3, is not complete and does not contain the title of the person completing the screening or the name of the home or whether the resident can safely use and avoid poisonous materials.

Plan of Correction

Accept

Missing information on preadmission screen was sited. This was corrected immediately by adding the title of the person who completed the form and also checked the appropriate check mark that the resident was capable of safely using and avoiding poisonous materials.

The Administrator, Medical Concierge, DOW or the Sales and Marketing Director will be in charge of assuring that the preadmission screening form is completed in it entirety.

Preadmission screening forms will be checked on move in by the Administrator or designee to assure compliance with this regulation

Completion Date: 05/16/2022

Document Submission

Implemented

Missing information on preadmission screen was sited. This was corrected immediately by adding the title of the person who completed the form and also checked the appropriate check mark that the resident was capable of safely using and avoiding poisonous materials.

The Administrator, Medical Concierge, DOW or the Sales and Marketing Director will be in charge of assuring that the preadmission screening form is completed in it entirety.

Preadmission screening forms will be checked on move in by the Administrator or designee to assure compliance with this regulation.

All steps of this plan have been implemented.