STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	35A004	A. BUILDING: ______ B. WING ______	C 05/09/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JUNIPER VILLAGE AT WILLIAMSTOWN, WELLSPRIN(	**1648 S. BLACK HORSE PIKE WILLIAMSTOWN, NJ 08094**

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 000	Initial Comments Initial Comments: TYPE OF SURVEY: Complaint COMPLAINT #: NJ00158614 and NJ00170860 CENSUS: 27 SAMPLE SIZE: 6 The facility is not in substantial compliance with all of the standards in the New Jersey Administrative Code 8:36, Standards for Licensure of Assisted Living Residences, Comprehensive Personal Care Homes and Assisted Living Programs. The facility must submit a plan of correction, including a completion date for each deficiency and ensure that the plan is implemented. Failure to correct deficiencies may result in enforcement action in accordance with provisions of New Jersey Administrative Code Title 8, Chapter 43E, Enforcement of Licensure Regulations.	A 000		
A 310	8:36-3.4(a)(1) Administration (a) The administrator or designee shall be responsible for, but not limited to, the following: 1. Ensuring the development, implementation, and enforcement of all policies and procedures, including resident rights;	A 310		

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE | TITLE | (X6) DATE 08/27/24

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A 310	Continued From page 1 This REQUIREMENT is not met as evidenced by: Complaint #: NJ00170860 Based on observation, interview, review of medical records, and pertinent facility documents, it was determined that the facility failed to ensure the implementation and enforcement of policies and procedures for Health Care Plans (HSP), General Service Plans (GSP), Skin Integrity, Abuse, Incident Reports, and Resident Rights for residents reviewed, Resident #1, #2, #3, #5 and #6. This deficient practice was evidenced by the following: 1.) On 4/9/24 at 11:19 a.m., the surveyor reviewed the closed medical record (MR) of Resident #1 who moved into the facility NJ ex order 26.4b1 of NJ ex order 26.4b1 with diagnoses which included NJ ex order 26.4b1 According to the Progress Note (PN), the resident NJ ex order 26.4b1 NJ ex order 26.4b1 and NJ ex order 26.4b1 NJ ex order 26.4b1. 2.) The surveyor also reviewed the closed MR of Resident #2, NJ ex order 26.4b1 of NJ ex order 26.4b1 with diagnoses which included NJ ex order 26.4b1 and NJ ex order 26.4b1 of NJ ex order 26.4b1 Resident #1 and Resident #2 NJ ex order 26.4b1 . Continued review of the residents' PN dated NJ ex order 26.4b1, written by a Certified Medication Aide (CMA), revealed on NJ ex order 26.4b1 that Resident #2 NJ ex order 26.4b1 Resident #1 NJ ex order 26.4b1	A 310		

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A 310	Continued From page 2	A 310		

hand down Resident #1's NJ Ex Ord. According to the PN, Resident #1 NJ ex order 26.4b1 #2's NJ ex orde NJ ex order 26.4b1. The incident report dated NJ ex order 26.4b completed by the above CMA, revealed Resident #1 told that staff that this was not the first time Resident #2 NJ ex order 26.4b1 NJ ex order 26.4b1. Continued review of the incident report revealed despite Resident #1 informing Resident #2 NJ ex order 26.4b1 Resident #2 NJ ex order 26.4b1.

On 4/11/24 at 8:47 a.m., the surveyor interviewed the Regional Executive Director (RED) who stated that she interviewed Resident #1 following the NJ ex order 26.4b on NJ ex order 26.4b. The RED stated that during interview with Resident #1, the resident stated that he/she NJ ex order 26.4b1 from Resident #2 NJ ex order 26.4b1 Resident #2. The RED explained that she informed Resident #1 and the residents' family that the facility NJ ex order 26.4b1

On 4/17/24 at 11:42 a.m., the surveyor interviewed the Regional Director of Wellness (RDW) regarding updating Resident #1 and Resident #2's service plan following the NJ ex order 26.4b on NJ ex order 26.4b NJ ex order 26.4b1. The RDW confirmed that both residents' Service Plans (SP) were not updated until NJ ex order 26.4b when she updated Resident #2's SP only.

The surveyor reviewed the facility policies and procedures which revealed the following:

1. "Abuse" policy indicated, " ... a. Protection from

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Continued From page 3

further abuse can take place by: ... 3. Separation of resident from resident. b. The resident will be provided with a interview to determine how and what situations provide comfort and a feeling of well-being. ... Reporting 1. Alleged and substantial incidents, complete investigation reports, and if necessary, corrective actions taken, will be reported to ... State Licensing Authority, ..."
2. "Service Plan" policy indicated, "Residents will have a service plan developed at move-in and with changes of condition through Point Click Care. ..."
3. "Health Care Plan (NJ Only) policy " indicated, "A Health Care Plan will be initiated for short team health services." ... 8. Residents will be reevaluated for any significant change of condition ..."
4. "Incident Reports" policy indicated, " ... 5. The Executive Director will notify appropriate State agency within the required State regulations. ...
7. If an event involves abuse or suspected abuse of any kind, a complete report as required in the State and/or federal regulations ... 9. Incident/Accident Reports will be reviewed by the Executive Director with 72 hours of an incident. ..."

Refer to A0389 8:36-4.1(a)(16)

Complaint#: NJ00158614

The facility's failure to ensure the implementation and enforcement of the policies and procedures for HSP, GSP, Skin Integrity and Resident Rights were updated for residents who had changes in NJ Ex Order 26.4b1 put residents at risk for NJ Ex Order 26.4b1 and was identified as Imminent Danger (ID). This ID was reported to the Licensed Assisted Living

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A 310	Continued From page 4 Administrator on 4/9/2024 at 3:00 p.m. The Administrator was presented with the ID template that included information about the above issues. 3.) On 4/9/24 at 11:30 a.m., surveyor review of Resident #3's electronic medical record (EMR) revealed a move in date of NJ ex order 26.4b, with diagnoses that included NJ ex order 26.4b1 . The surveyor reviewed Resident #3's EMR progress note (PN) written by a facility Licensed Practical Nurse, (LPN #1), dated NJ ex order 26. which revealed that Resident #3 NJ ex order 26.4b1 Surveyor review of Electronic Medication Administration Record (EMAR), revealed an initial order dated NJ ex order 26 for NJ ex order 26.4b1 , applied to NJ Ex Order 26 topically NJ ex order 26.4b1 Surveyor review of Resident #3's EMR identified there was no Health Service Plan (HSP) in place for the NJ ex order 26.4b1 to reflect the services provided which additionally NJ ex order 26.4b1 There was no evidence of a timely evaluation of the effectiveness of the treatment by the Registered Nurse (RN). On 4/9/24 at 12:00 p.m., the surveyor interviewed the facility Executive Director (ED) who stated that the facility utilized the document titled, "Resident Evaluation and Personal Services (REPS)," as the General Service Plan (GSP) and the resident assessment. The surveyor reviewed a REPS dated NJ ex order 26.4b1 , that indicated Resident #3 NJ ex order 26.4b1	A 310		

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A 310	Continued From page 5 The surveyor reviewed an additional REPS dated NJ ex order 26.4b1, section 16 titled NJ ex order 26.4b1 that indicated Resident #3 NJ ex order 26.4b1 and, part 4a., NJ ex order 26.4b1" that showed no indication of goals or interventions for NJ ex order 26.4b1. The surveyor observed a NJ ex order 26.4b1 for Resident #3 that was dated NJ ex order 26.4b1, by LPN #1 and indicated Resident #3 NJ ex order 26.4b1. 4.) On 4/9/24 at 11:30 a.m., the surveyor reviewed the closed EMR of Resident #5 who moved into the facility on NJ ex order 26.4b1, had diagnoses that included NJ ex order 26.4b1 and NJ ex order 26.4b1, and NJ ex order 26.4b1. Surveyor review of the EMR PN revealed a PN dated NJ ex order 26.4b1 that indicated Resident #5 had NJ ex order 26.4b1, NJ ex order Surveyor review of Resident #5's EMR physician orders revealed the following orders: 5/23/22: NJ ex order 26.4b1 5/23/22: NJ ex order 26.4b1 9/8/22 NJ ex order 26.4b1	A 310		

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A 310	Continued From page 6 NJ ex order 26.4b1 NJ ex order 26.4b1 NJ ex order 26.4b1 . NJ ex order 26.4b1 The surveyor observed a HSP documented by the facility RDW, dated NJ ex order 26.4b, that indicated Resident #5 had NJ ex order 26.4b1. Further review of the EMR identified there were no further updates to the HSP regarding Resident #5's NJ ex order 26.4b1. The surveyor reviewed the REPS, Section 16 titled, "Skin," written by the facility RDW that was dated NJ ex order 26.4b and indicated that Resident #5 NJ ex order 26.4b1 There were no check marks to indicate that any preventative measures including NJ Ex Order 26.4b1 were utilized. 5.) On 4/9/24 at 1:00 p.m., the surveyor reviewed the closed EMR of Resident #6 who moved into the facility on NJ ex order 26.4b, had diagnoses that	A 310		

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A 310	Continued From page 7 NJ ex order 26.4b1 The surveyor observed a PN dated NJ ex order 26. written by a facility Certified Medication Associate (CMA #1) that indicated Resident #6 NJ ex order 26.4b1 ". Surveyor review of Resident #6's EMAR revealed the following prescriber orders: NJ ex order 26: NJ ex order 26.4b1 NJ ex order 26.4b1 NJ ex order 26.4b1 On 4/9/24, the surveyor reviewed the EMR which showed no indication that an initial Health Service Plan was developed at the time the NJ ex order 26.4b1 was identified, what interventions were put in place or whether the interventions were being evaluated by the facility RN for effectiveness. The surveyor reviewed the REPS for Resident #6, documented by the facility DOW, dated NJ ex order 26 Section 16, titled, NJ ex order 26 which revealed that there were no updates regarding specifics of the NJ ex order 26.4b1 goals or preventative measures for maintenance of NJ ex order 26.4b1 for Resident #6. Additionally, under Section 16. "...5.Does the resident require preventative measures and devices such as NJ Ex Order 26.4b1 ?" The surveyor observed that "no" was documented. On 4/15/24 at 3:00 p.m., the surveyor reviewed an undated policy titled, "Health Care Plan" that indicated the following: under "Purpose: To assist	A 310		

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in maintaining quality of care." Under "Procedure: 1. A Health/Service Care Plan will be developed for residents who exhibit health care needs....2. The plan will be utilized until the health/service care need is resolved. 3. Document in the medical record responses. 4. The initiation of a temporary health/service care plan will be developed by the Wellness Director or Wellness Nurse, if needed. 5. When the initial evaluation and service plan indicates that the resident requires health services, the Wellness Director or Wellness Nurse will note health/services in the health/service care plan within 14 days of admission or with changes in condition. Based on the health/service care assessment, a written health/service plan will be developed...6. The health service plan will include, but not limited to: a. Orders for treatment or services, medications, and diet, b. Resident needs...c. The specific goals of treatment of services, if appropriate. d. Time intervals at which the resident response to treatment will be reviewed. e. Measure to be used to assess the effects of treatment. 7. The resident's care plan will be reassessed by the Wellness Director or Wellness Nurse and revised quarterly based on the resident's response to care provided. Documentation in the resident's file will indicate review and any necessary revisions of the resident's health/service care plan. 8. Residents will be reevaluated for any significant change in condition and/or readmission from the hospital...."

The surveyor reviewed an undated policy titled, "Service Plan" that indicated the following: under "Purpose: To assist residents in maintaining independence, individuality, dignity, and privacy through a written plan of care." Under "Procedure: 1. The Service Plan is completed by the Director of Wellness or Wellness Nurse within

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A 310	Continued From page 9 PointClickCare (PCC) [a computerized medical record system]...4. The Resident Service Plan will be updated within PCC with significant change of condition and/or readmission to the hospital...." The surveyor reviewed an undated policy titled "Skin Integrity" that indicated the following: under "Purpose: To assist in maintaining the well-being of the resident." Under "Procedure: 1. Residents who exhibit risk factors for impaired skin integrity are evaluated/assessed upon move-in, quarterly and with a change of condition as indicated. 2. The skin integrity form is utilized, documented in the EHR. 3. Based upon evaluation/assessment, interventions, and outcomes are documented in the Resident Service Plan and Health Care Plans." On 5/9/24, the surveyor completed a revisit survey and verified the Removal Plan was implemented.	A 310		
A 357	8:36-4.1(a)(2) Resident Rights (a) Each assisted living provider will post and distribute a statement of resident rights for all residents of assisted living residences, comprehensive personal care homes, and assisted living programs. Each resident is entitled to the following rights: 2. The right to receive a level of care and services that addresses the resident's changing physical and psychosocial status;	A 357		

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This REQUIREMENT is not met as evidenced by:
Complaint#: NJ00158614, NJ00170860

Based on interview, and review of medical records, it was determined that the facility failed to ensure that the resident's changing physical level of care for NJ Ex Order 26.4b1, was followed for 3 of 6 residents, Resident #'s 3, 5 and 6. This deficient practice was evidenced by the following:

The facility's failure to ensure that a resident's right to receive the level of care and services for changes in NJ ex order 26.4b1 put other residents at risk for skin issues and an Imminent Danger (ID) was identified. This ID was reported to the Licensed Assisted Living Administrator on NJ ex order 26.4b1 at 3:00 p.m. The Administrator was presented with the ID template that included information about this issue.

1.) On 4/9/24 at 11:30 a.m., surveyor review of Resident #3's electronic medical record (EMR) which revealed a move in date of NJ ex order 26.4b1, with diagnoses that included NJ ex order 26.4b1.

Surveyor review of Resident #3's EMR progress note (PN) written by a facility Licensed Practical Nurse, (LPN #1), dated NJ ex order 26.4b1, revealed that Resident #3 NJ ex order 26.4b1 Surveyor review of the EMR, Medication Administration Record (MAR), revealed an initial order dated NJ ex order 26.4b1 for NJ ex order 26.4b1 NJ ex order 26.4b1.

Surveyor review of Resident #3's EMR identified

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A 357	Continued From page 11 there was no Health Service Plan (HSP) in place for the NJ ex order 26.4b1 to reflect the services provided which additionally NJ ex order 26.4b1 NJ ex order 26.4b1 There was no evidence of a timely evaluation of the effectiveness of the treatment by the Registered Nurse (RN). On 4/9/24 at 12:00 p.m., the surveyor interviewed the facility Executive Director (ED) who stated that the facility utilized the document titled, "Resident Evaluation and Personal Services (REPS)," as the General Service Plan (GSP) and the resident assessment. The surveyor reviewed a REPS dated NJ ex order 26.4b1, that indicated Resident #3 NJ ex order 26.4b1 The surveyor reviewed an additional REPS dated NJ ex order 26, section 16 titled, NJ ex order 26 part 4, that indicated Resident #3 NJ ex order 26.4b1 and, part 4a., NJ ex order 26.4b1 that NJ ex order 26.4b1 The surveyor observed a NJ ex order 26.4b1 for Resident #3 that was dated 1/7/24, by LPN #1 and indicated Resident #3 NJ ex order 26.4b1 . 2.) On 4/9/24 at 11:30 a.m., the surveyor reviewed the closed EMR of Resident #5 who moved into the facility on NJ ex order 26.4b1, had NJ ex order 26.4b1 Surveyor review of the EMR PN revealed a PN dated NJ ex order 26.4, that indicated Resident #5 had NJ ex order 26.4b1 , a NJ ex order 26.4b1	A 357		

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A 357	Continued From page 12 NJ ex order 26.4b1 NJ ex order 26.4b1 Surveyor review of Resident #5's EMR physician orders revealed the following orders: NJ ex order 26.4b1 NJ ex order 26.4b1 NJ ex order 26.4b1 NJ ex order 26.4b1 NJ ex order 26.4b1 NJ ex order 26.4b1 . The surveyor observed a HSP documented by the facility RDW, dated NJ ex order 26.4b1, that indicated Resident #5 had NJ ex order 26.4b1 Further review of the EMR	A 357		

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A 357	Continued From page 13 identified there were no further updates to the HSP regarding Resident #5's NJ ex order 26.4b1 NJ ex order 26.4b1 of the treatment plan for effectiveness. The surveyor reviewed the REPS, Section 16 titled, "Skin," written by the facility RDW that was dated NJ ex order 26.4b1 and indicated that Resident #5 NJ ex order 26.4b1 There were no check marks to indicate that any preventative measures including NJ ex order 26.4b1 3.) On 4/9/24 at 1:00 p.m., the surveyor reviewed the closed EMR of Resident #6 who moved into the facility on NJ ex order 26.4b1, had diagnoses that NJ ex order 26.4b1 and NJ ex order The surveyor observed a PN dated NJ ex order 26. written by a facility Certified Medication Associate (CMA #1) that indicated Resident #6 NJ ex order 26.4b1 Surveyor review of Resident #6's EMAR revealed the following prescriber orders: 9/8/22: NJ ex order 26.4b1 NJ ex order 26.4b1 On 4/9/24, the surveyor reviewed the EMR which showed no indication that an initial Health Service Plan was developed at the time the NJ Ex Order 26.4b1 was identified, what interventions were put in place or whether the interventions were being evaluated by the facility RN for effectiveness.	A 357		

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A 357	Continued From page 14 The surveyor reviewed the REPS for Resident #6, documented by the facility DOW, dated NJ ex order 26 Section 16, titled, "Skin" which revealed that there were no updates regarding specifics of the NJ ex order 26.4b1, goals or preventative measures for maintenance of NJ ex order 26.4b1 for Resident #6. Additionally, under Section 16. "...5.Does the resident require preventative measures and devices such as NJ Ex Order 26.4b1 ?" The surveyor observed that NJ ex ord was documented. On 4/15/24 at 3:00 p.m., the surveyor reviewed an undated policy titled, "Health Care Plan" that indicated the following: under "Purpose: To assist in maintaining quality of care." Under "Procedure: 1. A Health/Service Care Plan will be developed for residents who exhibit health care needs....2. The plan will be utilized until the health/service care need is resolved. 3. Document in the medical record responses. 4. The initiation of a temporary health/service care plan will be developed by the Wellness Director or Wellness Nurse, if needed. 5. When the initial evaluation and service plan indicates that the resident requires health services, the Wellness Director or Wellness Nurse will note health/services in the health/service care plan within 14 days of admission or with changes in condition. Based on the health/service care assessment, a written health/service plan will be developed...6. The health service plan will include, but not limited to: a. Orders for treatment or services, medications, and diet, b. Resident needs...c. The specific goals of treatment of services, if appropriate. d. Time intervals at which the resident response to treatment will be	A 357		

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A 357	Continued From page 15	A 357		

reviewed. e. Measure to be used to assess the effects of treatment. 7. The resident's care plan will be reassessed by the Wellness Director or Wellness Nurse and revised quarterly based on the resident's response to care provided. Documentation in the resident's file will indicate review and any necessary revisions of the resident's health/service care plan. 8. Residents will be reevaluated for any significant change in condition and/or readmission from the hospital...."

The surveyor reviewed an undated policy titled, "Service Plan" that indicated the following: under "Purpose: To assist residents in maintaining independence, individuality, dignity, and privacy through a written plan of care." Under "Procedure: 1. The Service Plan is completed by the Director of Wellness or Wellness Nurse within PointClickCare (PCC) [a computerized medical record system]...4. The Resident Service Plan will be updated within PCC with significant change of condition and/or readmission to the hospital...."

The surveyor reviewed an undated policy titled "Skin Integrity" that indicated the following: under "Purpose: To assist in maintaining the well-being of the resident." Under "Procedure:
1. Residents who exhibit risk factors for impaired skin integrity are evaluated/assessed upon move-in, quarterly and with a change of condition as indicated. 2. The skin integrity form is utilized, documented in the EHR. 3. Based upon evaluation/assessment, interventions, and outcomes are documented in the Resident Service Plan and Health Care Plans."

On 5/9/24, the surveyor completed a revisit survey and verified the Removal Plan was implemented.

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A 389	Continued From page 16	A 389		
A 389	8:36-4.1(a)(16) Resident Rights (a) Each assisted living provider will post and distribute a statement of resident rights for all residents of assisted living residences, comprehensive personal care homes, and assisted living programs. Each resident is entitled to the following rights: 16. The right to be free from physical and mental abuse and/or neglect; This REQUIREMENT is not met as evidenced by: Complaint #: NJ00170860 Based on interview and closed medical record review it was determined that the facility failed to ensure each resident's right to be free from NJ Ex Order 26 was enforced when 2 of 6 residents reviewed for NJ Ex Order 2 experienced NJ Ex Order 26.4b1 Resident #1 and Resident #2. This deficient practice was evidenced by the following: On NJ Ex Order 26.4 at 5:50 p.m., the New Jersey Department of Health (NJDOH) received a Facility Reportable Event (FRE), a document used by healthcare facilities to report incidents to the NJDOH. The report included a document titled, "Incident date: NJ ex order 26.4b1 which revealed a timeline of events that showed Resident #1 NJ ex Resident #4 at the dining room table. Then, Resident #1 NJ ex order 26.4b1 Resident #2 and then NJ ex	A 389		

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A 389	Continued From page 17 Resident #3. Resident #4 NJ ex order 26.4b1 NJ ex order 26.4b1 NJ ex order 26.4b1 . 1.) On 4/9/24 at 11:19 a.m., the surveyor reviewed the closed medical record (MR) of Resident #1 who moved into the facility NJ ex order 26.4 of NJ ex order with diagnoses which included NJ ex order 26.4b1 NJ ex order 26.4b1 . According to the Progress Note (PN) dated NJ ex order 26.4, the resident NJ ex order 26.4b1 after Resident #1 NJ ex order 26.4b1 which included Resident #2 on NJ ex order 26.4 and NJ ex NJ ex order 26.4b1 The surveyor reviewed Resident #1's PN dated NJ ex order 26.4 written by a Certified Medication Aide (CMA) which revealed, "... [Resident #1] NJ ex order 26.4b1 ... [Resident #2] this NJ ex order 26.4b1 At 12:25 p.m. the surveyor interviewed the above CMA, who stated that on NJ ex order 26.4 while Resident #2 was coming out to breakfast she noticed NJ ex order 26.4b1 Resident #2's NJ ex order 26.4b1. The CMA continued to state that when she inquired how Resident #2 NJ ex order 26.4b1, the resident laughed and stated, NJ ex order 26 Resident #1 overhead and replied and yelled, "NJ ex order 26.4b1 NJ ex order 26.4b1 after Resident #2 NJ ex order 26.4b1 The CMA stated that she notified the residents' Physician, Regional Director of Wellness (RDW) and the Regional Executive Director (RED) and NJ ex ord On 4/10/24 at 2:30 p.m., the surveyor interviewed the RDW who stated that she interviewed	A 389		

New Jersey Department of Health

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A 389	Continued From page 18	A 389		

Resident #2 after the incident, as well as evaluated the NJ ex order 26.4b1. The RDW stated that during the interview, Resident #2 insisted that Resident #1 NJ ex order 26.4b1 with Resident #1. NJ ex order 26.4b1 Resident #1 and Resident #2. NJ ex order 26.4b1 . The RDW NJ ex order 26.4b1

On 4/11/24 at 8:47 a.m., the surveyor also interviewed the RED who stated that she interviewed Resident #1 following the NJ ex order 26.4b1 on NJ ex order 26.4b1. The RED stated that during interview with Resident #1, the resident stated that he/she would like to continue to reside in the same apartment with Resident #2 NJ ex order 26.4b1 from Resident #2 NJ ex order 26.4b1

The RED stated she informed all parties the NJ ex order Resident #1 and Resident #2 but NJ ex order and NJ ex order 26.4b1 During continued interview, the RED explained that she did not believe the acts of Resident #1 or Resident #2 NJ ex order 26.4b1 , NJ ex order 26.4b1 "

2.) On 4/9/24 at 12:03 p.m., the surveyor reviewed the closed electronic (MR) of Resident #2, who moved into the facility in NJ ex order 26.4b1 with diagnosis NJ ex order 26.4b1 in NJ ex order 26.4b1.

The PN dated NJ ex order 26.4b1 written by the RDW

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A 389	Continued From page 19 revealed, NJ ex order 26.4b1 . NJ ex order 26.4b1 . NJ ex order 26.4b1 Resident states NJ ex order 26.4b1 . NJ ex order 26.4b1 Contacted daughter who provided permission for ... [Physician] to assess during clinic today. Note-resident is on an NJ ex order 26.4b1 and we will NJ ex order 26.4b1 ." The facility failed to protect Resident #1 from NJ ex order 26.4b1 and Resident #2 NJ ex order 26.4b1	A 389		
A 565	8:36-5.10(a)(3) General Requirements (a) The facility shall notify the Division of Health Facility Survey and Field Operations immediately by telephone at (609) 633-9034 (609) 392-2020 if after business hours, followed within 72 hours by written confirmation, of the following: 3. Any suspected cases of resident abuse or exploitation which have been reported to the State Long-Term Care Ombudsman. This REQUIREMENT is not met as evidenced by:	A 565		

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A 565	Continued From page 20 Complaint#: NJ00170860 Based on interview and record review it was determined that the facility failed to report an allegation of resident to resident NJ ex order 26.4b1 immediately to the New Jersey Department of Health (NJDOH) for 1 of 6 residents reviewed for NJ Ex Order 2, Resident #1. This deficient practice was evidenced by the following: On 4/9/24 at 11:19 a.m., the surveyor reviewed the closed medical record (MR) of Resident #1, who moved into the facility NJ ex order 26.4b1 with diagnoses which included NJ ex order 26.4b1 NJ ex order 26.4b1. Continued surveyor review of the resident's MR revealed that Resident #2 NJ ex order 26.4b Resident #1 NJ ex order 26.4b1 n Resident #1's NJ ex orde. Both Resident #1 and #2 NJ ex order 26.4b1. Continued review of Resident #1's MR revealed an incident report prepared by one of the facility's Certified Medication Aide (CMA) in which Resident #1 notified the CMA of Resident #2's NJ ex order 26.4b1. On 4/10/24 at 2:30 p.m., the surveyor interviewed the Regional Director of Wellness (RDW) who stated she was the acting Director of Wellness the time of the incident which occurred on NJ ex order 26.4b. The RDW stated that she completed the post incident investigation, however, she did not notify the Department of Health of the alleged sexual abuse. On 4/11/24 at 8:47 a.m., the surveyor interviewed the Regional Executive Director (RED) who stated she was aware of the incident on NJ ex order 26.4b1 as she interviewed Resident #1 after the NJ ex order 26.4b. The RED explained that she did not	A 565		

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A 565	Continued From page 21 believe that what occurred was NJ ex order 26 as her definition of abuse is NJ ex order 26.4b1 and she did not believe either resident NJ ex order 26.4b1 The facility failed to notify the DOH of the alleged NJ Ex Order 26.4b1 that occurred on NJ ex order 26.4b between Resident #1 and Resident #2 NJ ex order 26.4b1 .	A 565		
A 745	8:36-7.2(f) Resident Assessments and Care Plans (f) The initial health care assessment shall be documented by the registered nurse and shall be updated as required, in accordance with the rules of this chapter and professional standards of practice. This REQUIREMENT is not met as evidenced by: Complaint #: NJ00158614 Based on observation, staff interview and review of medical records, it was determined that the facility failed to ensure that the intial health care assessment was updated as required, in accordance with professional standards of practice for 3 of 6 residents sampled Resident #'s 3, 5 and 6. This deficient practice was evidenced by: The facility's failure to ensure a resident's initial health care assessment was updated for residents who had NJ ex order 26.4b1 put other residents at risk for NJ ex order 26.4b1 in an Imminent Danger (ID). This ID was reported to	A 745		

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A 745	Continued From page 22 the Licensed Assisted Living Administrator on NJ ex order 26.4b1 at 3:00 p.m. The Administrator was presented with the ID template that included information about the above issues. 1.) On 4/9/24 at 11:30 a.m., surveyor review of Resident #3's electronic medical record (EMR) revealed a move in date of NJ ex order 26.4b1, with diagnoses that NJ ex order 26.4b1 The surveyor reviewed Resident #3's EMR progress note (PN) written by a facility Licensed Practical Nurse, (LPN #1), dated NJ ex order 26, which revealed that Resident #3 was referred to NJ ex order 26 NJ ex order 26.4b1 Surveyor review of Electronic Medication Administration Record (EMAR), revealed an initial order dated NJ ex order 26 for NJ ex order 26.4b1, NJ ex order 26.4b1 NJ ex order 26.4b1 . Surveyor review of Resident #3's EMR identified there was no Health Service Plan (HSP) in place for the NJ Ex Order 26.4b1 to reflect the services provided which additionally included NJ Ex Order 26.4b1 interventions. There was no evidence of a timely evaluation of the effectiveness of the treatment by the Registered Nurse (RN). On 4/9/24 at 12:00 p.m., the surveyor interviewed the facility Executive Director (ED) who stated that the facility utilized the document titled, "Resident Evaluation and Personal Services (REPS)," as the General Service Plan (GSP) and the resident assessment. The surveyor reviewed a REPS dated NJ ex order 26.4b1, that indicated Resident #3 NJ ex order 26.4b1	A 745		

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NJ Ex Order 26.4b1 .

The surveyor reviewed an additional REPS dated NJ ex order 26, section 16 titled, "Skin," part 4, that indicated Resident #3 NJ ex order 26.4b1 ; and, part 4a., "NJ ex order 26.4b1 that showed no indication of goals or interventions for NJ ex order 26.4b1

The surveyor observed a NJ Ex Order 26.4b1 Evaluation for Resident #3 that was dated NJ ex order 26, by LPN #1 and indicated Resident #3 NJ ex order 26.4b1, and noted NJ ex order 26.4b1

2.) On 4/9/24 at 11:30 a.m., the surveyor reviewed the closed EMR of Resident #5 who moved into the facility on NJ ex order 26.4b1, had diagnoses that included NJ ex order 26.4b1 and NJ ex order 26.4b1, and NJ ex order 26.4b1
Surveyor review of the EMR PN revealed a PN dated NJ ex order 26.4b, that indicated Resident #5 had NJ ex order 26.4b1, a NJ ex order 26.4b1 and a NJ ex order 26.4b1

Surveyor review of Resident #5's EMR physician orders revealed the following orders:

NJ ex order 26.4b1
NJ ex order 26.4b1

NJ ex order 26.4b1

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A 745	Continued From page 24 healed. NJ ex order 26.4b1 NJ ex order 26.4b1 NJ ex order 26.4b1 . NJ ex order 26.4b1 . The surveyor observed a HSP documented by the facility RDW, dated NJ ex order 26.4b1, that indicated Resident #5 had NJ ex order 26.4b1 to NJ ex order 26.4b1 NJ ex order 26.4b1". Further review of the EMR identified there were no further updates to the HSP regarding Resident #5's NJ ex order 26.4b1 NJ ex order 26.4b1 The surveyor reviewed the REPS, Section 16 titled, NJ ex order 26 written by the facility RDW that was dated NJ ex order 26.4b and indicated that Resident #5 required no assistance with NJ ex order 26.4b1, NJ ex order 26.4b1. There were no check marks to indicate that any preventative measures including NJ Ex Order 26.4b1 were utilized. 3.) On 4/9/24 at 1:00 p.m., the surveyor reviewed	A 745		

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A 745	Continued From page 25 the closed EMR of Resident #6 who moved into the facility on NJ ex order 26.4b, had diagnoses that included NJ ex order 26.4b1 and NJ ex order The surveyor observed a PN dated NJ ex order 26 written by a facility Certified Medication Associate (CMA #1) that indicated Resident #6 NJ ex order 26.4b1 Surveyor review of Resident #6's EMAR revealed the following prescriber orders: NJ ex order 26.4b1 On 4/9/24, the surveyor reviewed the EMR which showed no indication that an initial Health Service Plan was developed at the time the NJ ex order 26.4b1 was identified, what interventions were put in place or whether the interventions were being evaluated by the facility RN for effectiveness. The surveyor reviewed the REPS for Resident #6, documented by the facility DOW, dated NJ ex order 26 Section 16, titled, NJ ex order 26 which revealed that there were no updates regarding specifics of the NJ ex order 26.4b1, goals or preventative measures for maintenance of NJ ex order 26.4b1 for Resident #6. Additionally, under Section 16. "...5.Does the resident require preventative measures and devices such as NJ Ex Order 26.4b1 ?" The surveyor observed that NJ ex ord was documented. On 5/9/24, the surveyor completed a revisit	A 745		

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A 745	Continued From page 26 survey and verified the Removal Plan was implemented.	A 745		
A 749	8:36-7.3(a) Resident Assessments and Care Plans (a) The resident general service plan shall be reviewed and, if necessary, revised semi-annually, and more frequently as needed based upon the resident's response to the care provided and any changes in the resident's physical or cognitive status. This REQUIREMENT is not met as evidenced by: Complaint#: NJ00158614 Based on staff interview, review of medical records and pertinent facility documents, it was determined that the facility failed to ensure that the residents' General Service Plan (GSP) was updated based upon the individual resident's needs, response to the care provided, and any changes in the resident's physical status, with regard to NJ Ex Order 26.4b1, for 3 of 6 residents reviewed, Resident #'s 3, 5 and 6. The deficient practice was evidenced by the following: The facility's failure to ensure that a resident's GSP was updated for residents who had changes in skin integrity put other residents at NJ ex order 26.4b1 NJ ex order 26.4b1 NJ ex order 26.4b1. This ID was reported to the Licensed Assisted Living Administrator on NJ ex order 26.4b1 at 3:00 p.m. The Administrator was presented with the ID template	A 749		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	35A004	A. BUILDING: ______ B. WING ______	C 05/09/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JUNIPER VILLAGE AT WILLIAMSTOWN, WELLSPRIN(	1648 S. BLACK HORSE PIKE WILLIAMSTOWN, NJ 08094

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 749	Continued From page 27 that included information about the above issues. 1.) On 4/9/24 at 11:30 a.m., surveyor review of Resident #3's electronic medical record (EMR) revealed a move in date of NJ ex order 26.4b1, with diagnoses that NJ ex order 26.4b1 . The surveyor reviewed Resident #3's EMR progress note (PN) written by a facility Licensed Practical Nurse, (LPN #1), dated NJ ex order 26.4b1, which revealed that Resident #3 NJ ex order 26.4b1 NJ ex order 26.4b1 Surveyor review of Electronic Medication Administration Record (EMAR), revealed an initial order dated NJ ex order 26.4b1 for NJ ex order 26.4b1 Surveyor review of Resident #3's EMR identified there was no Health Service Plan (HSP) in place for the NJ ex order 26.4b1 to reflect the services provided which additionally included NJ ex order 26.4b1 interventions. There was no evidence of a timely evaluation of the effectiveness of the treatment by the Registered Nurse (RN). On 4/9/24 at 12:00 p.m., the surveyor interviewed the facility Executive Director (ED) who stated that the facility utilized the document titled, "Resident Evaluation and Personal Services (REPS)," as the General Service Plan (GSP) and the resident assessment. The surveyor reviewed a REPS dated NJ ex order 26.4b1, that indicated Resident #3 NJ ex order 26.4b1	A 749		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JUNIPER VILLAGE AT WILLIAMSTOWN, WELLSPRIN(	1648 S. BLACK HORSE PIKE WILLIAMSTOWN, NJ 08094

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 749	Continued From page 28 The surveyor reviewed an additional REPS dated NJ ex order 26.4b1, section 16 titled, NJ ex order 26.4b1" part 4, that indicated Resident #3 required NJ ex order 26.4b1 NJ ex order 26.4b1 and, part 4a., NJ ex order 26.4b1" that showed no indication of goals or interventions for NJ ex order 26.4b1 The surveyor observed a NJ Ex Order 26.4b1 Evaluation for Resident #3 that was dated NJ ex order 26.4b1, by LPN #1 and indicated Resident #3 NJ ex order 26.4b1 2.) On 4/9/24 at 11:30 a.m., the surveyor reviewed the closed EMR of Resident #5 who moved into the facility on NJ ex order 26.4b1 had diagnoses that included NJ ex order 26.4b1 NJ ex order 26.4b1, and NJ ex order 26.4b1. Surveyor review of the EMR PN revealed a PN dated NJ ex order 26.4b1, that indicated Resident #5 NJ ex order 26.4b1 a NJ ex order 26.4b1 NJ ex order 26.4b1 Surveyor review of Resident #5's EMR physician orders revealed the following orders: NJ ex order 26.4b1 NJ ex order 26.4b1 NJ ex order 26.4b1	A 749		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JUNIPER VILLAGE AT WILLIAMSTOWN, WELLSPRIN(	1648 S. BLACK HORSE PIKE WILLIAMSTOWN, NJ 08094

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 749	Continued From page 29 NJ ex order 26.4b1 . NJ ex order 26.4b1 NJ ex order 26.4b1 The surveyor observed a HSP documented by the facility RDW, dated NJ ex order 26.4b1, that indicated Resident #5 had NJ ex order 26.4b1 NJ ex order 26.4b1 Further review of the EMR identified there were no further updates to the HSP regarding Resident #5's NJ ex order 26.4b1 NJ ex order 26.4b1 The surveyor reviewed the REPS, Section 16 titled, "Skin," written by the facility RDW that was dated NJ ex order 26.4b1 and indicated that Resident #5 NJ ex order 26.4b1 NJ ex order 26.4b1 NJ ex order 26.4b1. There were no check marks to indicate that any preventative measures including NJ Ex Order 26.4b1 were utilized. 3.) On 4/9/24 at 1:00 p.m., the surveyor reviewed the closed EMR of Resident #6 who moved into the facility on NJ ex order 26.4b1 had diagnoses that	A 749		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JUNIPER VILLAGE AT WILLIAMSTOWN, WELLSPRIN(	1648 S. BLACK HORSE PIKE WILLIAMSTOWN, NJ 08094

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 749	Continued From page 30 included NJ ex order 26.4b1 NJ ex order 26.4b1 The surveyor observed a PN dated NJ ex order 26 written by a facility Certified Medication Associate (CMA #1) that indicated Resident #6 NJ ex order 26.4b1 Surveyor review of Resident #6's EMAR revealed the following prescriber orders: NJ ex order 26.4b1 NJ ex order 26.4b1 NJ ex order 26.4b1 On 4/9/24, the surveyor reviewed the EMR which showed no indication that an initial Health Service Plan was developed at the time the NJ ex order 26.4b1 NJ ex order 26.4b1, what interventions were put in place or whether the interventions were being evaluated by the facility RN for effectiveness. The surveyor reviewed the REPS for Resident #6, documented by the facility DOW, dated NJ ex order 26. Section 16, titled, NJ ex order" which revealed that there were no updates regarding specifics of the NJ ex order 26.4b1, goals or preventative measures for maintenance of NJ ex order 26.4b1 for Resident #6. Additionally, under Section 16. "...5.Does the resident require preventative measures and devices such as NJ Ex Order 26.4b1 ?" The surveyor observed that NJ ex orc was documented. On 5/9/24, the surveyor completed a revisit survey and verified the NJ ex order 26.4b1 was implemented.	A 749		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	35A004	A. BUILDING: ______ B. WING ______	C 05/09/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JUNIPER VILLAGE AT WILLIAMSTOWN, WELLSPRIN(	1648 S. BLACK HORSE PIKE WILLIAMSTOWN, NJ 08094

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 751	8:36-7.3(b) Resident Assessments and Care Plans (b) The resident health service plan shall be reviewed, and if necessary, revised quarterly, and as needed, based upon the resident's response to the care provided and any changes in the resident's physical or cognitive status. This REQUIREMENT is not met as evidenced by: Complaint #: NJ00170860 Based on observation, interview, record review and pertinent facility documents, it was determined that the facility failed to develop a Health Service Plan (HSP) based on the resident's individual health care needs, and the resident's response to the care provided, regarding the NJ ex order 26.4b1, and NJ ex order 26.4b1 for 5 of 6 residents reviewed, Resident #1, #2, #3, #5 and #6. The deficient practice was evidenced by the following: 1.) On 4/9/24 at 11:19 a.m., the surveyor reviewed the closed medical record (MR) of Resident #1 who moved into the facility in NJ ex order 26.4b1 According to the Progress Note (PN) dated NJ ex order 26.4b1, the resident was NJ ex order 26.4b1 after the resident NJ ex order 26.4b1 Resident #2. On 4/9/24 at 12:07 p.m., the surveyor interviewed the facility Executive Director (ED), who stated that the "Resident Evaluation and Personal	A 751		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 35A004	(X2) MULTIPLE CONSTRUCTION A. BUILDING: B. WING	(X3) DATE SURVEY COMPLETED C 05/09/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JUNIPER VILLAGE AT WILLIAMSTOWN, WELLSPRIN(	1648 S. BLACK HORSE PIKE WILLIAMSTOWN, NJ 08094

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 751	Continued From page 32 Services (REPS)" document was utilized by the facility as the residents' General Service Plan and the Resident Assessment. The ED stated Resident #1 NJ ex order 26.4b1 and NJ ex ord On 4/11/24 at 2:00 p.m., the surveyor observed a document titled NJ ex order 26.4b1 " completed by the RDW. Continued review of the document, revealed, the following under section "C. Actions Taken... 8. Care Plan reviewed 1. Yes 9. Care Plan updated 2. No" The surveyor reviewed Resident #1's REPS and did not observe documented evidence that the RDW updated the REPS [HSP] to address Resident #1's NJ ex order 26.4b1. On 4/17/24 at 11:42 a.m., the surveyor interviewed the RDW regarding Resident #1's REPS not being updated to address the resident's NJ Ex Order 26.4b1 symptoms and she confirmed it was not updated following the NJ ex order 26.4b incident until NJ ex order 26.4b 2.) At 12:03 p.m. the surveyor reviewed the closed MR of Resident #2, who moved into the facility NJ ex order 26.4b1 with diagnosis which NJ ex order 26.4b1 The surveyor reviewed Resident #2's PN dated NJ ex order 26.4b written by a Certified Medication Aide (CMA) which revealed, "Resident [#2] NJ ex order 26.4b1 [Resident #1] ... NJ ex order 26.4b1 [Resident #2]	A 751		

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	35A004	A. BUILDING: ___ B. WING ___	C 05/09/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JUNIPER VILLAGE AT WILLIAMSTOWN, WELLSPRIN(	**1648 S. BLACK HORSE PIKE WILLIAMSTOWN, NJ 08094**

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A 751	Continued From page 33 NJ ex order 26.4b1 [Resident #2] NJ ex order 26.4b1 [Resident #1] NJ ex order 26.4b1 ." Continued review of the PN dated NJ ex order 26.4b1 written by the RDW revealed, NJ ex order 26.4b1 . NJ ex order 26.4b1 . NJ ex order 26.4b1 NJ ex order 26.4b1 He/she also says NJ ex order 26.4b1 Contacted daughter who provided permission for ... [Physician] NJ ex order 26.4b1 ..." The survey reviewed Resident #2's REPS and did not observe documented evidence that the REPS was updated to address Resident #2's NJ ex order 26.4b1 until NJ ex order 26.4b1. On NJ ex order 26.4b1 at 11: 42 a.m., during interview with the RDW, she confirmed that the REPS was not updated until NJ ex order 26.4b1 Refer to A0389 8:36-4.1(a)(16) Complaint #: NJ00158614 The facility's failure to develop a HSP for residents who had changes in NJ ex order 26.4b1 put other residents at risk for NJ ex order 26.4b1 and was identified as Imminent Danger (ID). This ID was identified and reported to the Licensed Assisted Living Administrator on NJ ex order 26.4b1 at 3:00 p.m. The Administrator was presented with the ID template that included information about the above issues. 3.) On 4/9/24 at 11:30 a.m., surveyor review of Resident #3's electronic medical record (EMR)	A 751		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	35A004	A. BUILDING: ______ B. WING ______	C 05/09/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JUNIPER VILLAGE AT WILLIAMSTOWN, WELLSPRIN(	**1648 S. BLACK HORSE PIKE WILLIAMSTOWN, NJ 08094**

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A 751	Continued From page 34 revealed a move in date of NJ ex order 26.4b1, with diagnoses that included NJ ex order 26.4b1 . The surveyor reviewed Resident #3's EMR progress note (PN) written by a facility Licensed Practical Nurse, (LPN #1), dated NJ ex order 26.4b1, which revealed that Resident #3 NJ ex order 26.4b1 which measured NJ ex order 26.4b1 Surveyor review of Electronic Medication Administration Record (EMAR), revealed an initial order dated NJ ex order 26.4b1 for NJ ex order 26.4b1 Surveyor review of Resident #3's EMR identified there was no Health Service Plan (HSP) in place for the NJ ex order 26.4b1 to reflect the services provided which additionally included NJ Ex Order 26.4b1 interventions. There was no evidence of a timely evaluation of the effectiveness of the treatment by the Registered Nurse (RN). On 4/9/24 at 12:00 p.m., the surveyor interviewed the facility Executive Director (ED) who stated that the facility utilized the document titled, "Resident Evaluation and Personal Services (REPS)," as the General Service Plan (GSP) and the resident assessment. The surveyor reviewed a REPS dated NJ ex order 26.4b1, that indicated Resident #3 NJ ex order 26.4b1 The surveyor reviewed an additional REPS dated NJ ex order 26.4b1, section 16 titled, NJ ex order 26.4b1" part 4, that indicated Resident #3 required no assistance with NJ ex order 26.4b1; and, part 4a., NJ ex order 26.4b1" that showed no indication of goals or interventions for	A 751		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JUNIPER VILLAGE AT WILLIAMSTOWN, WELLSPRIN(	1648 S. BLACK HORSE PIKE WILLIAMSTOWN, NJ 08094

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
A 751	Continued From page 35 NJ Ex Order 26.4b1. The surveyor observed a NJ ex order 26.4b1 for Resident #3 that was dated NJ ex order 26, by LPN #1 and indicated Resident #3 NJ ex order 26.4b1 4.) On 4/9/24 at 11:30 a.m., the surveyor reviewed the closed EMR of Resident #5 who moved into the facility on NJ ex order 26.4b1, had diagnoses that included NJ ex order 26.4b1 Surveyor review of the EMR PN revealed a PN dated NJ ex order 26.4b, that indicated Resident #5 had NJ ex order 26.4b1, a NJ ex order 26.4b1 and a NJ ex order 26.4b1 NJ ex order 26.4b1 NJ ex ord Surveyor review of Resident #5's EMR physician orders revealed the following orders: NJ ex order 26.4b1 NJ ex order 26.4b1 NJ ex order 26.4b1	A 751		

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
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NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JUNIPER VILLAGE AT WILLIAMSTOWN, WELLSPRIN(	1648 S. BLACK HORSE PIKE WILLIAMSTOWN, NJ 08094

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A 751	Continued From page 36 NJ ex order 26.4b1 NJ ex order 26.4b1 NJ ex order 26.4b1 NJ ex order 26.4b1 NJ ex order 26.4b1. NJ ex order 26.4b1 The surveyor observed a HSP documented by the facility RDW, dated NJ ex order 26.4b1, that indicated Resident #5 had NJ ex order 26.4b1 NJ ex order 26.4b1". Further review of the EMR identified there were no further updates to the HSP regarding Resident #5's NJ ex order 26.4b1 NJ ex order 26.4b1. The surveyor reviewed the REPS, Section 16 titled, "NJ ex order" written by the facility RDW that was dated NJ ex order 26.4b1 and indicated that Resident #5 required no assistance with NJ ex order 26.4b1, NJ ex order 26.4b1, NJ ex order 26.4b1 NJ ex order 26.4b1 There were no check marks to indicate that any preventative measures including NJ Ex Order 26.4b1 were utilized. 5.) On 4/9/24 at 1:00 p.m., the surveyor reviewed the closed EMR of Resident #6 who moved into the facility on NJ ex order 26.4b1, had diagnoses that included NJ ex order 26.4b1 The surveyor observed a PN dated NJ ex order 26 written by a facility Certified Medication Associate (CMA #1) that indicated Resident #6 "NJ ex order 26.4b1	A 751		

New Jersey Department of Health

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION	(X3) DATE SURVEY COMPLETED
	35A004	A. BUILDING: ___ B. WING ___	C 05/09/2024

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
JUNIPER VILLAGE AT WILLIAMSTOWN, WELLSPRIN(	1648 S. BLACK HORSE PIKE WILLIAMSTOWN, NJ 08094

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A 751	Continued From page 37 NJ ex order 26.4b1 ". Surveyor review of Resident #6's EMAR revealed the following prescriber orders: NJ ex order 26.4b1 NJ ex order 26.4b1 . On 4/9/24, the surveyor reviewed the EMR which showed no indication that an initial Health Service Plan was developed at the time the NJ ex order 26.4b1 was identified, what interventions were put in place or whether the interventions were being evaluated by the facility RN for effectiveness. The surveyor reviewed the REPS for Resident #6, documented by the facility DOW, dated NJ ex order 26 Section 16, titled, NJ ex order 26 which revealed that there were no updates regarding specifics of the NJ ex order 26.4b1 Resident #6. Additionally, under Section 16. "...5.Does the resident require preventative measures and devices such as NJ Ex Order 26.4b1 ?" The surveyor observed that NJ ex ord was documented. On 5/9/24, the surveyor completed a revisit survey and verified the Removal Plan was implemented.	A 751		

STATE FORM: REVISIT REPORT

PROVIDER / SUPPLIER / CLIA / IDENTIFICATION NUMBER (Y1)	MULTIPLE CONSTRUCTION A. Building B. Wing (Y2)	DATE OF REVISIT (Y3)
35A004		7/26/2024

NAME OF FACILITY	STREET ADDRESS, CITY, STATE, ZIP CODE
JUNIPER VILLAGE AT WILLIAMSTOWN, WELLSPRING MEMORY	1648 S. BLACK HORSE PIKE WILLIAMSTOWN, NJ 08094

This report is completed by a State surveyor to show those deficiencies previously reported that have been corrected and the date such corrective action was accomplished. Each deficiency should be fully identified using either the regulation or LSC provision number and the identification prefix code previously shown on the State Survey Report (prefix codes shown to the left of each requirement on the survey report form).

ITEM Y4	DATE Y5	ITEM Y4	DATE Y5	ITEM Y4	DATE Y5
ID Prefix A0310 Reg. # 8:36-3.4(a)(1) LSC	Correction Completed 07/08/2024	ID Prefix A0357 Reg. # 8:36-4.1(a)(2) LSC	Correction Completed 07/08/2024	ID Prefix A0389 Reg. # 8:36-4.1(a)(16) LSC	Correction Completed 07/08/2024
ID Prefix A0565 Reg. # 8:36-5.10(a)(3) LSC	Correction Completed 07/08/2024	ID Prefix A0745 Reg. # 8:36-7.2(f) LSC	Correction Completed 07/08/2024	ID Prefix A0749 Reg. # 8:36-7.3(a) LSC	Correction Completed 07/08/2024
ID Prefix A0751 Reg. # 8:36-7.3(b) LSC	Correction Completed 07/08/2024	ID Prefix Reg. # LSC	Correction Completed	ID Prefix Reg. # LSC	Correction Completed
ID Prefix Reg. # LSC	Correction Completed	ID Prefix Reg. # LSC	Correction Completed	ID Prefix Reg. # LSC	Correction Completed
ID Prefix Reg. # LSC	Correction Completed	ID Prefix Reg. # LSC	Correction Completed	ID Prefix Reg. # LSC	Correction Completed

REVIEWED BY STATE AGENCY ☐	REVIEWED BY (INITIALS)	DATE	SIGNATURE OF SURVEYOR	DATE
REVIEWED BY CMS RO ☐	**REVIEWED BY (INITIALS)**	**DATE**	**TITLE**	**DATE**

FOLLOWUP TO SURVEY COMPLETED ON	
5/9/2024	☐ CHECK FOR ANY UNCORRECTED DEFICIENCIES. WAS A SUMMARY OF UNCORRECTED DEFICIENCIES (CMS-2567) SENT TO THE FACILITY? ☐ YES ☐ NO