

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to CHELTEN CHRISTIAN CRUSADE FOR ALL PEOPLE, INC.

LEGAL ENTITY

To operate CHELTEN CHRISTIAN CRUSADE FOR ALL PEOPLE, INC.

NAME OF FACILITY OR AGENCY

Located at 3635 NORTH 22ND STREET, PHILADELPHIA, PA 19140

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

To provide Personal Care Homes

TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed 14
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

(MAXIMUM CAPACITY)

Restrictions: _____

This certificate is granted in accordance with the Public Welfare Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes

(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from February 16, 2011 until February 16, 2012,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **141670**

Robert E. Robinson

ISSUING OFFICER

R. C. King

DIRECTOR

NOTE: This certificate is issued for the above site(s) only and is not transferable
and should be posted in a conspicuous place in the facility.

PW 628 - 01/11



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
PO BOX 2675
HARRISBURG, PENNSYLVANIA 17105-2675

ADULT RESIDENTIAL LICENSING

FEB 17 2011

PHONE: (717) 783-3670
FAX: (717) 783-5662

Mr. Rex Barr, Administrator
Chelten Christian Crusade for All People, Inc.
605 East Chelten Avenue
Philadelphia, Pennsylvania 19144

RE: Chelten Christian Crusade for All People, Inc.
3635 North 22nd Street
Philadelphia, Pennsylvania 19140

Dear Mr. Barr:

As a result of the Department of Public Welfare's licensing inspection on November 10, 2010, January 6, 2011 and February 9, 2011 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.

A regular license is being issued based on the enclosed Violation Report. Your license is enclosed.

Sincerely,

A handwritten signature in black ink, appearing to read 'R Melusky'.

Ronald Melusky
Acting Director

Enclosures
License
Violation Report

VIOLATION REPORT
 PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

Page 1 of 1

NAME AND ADDRESS OF PERSONAL CARE HOME CHELTEN CHRISTIAN CRUSADE FOR ALL PEOPLE INC, 3635 NORTH 22ND STREET PHILADELPHIA, PA		CURRENT LICENSE NUMBER 141672	
INSPECTION DATES (include all dates of the inspection) 11/10/2010		REGIONAL REPRESENTATIVE Chevon Mitchell, Justin Trupp	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) REX BARR (Administrator)			
SIGNATURE OF LEGAL ENTITY <i>Rex Barr</i>	DATE 11/22/10	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Chevon Mitchell</i>	DATE 2/4/11

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
121a Stairways, hallways, doorways, passageways and egress routes from rooms and from the building shall be unlocked and unobstructed.	On 11/10/10, at 8:10am, two chairs blocked the egress route for the home's second means of egress located in the back bedroom on the second floor.	11-10-10	ON 11/10/10 THE CHAIR BLOCKING THE EGRESS WAS MOVED TO ANOTHER POSITION IN THE ROOM TO ASSURE THE EGRESS ROUTE FOR EMERGENCY WILL NOT BE BLOCKED IN THE FUTURE. ADMINISTRATOR EXPLAINED TO THE RESIDENTS IN ROOM HOW IMPORTANT IT IS NOT TO BLOCK EGRESS. STAFF WILL MAKE SURE TO CHECK THE BLOCKED EGRESS ALL DURING THE TIMES THEY GO FROM ROOM TO ROOM. ADMINISTRATOR WILL CHECK EGRESS EACH TIME THEY COME INTO THE BUILDING, THIS WILL ASSURE VIOLATION	<i>[Signature]</i> 2/4/11

NOV-26-2010 22:14 FROM:

18884732953

TO: 6102701147

P. 1/1

VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

P. 1/12

TO: 6102701147

12152339327

JAN-25-2011 07:47 FROM: G

NAME AND ADDRESS OF PERSONAL CARE HOME CHELTEN CHRISTIAN CRUSADE FOR ALL PEOPLE INC, 3635 NORTH 22ND STREET PHILADELPHIA, PA		CURRENT LICENSE NUMBER 141672	
INSPECTION DATES (Include all dates of the inspection) 01/06/2011		REGIONAL REPRESENTATIVE James Jesse Hummel, Michelle Morton	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Rex BARK Administrator</i>			
SIGNATURE OF LEGAL ENTITY <i>Rex Bark</i>	DATE 1-25-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cheron Mitchell</i>	DATE 2/4/11

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
83a The indoor temperature, in areas used by the residents, shall be at least 70°F when residents are present in the home.	On 1/6/11, at 11:30am, when residents were present in the home, the temperature in the second floor middle bedroom used by the residents was 67.1 degrees Fahrenheit. On 1/6/11, at 11:30am, when residents were present in the home, the temperature in the second floor back bedroom used by the residents was 65.8 degrees Fahrenheit.	1/8/11	For the violations of regulation 83a, on January 8 th 2011 we have insulated the windows in the two rooms that were below 70 degrees. We have also trained staff and required them to check temperatures in three different rooms at least once a day. Staff then records results on the new temperature log sheet. Administration checks log sheet once a week and if there are any temperatures below 70 degrees staff will immediately notify administration and turn up thermostat, this will make sure this violation does recur in the future. We have been in compliance since 1/8/2011	1/19/11

VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

P. 2/12

TO: 6102701147

121523393E7

JAN-25-2011 07:48 FROM: G

NAME AND ADDRESS OF PERSONAL CARE HOME CHELTEN CHRISTIAN CRUSADE FOR ALL PEOPLE INC, 3635 NORTH 22ND STREET PHILADELPHIA, PA		CURRENT LICENSE NUMBER 141672	
INSPECTION DATES (include all dates of the inspection) 01/06/2011		REGIONAL REPRESENTATIVE James Jesse Hummel, Michelle Morton	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan) <i>Rex Ball (Administrator)</i>			
SIGNATURE OF LEGAL ENTITY <i>Rex Ball</i>	DATE 1-25-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>Cheron Mitchell</i>	DATE 2/4/11

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
141a The medical evaluation shall include the following: (1) A general physical examination by a physician, physician's assistant or nurse practitioner. (2) Medical diagnosis including physical or mental disabilities of the resident, if any. (3) Medical information pertinent to diagnosis and treatment in case of an emergency. (4) Special health or dietary needs of the resident. (5) Allergies. (6) Immunization	The medical evaluation for resident #1, dated 1/8/10, does not include the resident's medication regimen.	1/25/11	For the violation of regulation 141a, we have a new medical evaluation for resident #1 also we have sent out a memo to every doctor that fills out medical evaluations for our residents detailing exactly what we need in the medical evaluation in a effort to prevent a violation of regulation 141a in the future. We have also back checked every resident's record to make sure there were no other instances where this occurred. Going forward we have made a checklist of all the information need on the medical evaluations. We have been in compliance since 1/25/11	Steps have been taken to correct violation, all compliance is verifiable <i>[Signature]</i> Date 2/4/11 Initials (DPW)

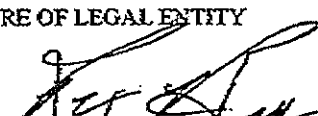
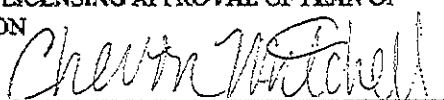
VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

P. 3/12

TO: 6102701147

12152339327

JAN-25-2011 07:48 FROM: G

NAME AND ADDRESS OF PERSONAL CARE HOME CHELTEN CHRISTIAN CRUSADE FOR ALL PEOPLE INC, 3635 NORTH 22ND STREET PHILADELPHIA, PA 19140		CURRENT LICENSE NUMBER 141672	
INSPECTION DATES (Include all dates of the inspection) 01/06/2011		REGIONAL REPRESENTATIVE James Jesse Hummel, Michelle Morton	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY 	DATE 1-25-11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 2/4/11

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
history. (7) Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications. (8) Body positioning and movement stimulation for residents, if appropriate. (9) Health status. (10) Mobility assessment, updated annually or at the Department's request.				


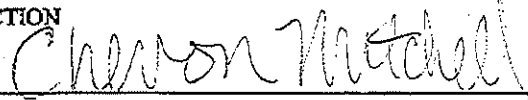
VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

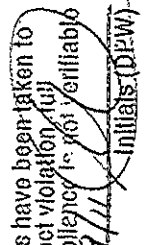
P. 4/12

TO: 6102701147

12152339327

JAN-25-2011 07:49 FROM: G

NAME AND ADDRESS OF PERSONAL CARE HOME CHELTEN CHRISTIAN CRUSADE FOR ALL PEOPLE INC, 3655 NORTH 22ND STREET PHILADELPHIA, PA 19149		CURRENT LICENSE NUMBER 141672	
INSPECTION DATES (Include all dates of the inspection) 01/06/2011		REGIONAL REPRESENTATIVE James Jesse Hummel, Michelle Morton	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY 	DATE 1/25/11	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 2/4/11

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
141b1 A resident shall have a medical evaluation: (1) At least annually.	Resident #1 did not have a medical evaluation completed in 2009. Resident #1's current medical evaluation is dated 1/8/10. It can not be determined that resident #1 had an annual medical evaluation completed.	1/25/11	For the violation of regulation 141b1 we have a new medical evaluation for resident #1 so he has a 2010 and 2011 evaluation. Several other also have new evaluations a list of when every residents last two medical evaluations has been compiled along with the next date to schedule a new medical evaluation. The list is viewed monthly by administration and all residents who are within 45 days of an expiring medical evaluation will be scheduled for an appointment with physician by administration. We have been in compliance since 1/25/11.	<p>Steps have been taken to correct violation, fully compliance is not verifiable</p> <p> Date Initials (D/W)</p>