



MAILING DATE: March 26, 2020

Mr. Jim Roberts
Director
Christian Residential Opportunities & Social Services
(C.R.O.S.S., Inc.)
712 Pinola Road
Shippensburg, Pennsylvania 17257

RE: Christian Residential Opportunities and Social Services.
(C.R.O.S.S., Inc.)
License #: 344260

Dear Mr. Roberts:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on January 6, 2020 and January 7, 2020 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,

A handwritten signature in black ink that reads "Brett Swanger". The signature is written in a cursive style.

Brett Swanger
Human Services Licensing Supervisor

Enclosure
Licensing Inspection Summary

Violation Report

Facility Information

Name: CHRISTIAN RESI. OPP & SOCIAL SVCS. (C.R.O.S.S., INC.)
Address: 712 PINOLA ROAD,, SHIPPENSBURG, PA 17257
County: FRANKLIN **Region:** CENTRAL

License Number: 34426

Administrator

Name: Jim Roberts **Phone:** 7175301788 **Email:**

Legal Entity

Name: CHRISTIAN RESIDENTIAL OPPORTUNITIES & SOCIAL SERVICES, INC.
Address: 712 PINOLA ROAD, SHIPPENSBURG, PA, 17257

Certificate(s) of Occupancy

Type: C-3 SP **Date:** 09/02/1992 **Issued By:** Labor and Industry

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 8 **Waking Staff:** 6

Inspection

Type: Full **BHA Docket #:** **Notice:** Unannounced
Reason: Renewal, Complaint

Inspection Dates and Department Representative

01/06/2020 - On-Site: Laura Heemer

01/07/2020 - On-Site: Laura Heemer

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 8 **Residents Served:** 8

Secured Dementia Care Unit

In Home: No **Area:** **Capacity:** **Residents Served:**

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 6 **Are 60 Years of Age or Older:** 2
Diagnosed with Mental Illness: 0 **Diagnosed with Intellectual Disability:** 8
Have Mobility Need: 0 **Have Physical Disability:** 0

16c - Written Incident Report

Regulations

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

In December of 2019, the home received information alleging possible neglect. A written incident report was not sent to the Department within 24 hours.

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.)

The Director and Administrators have signed up for training on April 28, 2020. The course title Abuse Investigations and is provided through DHS. In the future, complaints will be reported to DHS within 24 hours.

The home will review the incidents reported to the Department on a quarterly basis to identify any patterns that need address. This will also insure that proper reporting has taken place.

Legal Entity Representative

Signature Jim Roberts

Printed Name and Title Jim Roberts, Director

Date February 12, 2020

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE IN THIS BOX!

The above plan of correction is approved as of 2/13/2020 (Date) Plan of correction implementation status as of 3/26/2020 (Date)

Implemented

Not Implemented

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

20b3 - Written Receipts

Regulations

2600.

20.b. If the home provides assistance with financial management or holds resident funds, the following requirements apply:

- 3. The home shall obtain a written receipt from the resident for cash disbursements at the time of disbursement.

Description of Violation

On 10/28/2019, 11/14/2019, 11/25/2019 and 12/22/2019, cash disbursements of Resident 1's funds were made to the resident. The home did not obtain the resident's signature for the receipt of these disbursements.

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.)

Signatures will be obtained at the time of disbursements. Each week a check of the logs will be made by a secondary staff person. This will begin immediately. Staff handling disbursements have been trained (February 7, 2020) as to the new system which has been implemented. By 3,06,2020 the home will provide the Department with documentation for the first two weeks of monitoring of signed receipts.

Legal Entity Representative

Signature Jim Roberts

Printed Name and Title Jim Roberts, Director

Date February 12, 2020

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42o - Associate/Communicate

Regulations

2600.

42.o. A resident has the right to freely associate, organize and communicate with others privately.

Description of Violation


The Home Rules state "Each Resident is to be in his/her bedroom during the time from 10pm to 6am." This infringes on the residents' rights to freely associate in the home.

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.)

The wording in the House Rules will be changed from "is to be" to "is encouraged". This has taken place on February 10, 2020. New rules will be posted for 30 days and family members will receive notification of the change. Residents will be also told verbally of the change since reading is problematic. This took place on Feb. 11, 2020.

Legal Entity Representative

Signature 

Printed Name and Title Jim Roberts, Director

Date February 12, 2020

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190a - Completion Medication Course

Regulations

2600.

190.a. A staff person who has successfully completed a Department-approved medications administration course that includes the passing of the Department's performance-based competency test within the past 2 years may administer oral; topical; eye, nose and ear drop prescription medications and epinephrine injections for insect bites or other allergies.

Description of Violation

Staff person A and Staff Person B did not have two Medication Administration Record reviews between the time period of December 2017 to January of 2019, as needed to be in compliance with the medication administration annual practicum requirements. On 1/1/2020, Staff Person A administered Bzotropine Mesylate to Resident 1, at 4pm, and on 1/3/2020, Staff Person B administered Divalproex Sodium and Risperidone tablets to Resident 1 at 9pm.

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.)

In the absence of an on site Med. Administrator, a Med. Administrator will come to Grace Home February 20 to observe administration of meds and review MAR's

- 1. A review will be conducted to see who needs the observations.
- 2. The observations are scheduled on Feb. 20, 2020 at Grace Home under supervision of Med. Administrator.
- 3. Med. Administration training will be part of the annual Staff Development plan.
 - a. Each staff administering meds will have two reviews a year.
 - b. Annual practicum observations and med record reviews will be part of annual staff ongoing training.

The Administrator will monitor the medication administration training of the staff on a quarterly basis to assure compliance.

Legal Entity Representative

Signature Jim Roberts

Jim Roberts, Director
Printed Name and Title

February 12, 2020
Date

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201 - Positive Interventions

Regulations

2600.

201. Safe Management Techniques - The home shall use positive interventions to modify or eliminate a behavior that endangers the resident himself or others. Positive interventions include improving communications, reinforcing appropriate behavior, redirection, conflict resolution, violence prevention, praise, deescalation techniques and alternative techniques or methods to identify and defuse potential emergency situations.

Description of Violation

In order to modify residents' behaviors, Staff Person B will punish Resident 2 by taking the resident's television power cord and will punish Resident 3 by taking the resident's computer power cord.

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.)

Cords will no longer be taken. A meeting with the Supports Coordinators has been requested (February 5, 2020) and scheduled for February 25 to discuss positive approaches and develop a crisis management strategy that is workable and effective with our residents. Staff have already been instructed that "taking away" is not acceptable. Feb. 7, 2020 Ongoing discussion and training will take place as to positive approaches. Dates should be available after our meeting with Supports Coordinators.

Legal Entity Representative

Signature 

Printed Name and Title Jim Roberts, Director

Date February 12, 2020

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