



pennsylvania
DEPARTMENT OF HUMAN SERVICES

APR 22 2019

Ms. Diane Williams
Administrator
Chelten Christian Crusade for All People, Inc.
605 East Chelten Avenue
Philadelphia, Pennsylvania 19144

RE: Chelten Christian Crusade II
4518 Broad Street
Philadelphia, Pennsylvania 19141
License #: 123280

Dear Ms. Williams:

As a result of the Department's Bureau of Human Services Licensing annual inspection on August 22, 2018 of the above facility, the violations with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed violation report were found.

All citations 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 (relating to Personal Care Homes) must be maintained.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to https://www.surveymonkey.com/r/BHSL_Inspection.

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink, appearing to read 'J. Rowe'.

Jacqueline L. Rowe
Director

Enclosure
Violation Report

Violation Report: 12328 - 08/22/2018 - Gillespie, Denise
 PCH Name: CHELTEN CHRISTIAN CRUSADE II

1. REGULATION 65 Pa.Code §2800
 2800.132(e) - A fire drill shall be held during sleeping hours once every 6 months.

2a. DESCRIPTION OF VIOLATION
 The last fire drill conducted during sleeping hours was on 1/14/18.

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.

A fire drill will be conducted immediately. A fire drill will take place during sleeping hours every 6 months. DCS and Admin will predesignate a date every 6 months to have an overnight fire drill (announced to residents)

Administrator will ensure an unannounced fire drill is held once every 6 months. Fire drill logs to be kept for Department review. SP 04-08-19


Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative (Required on EVERY Page) *Diane Williams*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) *Diane Williams Admin* Date *3/15/19*

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of <u>04/08/19</u> (Date)	Plan of correction implementation status as of <u>04/08/19</u> (Date)
The above plan of correction was approved by <u>SP</u> (Initials)	<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented

Violation Report: 12320 - 08/22/2018 - Gillespie, Denise PCH Name: CHELTEN CHRISTIAN CRUSADE II	
1. REGULATION 66 Pa.Codo §2000 2800.141(a)(1) - A resident shall have a medical evaluation by a physician, physician's assistant, or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission.	
2a. DESCRIPTION OF VIOLATION Resident # 1 was admitted on 6/12/17. The resident's medical evaluation was completed on 12/4/17.	
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.	
<p style="font-size: 1.2em;">All DME's will be checked monthly to assure all residents have one. All DME's will be submitted to PCH prior to start date. This will be checked off on New Residents check list & form.</p>	
Administrator or designee will ensure all medical evaluations are completed timely. Within 60 days of a resident moving into the facility or up to 30 days after. Medical evaluations will also be completed annually. Documentation to be kept for Department review. SP 04-08-19	
Repeat Violation: No	Date(s) of Previous Violation(s):
Signature of Legal Entity Representative (Required on EVERY Page) 	
Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Diane Williams Admin Date 3/15/19	
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Violation Report: 12328 - 08/22/2018 - Gillespie, Denise
 PCH Name: CHELTEN CHRISTIAN CRUSADE II

1. REGULATION 56 Pa.Code §2600
 2600.107(a) - A medication record shall be kept to include the following for each resident for whom medications are administered:
- (1) Resident's name.
 - (2) Drug allergies.
 - (3) Name of medication.
 - (4) Strength.
 - (5) Dosage form.
 - (6) Dose.
 - (7) Route of administration.
 - (8) Frequency of administration.
 - (9) Administration times.
 - (10) Duration of therapy, if applicable.
 - (11) Special precautions, if applicable.
 - (12) Diagnosis or purpose for the medication, including pro re nata (PRN).
 - (13) Date and time of medication administration.
 - (14) Name and initials of the staff person administering the medication.

2a. DESCRIPTION OF VIOLATION
 The medication administration record for Resident #1 includes a signature for Amlodipine 10mg on 8/20/18, 8/21/18, 8/22/18. However the medication was not administered on those dates.

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.

DCS will be retrained immediately on Medication Administration. Administrator will review medication logs and signatures weekly for the next 3 months.

Training of direct care staff and medication logs will be kept for Department review. Direct care staff will ensure are residents receive medication and it is signed for. SP 04-08-19

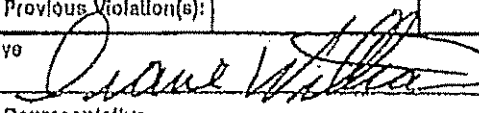
Repeat Violation: No	Date(s) of Previous Violation(s):	
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Signature of Legal Entity Representative (Required on EVERY Page) *Diane Williams*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Diane Williams - Admin Date 3/15/19

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Violation Report: 12328 - 08/22/2018 - Gillespie, Denise PGH Name: CHELTEN CHRISTIAN CRUSADE II	
1. REGULATION 65 Pa.Coda §2800 2800.187(d) - The home shall follow the directions of the prescriber.	
2a. DESCRIPTION OF VIOLATION Resident # 1 was prescribed Amlodipine 10mg, 1 tablet daily, Resident # 1 did not receive Amlodipine on 8/20/18, 8/21/18, and 8/22/18.	
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.	
<p style="font-size: 1.2em;">DCS will be retrained in Medication Administration immediately. Admin. will count all meds dx's a week to assure all residents have received their medications.</p> <p>Training of direct care staff and medication logs will be kept for Department review. Direct care staff will ensure are residents receive medication and it is signed for. SP 04-08-19</p>	
Repeat Violation: No	Date(s) of Previous Violation(s):
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Printed Name and Title of Legal Entity Representative (Required on EVERY Page) Diane Williams - Admin	
Date 3/15/19	
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Violation Report: 12328 - 08/22/2018 - Gillespie, Denlee
 PCH Name: CHELTEN CHRISTIAN CRUSADE II

1. REGULATION 65 Pa.Code §2600

2600.101 - The home shall educate the resident on the right to question or refuse a medication if the resident believes there may be a medication error. Documentation of this resident education shall be kept.

2a. DESCRIPTION OF VIOLATION

Resident # 1 has not been educated to the resident's right to refuse medication if the resident believes that there may be a medication error.

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.

All residents will be educated on residents rights. Admin will ask all residents if they are aware of their rights to refuse medications. Admin will check new residents checklist going forward to assure residents were educated on their rights.

Repeat Violation: Yes	Date(s) of Previous Violation(s):	01/30/2017
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Signature of Legal Entity Representative
 (Required on EVERY Page) *[Signature]*

Printed Name and Title of Legal Entity Representative
 (Required on EVERY Page) Diane Williams - Admin Date 3/18/19

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