

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

September 22, 2023

[REDACTED], VICE PRESIDENT
CORDIA COMMONS AT MEADVILLE LLC
[REDACTED]
[REDACTED]

RE: JUNIPER VILLAGE AT MEADVILLE
455 CHESTNUT STREET
MEADVILLE,, PA, 16335
LICENSE/COC#: 41019

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/01/2023, 08/01/2023 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: JUNIPER VILLAGE AT MEADVILLE License #: 41019 License Expiration: 11/26/2023
 Address: 455 CHESTNUT STREET, MEADVILLE,, PA 16335
 County: CRAWFORD Region: WESTERN

Administrator

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

Legal Entity

Name: CORDIA COMMONS AT MEADVILLE LLC
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-2 LP Date: 12/27/1994 Issued By: L&I

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 77 Waking Staff: 58

Inspection Information

Type: Full Notice: Unannounced BHA Docket #:
 Reason: Renewal Exit Conference Date: 08/02/2023

Inspection Dates and Department Representative

08/01/2023 - On-Site: [REDACTED]
 08/01/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 90 Residents Served: 66
 Secured Dementia Care Unit
 In Home: No Area: Capacity: Residents Served:
 Hospice
 Current Residents: 9
 Number of Residents Who:
 Receive Supplemental Security Income: 1 Are 60 Years of Age or Older: 66
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 1
 Have Mobility Need: 11 Have Physical Disability: 0

Inspections / Reviews

08/01/2023 Full
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 08/31/2023
 09/01/2023 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 09/21/2023
 Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 09/30/2023

Inspections / Reviews *(continued)*

09/22/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/21/2023

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

19 - Review Waiver

1. Requirements

2600.

19.e. The home shall notify the affected resident and designated person of the approval or denial of the waiver. A copy of the waiver request and the Department's written decision shall be posted in a conspicuous and public place within the home.

Description of Violation

The home has 2 current waivers. However, a copy of the waiver requests and the Department's written decisions are not posted in a conspicuous and public place within the home.

Plan of Correction

Accept () - 09/01/2023

DHS surveyor, [redacted] educated Executive Director on regulation 2600.19(e) on 8/2/23. The Executive Director removed the 2 current waivers posted in the Wellness office and reposted both waivers in the front lobby in a conspicuous and public area on 8/2/23. ED or designated person will post any future waivers acquired in the front lobby in a conspicuous and public area. Correction completed on 8/2/2023.

Licensee's Proposed Overall Completion Date: 08/30/2023

Implemented () - 09/22/2023

25b - Contract Signatures

2. Requirements

2600.

25.b. The contract shall be signed by the administrator or a designee, the resident and the payer, if different from the resident, and cosigned by the resident's designated person if any, if the resident agrees.

Description of Violation

The resident-home contract, dated [redacted] for resident #1 was not signed by the payor.

Plan of Correction

Accept () - 09/01/2023

DHS surveyor, [redacted] educated executive director on regulation 2600.25(b) on 8/2/23. Resident #1 is the payor along with his POA. Executive Director had the POA sign resident-home contract where his signature was missing on 8/3/2023. Executive director or designee will audit each resident contract with all admissions after resident-home contract completed to ensure that all signatures are obtained on admission date, on the required signature lines through November 30, 2023. Correction completed on 8/3/23.

Licensee's Proposed Overall Completion Date: 08/30/2023

Implemented () - 09/22/2023

132a - Monthly Fire Drill

3. Requirements

2600.

132.a. An unannounced fire drill shall be held at least once a month.

Description of Violation

An unannounced fire drill was not held during the months of October 2022 or November 2022.

Plan of Correction

Accept () - 09/01/2023

A documented verbal unannounced fire drill training was conducted with staff on Oct 31, 2022 and Nov 29, 2022

132a - Monthly Fire Drill (continued)

in place of a physical unannounced fire drill evacuation due to active COVID in the building. Executive director educated environmental services director on regulation 2600.132(a) on 8/2/2023. Executive director or designee will audit and initial monthly unannounced fire drill documentation through January 2024 to ensure that physical fire drill evacuations are completed.

Licensee's Proposed Overall Completion Date: 01/31/2024

Implemented (█ - 09/22/2023)

132e - Fire Drill Sleeping Hours**4. Requirements**

2600.

132.e. A fire drill shall be held during sleeping hours once every 6 months.

Description of Violation

The last fire drill conducted during sleeping hours was on 4/20/23 at 12:30am. The previous sleeping hours fire drill was conducted on 4/29/22 at 6:37am.

Plan of Correction

Accept (█ - 09/01/2023)

Sleeping hours range is not listed in the Pa Code Title 55. Chapter 2600 Personal Care Home regulation book but is in the Regulatory Compliance Guide. Fire Drill was documented on 6/28/2022 at 8:26 pm as a sleeping hours drill. On 8/2/23, DHS surveyor, █, educated executive director on regulation 2600.132(e) and did confirm that facilities can be cited for violations out of the RCG. Executive director or designee will audit and initial monthly unannounced fire drill documentation through January 2024 to ensure that fire drills are completed during the sleeping hours range of 11p-7am per the RCG are followed once every 6 months.

Licensee's Proposed Overall Completion Date: 01/31/2024

Implemented (█ - 09/22/2023)