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

August 17, 2026

[redacted]
JUNIPER VILLAGE AT BENSALEM OPERATIONS LLC
[redacted]

RE: JUNIPER VILLAGE AT BUCKS COUNTY SENIOR LIVING
3200 BENSALEM BOULEVARD
BENSALEM, PA, 19020
LICENSE/COC#: 14246

[redacted],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/02/2026 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 BUCKS COUNTY SENIOR LIVING* **License #**: *14246* **License Expiration**: *04/18/2027*

Address: *3200 BENSALEM BOULEVARD, BENSALEM, PA 19020*

County: *BUCKS* **Region**: *SOUTHEAST*

Administrator

Name: [redacted] **Phone**: [redacted] **Email**: [redacted]

Legal Entity

Name: *JUNIPER VILLAGE AT BENSALEM OPERATIONS LLC*

Address: [redacted]

Phone: [redacted] **Email**: [redacted]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *98* **Total Daily Staff**: *166* **Waking Staff**: *125*

Inspection Information

Type: *Partial* **Notice**: *Unannounced* **BHA Docket #**:

Reason: *Complaint* **Exit Conference Date**: *07/02/2026*

Inspection Dates and Department Representative

07/02/2026 On Site [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *60* **Residents Served**: *42*

Secured Dementia Care Unit

In Home: *Yes* **Area**: *First floor* **Capacity**: *21* **Residents Served**: *15*

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *0*

Are 60 Years of Age or Older: *42*

Diagnosed with Mental Illness: *2*

Diagnosed with Intellectual Disability: *1*

Have Mobility Need: *26*

Have Physical Disability: *0*

Inspections / Reviews

07/02/2026 - Partial

Lead Inspector: [redacted] **Follow Up Type**: *POC Submission* **Follow Up Date**: *08/06/2026*

07/28/2026 POC Submission

Submitted By: [redacted] **Date Submitted**: *08/14/2026*

Reviewer: [redacted] **Follow Up Type**: *POC Submission* **Follow Up Date**: *08/02/2026*

Inspections / Reviews *(continued)*

07/31/2026 POC Submission

Submitted By: [redacted] **Date Submitted:** *08/14/2026*

Reviewer: [redacted] **Follow Up Type:** *Document Submission* **Follow Up Date:** *08/14/2026*

08/17/2026 Document Submission

Submitted By: [redacted] **Date Submitted:** *08/14/2026*

Reviewer: [redacted] **Follow Up Type:** *Not Required*

184a - Resident's Meds Labeled

1. Requirements

2600.
184.a. The original container for prescription medications shall be labeled with a pharmacy label that includes the following:
1. The resident's name.
2. The name of the medication.
3. The date the prescription was issued.
4. The prescribed dosage and instructions for administration.
5. The name and title of the prescriber.

Description of Violation

The pharmacy label for resident [redacted] reads "give 3 tablets every 4 hours as needed"; However, the prescriber's current order states "give 2 tablets every 4 hours as needed".

Plan of Correction ***Accept [redacted] 07/31/2026)***

1. Medication violation corrected immediately on 7/2/206 by Director of Wellness by coordinating with pharmacy to obtain correct medication label matching order.
2. Director of Wellness to provide reeducation on violation to be provided to all nurses and medical technicians by 8/6/26 on verifying pharmacy labels match physician orders and reporting discrepancies.
3. Director of Wellness to review all resident medications labels against physician orders by 8/6/26.
4. Director of Wellness to review new orders against pharmacy labels for 1 month (8/1 - 8/31) to assure accuracy and compliance. Any deviation from physician orders to be corrected immediately.

Licensee's Proposed Overall Completion Date: *08/06/2026*

Implemented ([redacted] - 08/17/2026)

185a - Implement Storage Procedures

2. Requirements

2600.
185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

Resident [redacted] is prescribed [redacted] by mouth every 24 hours as needed, [redacted] - 10ml by mouth every 6 hours as needed for [redacted], [redacted] tablet - 1 tab by mouth every 6 hours as needed, and [redacted] supp rect. 1 supp rectally as needed for [redacted] day 4 no bowel movement as needed. On [redacted] at 3:30pm these medications were not available in the home.

Repeated Violation: [redacted] et al.

Plan of Correction ***Accept [redacted] - 07/31/2026)***

1. Missing medications were ordered by the Director of Wellness on 7/2/26 and made available immediately following inspection and made available on 7/3/26 following receipt from pharmacy.
2. Director of Wellness to reeducate all nurses and med techs on procedure for active medications, discontinuation of medications, and placing medications on hold by 8/6/2026.
3. Medication Cart/Availability Audit to be completed 3 times weekly for 1 month (8/1 - 8/31) then by nurses and med techs to assure accuracy and compliance. Director of Wellness to audit nursing a med techs by conducting audit

review weekly for 1 month, and then continual monitoring monthly for 2 months to assure compliance. Any deviation will be corrected immediately including further education, documentation, and disciplinary action as

185a Implement Storage Procedures *(continued)*

Licensee's Proposed Overall Completion Date: *08/06/2026*

Implemented [redacted] - 08/17/2026)

227a - Support Plan 30 Days

3. Requirements

2600.
227.a. A resident requiring personal care services shall have a written support plan developed and implemented within 30 days of admission to the home. The support plan shall be documented on the Department's support plan form.

Description of Violation

Resident[redacted] was admitted on[redacted]; however, the resident's initial support plan was missing the date the assessment was finalized, the behavioral and cognitive needs section, the home did not include medication needs section, sensory needs section, social needs section and summary needs section and assessor or the resident did not sign the support plan and therefore not complete.

Plan of Correction ***Accept[redacted] - 07/31/2026)***

1. Violation from previous administration and resident is now deceased. Deficient documentation cannot be retroactively corrected.
2. Personal Care Administrator to review all current resident support plans and confirm all areas of plan are completed and signatures have been obtained by 8/6/2026.
3. Support plan audit to be completed for 2 months (8/1 9/30) for any updated support plans to assure plans are completed and in compliance. Plans not found in compliance will be corrected immediately and reeducation provided.

Licensee's Proposed Overall Completion Date: *08/06/2026*

Implemented [redacted] - 08/17/2026)

227g -Support Plan Signatures

4. Requirements

2600.
227.g. Individuals who participate in the development of the support plan shall sign and date the support plan.

Description of Violation

Resident[redacted] participated in the development of[redacted] support plan on[redacted] However, the resident and the assessor did not sign the support plan.

Plan of Correction ***Accept[redacted] - 07/31/2026)***

1. Violation from previous administration and resident is now deceased. Deficient documentation cannot be retroactively corrected
2. Personal Care Administrator to review all current resident support plans and confirm resident or designee signature and assessor signature by 8/6/2026.
3. Support plan audit to be completed for 2 months (8/1 9/30) for any updated support plans to assure plans are completed and in compliance. Plans not found in compliance will be corrected immediately and reeducation provided.

Licensee's Proposed Overall Completion Date: *08/06/2026*

227g -Support Plan Signatures *(continued)*

Implemented [redacted] - 08/17/2026)