pennsylvania
DEPARTMENT OF HUMAN SERVICES

OCT 0 1 2015

Mr. Jeffrey Evans, President/CEO
The Brethren Home Community, Inc.
Attn: Julie Hull, PC Administrator
2900 Carlisle Pike
New Oxford, Pennsylvania 17350

RE: Cross Keys Village – The Brethren Home Community
License #: 342870

Mr. Evans:

As a result of the Department of Human Services' licensing inspection on August 19, 2015, and the corrections you have made after our inspection, we have found the above facility to be in compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes).

Your regular license for the period November 10, 2015 to November 10, 2016 was issued on July 31, 2015. Your regular license remains in good standing.

Sincerely,

Matthew J. Jones
Director

Enclosure
Licensing Inspection Summary

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

PCH Name: CROSS KEYS VILLAGE THE BRETHREN HOME COMMUNITY	License Number: 34287
Address: 2990 CARLISLE PIKE, NEW OXFORD, PA 17350	County: Adams
Administrator: Julie Hull	Region: CENTRAL

Legal Entity Name: THE BRETHREN HOME COMMUNITY INC

Legal Entity Address: 2990 CARLISLE PIKE, NEW OXFORD, PA 17350

Certificate(s) of Occupancy

I-2	A2 - IIB
08/02/2010	06/10/2015
Oxford Township	Oxford Township

Staffing Hours

Resident Support: 0 | Total Daily Staff: 100 | Waking Staff: 75

Type of Inspection: Ind - Partial/Center head | BHA Docket Number: | Notice: Unannounced

Reason(s) for Inspection(s)

Renewal

On-Site Inspections Dates and Department Representatives On-Site

08/19/2015: McCloskey, Jason

Off-Site Inspection Dates and Inspectors, if Applicable

Other Details

Partial or Full Triggers: 14c | Random Indicators: 25c12 - 25d1 - 86a - 161f - 190b

Resident Demographic Data as of Inspection Dates

Licensed Capacity: 104

Number of Residents Served: 86

Secured Dementia Care Unit in Home: Yes

Area: Sheltered Unit

Secured Dementia Unit Capacity, if Applicable: 18

Number of Residents Served in Secured Dementia Care Unit, if applicable: 14

Number of Current Hospice Residents: 1

Number of Hospice Residents in past year: 0

Number of Residents who:

Receive Supplemental Security Income: 4

Are 60 Years of Age or Older: 86

Have Mental Illness: 2

Have an Intellectual Disability: 2

Have a Mobility Need: 14

Have a Physical Disability: 0

Violation Report: 34287 - 08/19/2015 - McCloskey, Jason
PCH Name: CROSS KEYS VILLAGE THE BRETHREN HOME COMMUNITY

1. REGULATION 55 Pa.Code §2600
2600.14(c) - If a building is structurally renovated or altered after the initial fire safety approval is issued, the home shall submit the new fire safety approval, or written certification that a new fire safety approval is not required, from the appropriate fire safety authority. This documentation shall be submitted to the Department within 15 days of the completion of the renovation or alteration.

2a. DESCRIPTION OF VIOLATION
The building was structurally altered with renovations changing an area of five rooms into two rooms including changes to the electrical and plumbing systems. The renovations were completed as of 6-10-15, but the home failed to provide the Department with a new fire safety approval, or certification that a new fire safety approval is not required, from an appropriate fire safety authority.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)
Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

When the oversight was identified during DHS inspection, we immediately contacted our county building inspector to confirm that the necessary safety inspections had occurred and requested/received an updated Certificate of Occupancy which was presented to the DHS licensing inspector. *(see Attachment A)*

The renovated suites had not yet been occupied.

The campus building project administrator and the county building inspector were educated about the DHS requirement.

Going forward, the campus building project administrator will ensure that the required paperwork is filed. The PC Administrator will monitor compliance.

Repeat Violation: No	Date(s) of Previous Violation(s):			

Signature of Legal Entity Representative (Required on EVERY Page) Julie Hull

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Julie Hull, PC Administrator

Date 9-4-15

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The above plan of correction is approved as of 9/9/15 (Date)

The above plan of correction was approved by BAS (Initials)

Plan of correction implementation status as of 9/9/15 (Date)

- [x] Fully Implemented
- [ ] Partially Implemented - Adequate Progress
- [ ] Partially Implemented - Inadequate Progress
- [ ] Not Implemented