

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

December 11, 2025

[REDACTED]
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

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 10/23/2025 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:** 10/15/2026
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 Philadelphia

Staffing Hours

Resident Support Staff: 0 **Total Daily Staff:** 11 **Waking Staff:** 8

Inspection Information

Type: Partial **Notice:** Unannounced **BHA Docket #:**
Reason: Complaint **Exit Conference Date:** 10/23/2025

Inspection Dates and Department Representative

10/23/2025 - On-Site [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information			
License Capacity:	14	Residents Served:	10
Secured Dementia Care Unit			
In Home:	No	Area:	Capacity:
Residents Served:			
Hospice			
Current Residents:			
Number of Residents Who:			
Receive Supplemental Security Income:	10	Are 60 Years of Age or Older:	5
Diagnosed with Mental Illness:	9	Diagnosed with Intellectual Disability:	0
Have Mobility Need:	1	Have Physical Disability:	0

Inspections / Reviews

10/23/2025 Partial
Lead Inspector: [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 11/24/2025

12/01/2025 - POC Submission

Submitted By: [REDACTED] **Date Submitted:** 12/08/2025
Reviewer: [REDACTED] **Follow-Up Type:** Document Submission **Follow-Up Date:** 12/10/2025

Inspections / Reviews *(continued)*

12/11/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 12/08/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

3c - Post Current License

1. Requirements

2600.

3.c. The personal care home shall post the current license, a copy of the current license inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.

Description of Violation

On [REDACTED] the home's current license, dated [REDACTED] to [REDACTED], was not posted in a conspicuous and public place in the home. The posted license was dated [REDACTED] to [REDACTED]. Staff member A stated this was the most recent license received, unaware that a provisional license dated [REDACTED] to [REDACTED] had been issued.

Plan of Correction

Accept [REDACTED] - 12/01/2025)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 11/18/2025 by the The administrator to posted the current license immediately following inspection.

To enhance the currently compliant operations, on 11/18/2025 the The administrator will will check monthly to ensure that the current license is posted, with a completion date of 06/22/2025.

Effective 11/18/2025 the The administrator will perform monthly audits through 06/18/2025 to maintain ongoing compliance with posting the current license, a copy of the current license inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 11/18/2025

Implemented [REDACTED] - 12/11/2025)

51 - Criminal Background Check

3. Requirements

2600.

51. Criminal History Checks - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults).

Description of Violation

On [REDACTED], a criminal background check for staff member B, the Administrator, was not available for review.

Plan of Correction

Accept [REDACTED] 12/01/2025)

In response to the violation on 10/23/2025 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 11/18/2025 by the The administrator to has ordered a new criminal background to be immediately be kept in [REDACTED] files.

To enhance the currently compliant operations, on 11/18/2025 the The administrator will will ensure that the criminal background remains in staff files, with a completion date of 11/18/2025.

51 - Criminal Background Check (continued)

Effective 11/18/2025 the The administrator will perform monthly audits through 06/18/2026 to maintain ongoing compliance with having criminal history checks and hiring policies that are in accordance with the Older Adult Protective Services Act (35 P. S. § § 10225.101—10225.5102) and 6 Pa. Code Chapter 15 (relating to protective services for older adults). Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Proposed Overall Completion Date: 11/18/2025

Licensee's Proposed Overall Completion Date: 11/18/2025

Implemented ([redacted] 12/11/2025)

85b - Infestation

4. Requirements

2600.

85.b. There may be no evidence of infestation of insects or rodents in the home.

Description of Violation

- On [redacted] the home was infested with flies and gnats. Staff member A acknowledged that the insects were "more than annoying".

- Additionally, after lunch, a bed bug was found on this Licensing Representative's (LR) lap top. LR had packed up belongings and moved them off the dining table so residents could eat. After lunch, LR returned to work at table and, after a few minutes, the insect was noticed on top of the lap top.

Repeat Violation [redacted].

Plan of Correction

Accept ([redacted] - 12/01/2025)

In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 11/21/2025 by the The administrator to has contacted an exterminator to eliminate the problem immediately.

To enhance the currently compliant operations, on 11/21/2025 the The administrator will The administrator will continue to have staff check for bed bugs. If bed bugs are found, we will contact the exterminator immediately, with a completion date of 11/22/2025.

Effective 11/21/2025 the The administrator will perform weekly checks through 12/22/2025 to maintain ongoing compliance with ensuring there is no evidence of infestation of insects or rodents in the home. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Proposed Overall Completion Date: 11/21/2025

Licensee's Proposed Overall Completion Date: 11/21/2025

Implemented ([redacted] 12/11/2025)

101j7 - Lighting/Operable Lamp

5. Requirements

2600.

101.j. Each resident shall have the following in the bedroom:

- 7. An operable lamp or other source of lighting that can be turned on at bedside.

Description of Violation

Resident [redacted] does not have access to a working source of light that can be turned on/off at bedside.

Plan of Correction

Accept [redacted] - 12/01/2025)

In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 11/18/2025 by the The DCS to had immediately changed the lightbulb in resident [redacted] room to ensure [redacted] has access to a light next to [redacted] bed.

To enhance the currently compliant operations, on 11/18/2025 the The DCS will will check weekly to ensure all residents have access to a bedside lamp, with a completion date of 11/18/2025.

Effective 11/18/2025 the The Administrator will perform weekly checks through 12/18/2025 to maintain ongoing compliance with ensuring each resident has in their bedroom an operable lamp or other source of lighting that can be turned on at bedside. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Proposed Overall Completion Date: 11/18/2025

Licensee's Proposed Overall Completion Date: 11/18/2025

Implemented [redacted] - 12/11/2025)

121a - Unobstructed Egress

6. Requirements

2600.

121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

On [redacted] at approximately 9:15 AM, a resident's rollator, a piece of luggage and a small fan blocked egress from the home's emergency exit accessed through the first floor bedroom.

Repeat Violation: [redacted]

Plan of Correction

Accept [redacted] - 12/01/2025)

In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 11/18/2025 by the the DCS to has removed the resident's rollator and fan from in front of the door to ensure a safe emergency evacuation exit.

To enhance the currently compliant operations, on 11/18/2025 the The administrator will will check all rooms weekly to ensure there is no blockage in front of all evacuation exit routes, with a completion date of 12/18/2025.

121a - Unobstructed Egress (continued)

Effective 11/18/2025 the The administrator will perform weekly checks through 12/18/2025 to maintain ongoing compliance with ensuring stairways, hallways, doorways, passageways and egress routes from rooms and from the building are unlocked and unobstructed. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Proposed Overall Completion Date: 11/18/2025

Licensee's Proposed Overall Completion Date: 11/18/2025

Implemented [REDACTED] - 12/11/2025)

161e - Dietary Alternatives

7. Requirements

2600.

161.e. Dietary alternatives shall be available for a resident who has special health needs or religious beliefs regarding dietary restrictions.

Description of Violation

The home menus and alternatives are not designed to meet the needs of the resident's dietary restrictions due to health needs or religious beliefs.

Plan of Correction

Accept [REDACTED] - 12/01/2025)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 11/22/2025 by the The administrator to to ensure there are substitutes for each meal to meet the resident's needs and religious beliefs.

To enhance the currently compliant operations, on 11/22/2025 the The administrator will will check all menus monthly to ensure we are meeting the needs of all residents. We will also have a meal substitute request form hung on the bulletin board daily, with a completion date of 11/22/2025.

Effective 11/22/2025 the The administrator will perform monthly checks through 12/22/2025 to maintain ongoing compliance with ensuring dietary alternatives are available for a resident who has special health needs or religious beliefs regarding dietary restrictions. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Proposed Overall Completion Date: 11/22/2025

Licensee's Proposed Overall Completion Date: 11/22/2025

Implemented [REDACTED] - 12/11/2025)

162e - Menu Changes

8. Requirements

2600.

162.e. A change to a menu shall be posted in a conspicuous and public place in the home and shall be accessible to a resident in advance of the meal. Meal substitutions shall be made in accordance with § 2600.161 (relating to nutritional adequacy).

162e - Menu Changes (continued)

Description of Violation

On [redacted] Pork Bacon, Potatoes, Milk, Toast and OJ were listed on the menu for the breakfast meal. Scrapple and turkey sausage were served instead. Additionally, dinner for [redacted] is listed as Liver w/Onions & Gravy, Noodles, Beets. When Staff member C was asked what will be served, the response was "Dinner will be changed, probably chicken". No notice was provided to the residents in advance of the breakfast meal and as of 2:50 PM, no change to the dinner menu had been posted.

Plan of Correction

Accept [redacted] 12/01/2025)

In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 11/19/2025 by the The administrator to has trained the staff on the proper way to document a change on the menu.

To enhance the currently compliant operations, on 11/19/2025 the The administrator will will check weekly to to ensure the resident's are getting what is served on the calendar. If they're not that the menu is changed first thing in the morning before breakfast, with a completion date of 11/19/2022.

Effective 11/19/2025 the The administrator will perform weekly checks through 12/19/2025 to maintain ongoing compliance with posting a change to a menu in a conspicuous and public place in the home and is accessible to residents in advance of the meal, and to make meal substitutions in accordance with § 2600.161 (relating to nutritional adequacy). Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Proposed Overall Completion Date: 11/19/2025

Licensee's Proposed Overall Completion Date: 11/19/2025

Implemented [redacted] - 12/11/2025)

227d - Support Plan Medical/Dental

9. Requirements

2600.

227.d. Each home shall document in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services.

Description of Violation

Resident [redacted] date of admission is [redacted] Resident [redacted] Pre-Screen, dated [redacted] and completed by the Administrator, indicates the resident is legally blind. However the resident's assessment and support plan (RASP), dated [redacted] also completed by the Administrator, does not reference this information, including marking the resident as "Independent" under the Personal Care Need and Degree categories of "Managing Finances", "Using the Telephone", and "Writing Correspondence". Additionally the RASP indicates the resident has no "Sensory Need", including "Vision" and indicates the resident enjoys "watching movies" in the group activity field.

227d Support Plan Medical/Dental (continued)

Plan of Correction

Accept (█ - 12/01/2025)

In response to the violation on █ by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 11/21/2025 by the The administrator to has viewd and corrected resident █ RASO to ensure that we are aware of the proper care that is needed for this resident.

To enhance the currently compliant operations, on 11/21/2025 the The administrator will will check monthly with resident #1 to ensure to see if █ RASP needs to be updated, with a completion date of 12/21/2025.

Effective 11/21/2025 the The administrator will perform monthly checks through 12/21/2025 to maintain ongoing compliance with documenting in the resident's support plan the medical, dental, vision, hearing, mental health or other behavioral care services that will be made available to the resident, or referrals for the resident to outside services if the resident's physician, physician's assistant or certified registered nurse practitioner, determine the necessity of these services. This requirement does not require a home to pay for the cost of these medical and behavioral care services. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Proposed Overall Completion Date: 11/21/2025

Licensee's Proposed Overall Completion Date: 11/21/2025

Implemented (█ - 12/11/2025)

251d - Resident Records on Premises

10. Requirements

2600.

251.d. Separate resident records shall be kept on the premises where the resident lives.

Description of Violation

On █ LR requested to review three resident records. The record for resident █ was not available on site for review. According to staff member A, the resident's record was at the office.

Plan of Correction

Accept (█ - 12/01/2025)

In response to the violation on █ by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 11/18/2025 by the The administrator to has immediately brought resident █'s file to the home.

To enhance the currently compliant operations, on 11/18/2025 the The administrator will will no longer take the resident's files out of the office. All files will be updated at the home, with a completion date of 12/18/2025.

Effective 11/18/2025 the The administrator will perform weekly audits through 12/18/2025 to maintain ongoing compliance with keeping separate resident records on the premises where the resident lives, the administrator will check weekly to ensure all resident's files are placed in their proper place within the home. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Proposed Overall Completion Date: 11/18/2025

251d Resident Records on Premises (*continued*)

Licensee's Proposed Overall Completion Date: 11/18/2025

Implemented [REDACTED] 12/11/2025)