

Department of Human Services
Bureau of Human Service Licensing
LICENSING INSPECTION SUMMARY PUBLIC

February 22, 2023

[REDACTED], ADMINISTRATOR
CHELTEN CHRISTIAN CRUSADE FOR ALL PEOPLE INC
[REDACTED]

RE: CHELTEN CHRISTIAN CRUSADE FOR
ALL PEOPLE, INC.
3635 NORTH 22ND STREET
PHILADELPHIA, PA, 19140
LICENSE/COC#: 14167

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/08/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: CHELTEN CHRISTIAN CRUSADE FOR ALL PEOPLE, INC. License #: 14167 License Expiration: 02/17/2022

Address: 3635 NORTH 22ND STREET, PHILADELPHIA, PA 19140

County: PHILADELPHIA

Region: SOUTHEAST

Administrator

Name: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

Legal Entity

Name: CHELTEN CHRISTIAN CRUSADE FOR ALL PEOPLE INC

Address: [REDACTED]

Phone: [REDACTED]

Email: [REDACTED]

Certificate(s) of Occupancy

Type: Other

Date: 01/19/1983

Issued By: City of Phila.

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 11

Waking Staff: 8

Inspection Information

Type: Full

Notice: Unannounced

BHA Docket #:

Reason: Renewal

Exit Conference Date: 07/08/2021

Inspection Dates and Department Representative

07/08/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 14

Residents Served: 11

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 11

Number of Residents Who:

Receive Supplemental Security Income: 11

Are 60 Years of Age or Older: 3

Diagnosed with Mental Illness: 10

Diagnosed with Intellectual Disability: 1

Have Mobility Need: 0

Have Physical Disability: 0

Inspections / Reviews

07/08/2021 Full

Lead Inspector: [REDACTED]

Follow-Up Type: POC Submission

Follow-Up Date: 08/05/2021

07/28/2021 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 07/26/2021

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 08/02/2021

Inspections / Reviews *(continued)*

02/22/2023 Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/08/2023

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

103f - Refrigerator/Freezer Temps

1. Requirements

2600.

103.f. Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

Description of Violation

The thermometer read 10 degrees Fahrenheit, in the freezer that was covered with ice.

POC Submission

Accept

The broken thermometer was removed from the freezer immediately. Direct Care Staff replaced the thermometer with a new one. The thermometer will be checked weekly to assure the temperature is 0 degrees or below Fahrenheit.

Licensee's Proposed Overall Completion Date: 07/09/2020

Document Submission

Implemented (█ - 02/22/2023)

Bew thermometer was placed in the freezer immediately.

Licensee's Proposed Overall Completion Date: 07/09/2021

252 - Record Content

2. Requirements

2600.

252. Content of Resident Records - Each resident's record must include the following information:

1. Name, gender, admission date, birth date and Social Security number.
2. Race, height, weight, color of hair, color of eyes, religious affiliation, if any, and identifying marks.
3. A photograph of the resident that is no more than 2 years old.
4. Language or means of communication spoken or used by the resident.
5. The name, address, telephone number and relationship of a designated person to be contacted in case of an emergency.
6. The name, address and telephone number of the resident's physician or source of health care.
7. The current and previous 2 years' physician's examination reports, including copies of the medical evaluation forms.
8. A list of prescribed medications, OTC medications and CAM.
9. Dietary restrictions.
10. A record of incident reports for the individual resident.

Description of Violation

Resident #1's record does not include a photo that is no more than 2 years old.

POC Submission

Accept

A new photo will be placed in the resident's files upon completion of a "New Resident's Application". The administrator will check all resident's files to assure that all files are completed and updated monthly.

Licensee's Proposed Overall Completion Date: 07/08/2021

Document Submission

Implemented (█ - 02/22/2023)

A new updated photo was labeled and dated and placed in the resident's file immediately.

Licensee's Proposed Overall Completion Date: 07/08/2021