

Department of Human Services
Bureau of Human Service Licensing

August 29, 2022

[REDACTED], CHIEF OPERATING OFFICER
[REDACTED]
[REDACTED]
[REDACTED]

RE: CROSS KEYS VILLAGE - THE
BRETHREN HOME COMMUNITY
2990 CARLISLE PIKE
NEW OXFORD, PA, 17350
LICENSE/COC#: 34287

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/29/2022, 06/30/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
[REDACTED]

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: *CROSS KEYS VILLAGE - THE BRETHREN HOME COMMUNITY* License #: *34287* License Expiration: *11/10/2022*
Address: *2990 CARLISLE PIKE, NEW OXFORD, PA 17350*
County: *ADAMS* Region: *CENTRAL*

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

Name: *THE BRETHREN HOME COMMUNITY INC*
Address: *2990 CARLISLE PIKE, ATTN [REDACTED], NEW OXFORD, PA, 17350*
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *Other* Date: *06/10/2015* Issued By: *Adams County*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *92* Waking Staff: *69*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *06/30/2022*

Inspection Dates and Department Representative

06/29/2022 - On-Site: [REDACTED]
06/30/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *104* Residents Served: *87*

Secured Dementia Care Unit

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

Hospice

Current Residents: *5*

Number of Residents Who:

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *87*
Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *1*
Have Mobility Need: *5* Have Physical Disability: *0*

Inspections / Reviews

06/29/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *07/17/2022*

07/25/2022 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *08/01/2022*

08/29/2022 - Document Submission

Reviewer: [REDACTED] Follow-Up Type: *Not Required*

82c - Locking Poisonous Materials

1. Requirements

2600.

82.c. Poisonous materials shall be kept locked and inaccessible to residents unless all of the residents living in the home are able to safely use or avoid poisonous materials.

Description of Violation

On 6/29/22 at approximately 10:00 am, 4 one gallon bottles of Brite - C High Efficiency Laundry Detergent & Brightener were found in the 2900 hall laundry area of the first floor. These bottles were unlocked, unattended, and accessible to residents and contained a label stating to "immediately call a poison control center" label. Not all the residents of the home, including Resident #1, have been assessed capable of recognizing and using poisons safely.

Plan of Correction

Accept

- *On 6/29/2022, Administrator secured the cabinet noted to be unlocked containing poisonous materials in the 2900 hall laundry area of the first floor.*
- *An audit was conducted on 6/29/2022 by Resident Services Manager and Lead Housekeeper for all other cabinets in Personal Care. All additional cabinets containing poisonous materials in Personal Care were found to be secured.*
- *Administrator will re-educate the Personal Care Attendants and Resident Services Assistants on securing cabinets containing poisonous chemicals. Utilizing Relias, education began on 7/1/22 and will conclude by 8/31/22.*
- *Resident Services Manager will complete a 6 week-audit of all cabinets containing poisonous materials in Personal Care to verify that the materials are secured. Audits will be reviewed at monthly QI meetings. The next QI meeting will be 8/18/22.*

Completion Date: 08/31/2022

Document Submission

Implemented

- *On 6/29/2022, Administrator secured the cabinet noted to be unlocked containing poisonous materials in the 2900 hall laundry area of the first floor.*
- *An audit was conducted on 6/29/2022 by Resident Services Manager and Lead Housekeeper for all other cabinets in Personal Care. All additional cabinets containing poisonous materials in Personal Care were found to be secured.*
- *Administrator will re-educate the Personal Care Attendants and Resident Services Assistants on securing cabinets containing poisonous chemicals. Utilizing Relias, education began on 7/1/22 and will conclude by 8/31/22.*
- *Resident Services Manager will complete a 6 week-audit of all cabinets containing poisonous materials in Personal Care to verify that the materials are secured. Audits will be reviewed at monthly QI meetings. The next QI meeting will be 8/18/22.*

132b - Safety Inspection/Fire Drill

1. Requirements

2600.

132.b. A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.

Description of Violation

The last fire drill observed by a fire safety expert was conducted on 10/15/2019.

Plan of Correction

Accept

- *Supervised fire drill was been scheduled for 10/12/2022 @ 7:00PM, upon noting that the regulatory suspension of*

132b - Safety Inspection/Fire Drill (continued)

2600.132.b was lifted on 12/6/2021. While DHS was on-site, Maintenance Manager notified local fire official and supervised drill has been rescheduled for 7/26/2022 @ 6:30PM. Going forward, a reminder will be listed on the annual fire drill schedule.

- On 7/6/2022, an audit was conducted of all suspended regulations and all others were noted to be compliant.
- Administrator will conduct a monthly review of OLTL's list of suspended regulations due to the COVID-19 pandemic to verify compliance with regulatory suspensions that have been reinstated. Monthly review will be ongoing until all OLTL regulations have been reinstated. Audits will be reviewed at monthly QI meetings. The next QI meeting will be 8/18/22.

Completion Date: 07/31/2022

Document Submission**Implemented**

- Supervised fire drill was been scheduled for 10/12/2022 @ 7:00PM, upon noting that the regulatory suspension of 2600.132.b was lifted on 12/6/2021. While DHS was on-site, Maintenance Manager notified local fire official and supervised drill has been rescheduled for 7/26/2022 @ 6:30PM. Going forward, a reminder will be listed on the annual fire drill schedule.
- On 7/6/2022, an audit was conducted of all suspended regulations and all others were noted to be compliant.
- Administrator will conduct a monthly review of OLTL's list of suspended regulations due to the COVID-19 pandemic to verify compliance with regulatory suspensions that have been reinstated. Monthly review will be ongoing until all OLTL regulations have been reinstated. Audits will be reviewed at monthly QI meetings. The next QI meeting will be 8/18/22.