

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

August 4, 2026

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

RE: CHELTEN CHRISTIAN CRUSADE II  
4518 NORTH BROAD STREET  
PHILADELPHIA, PA, 19141  
LICENSE/COC#: 12328

[REDACTED],  
  
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/24/2026 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 II **License #:** 12328 **License Expiration:** 10/29/2026  
**Address:** 4518 NORTH BROAD STREET, PHILADELPHIA, PA 19141  
**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:** 08/31/2011 **Issued By:** City of Philadelphia

## Staffing Hours

**Resident Support Staff:** 0 **Total Daily Staff:** 12 **Waking Staff:** 9

## Inspection Information

**Type:** Partial **Notice:** Unannounced **BHA Docket #:**  
**Reason:** Monitoring **Exit Conference Date:** 06/24/2026

## Inspection Dates and Department Representative

06/24/2026 - On-Site [REDACTED]

## Resident Demographic Data as of Inspection Dates

## General Information

**License Capacity:** 14 **Residents Served:** 12

## Secured Dementia Care Unit

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

## Hospice

**Current Residents:** 0

## Number of Residents Who:

**Receive Supplemental Security Income:** 12 **Are 60 Years of Age or Older:** 11  
**Diagnosed with Mental Illness:** 12 **Diagnosed with Intellectual Disability:** 0  
**Have Mobility Need:** 0 **Have Physical Disability:** 0

## Inspections / Reviews

06/24/2026 Partial

**Lead Inspector:** [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 07/18/2026

07/15/2026 - POC Submission

**Submitted By:** [REDACTED] **Date Submitted:** 07/30/2026  
**Reviewer:** [REDACTED] **Follow-Up Type:** POC Submission **Follow-Up Date:** 07/20/2026

Inspections / Reviews (*continued*)

## 07/27/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 07/30/2026

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 07/31/2026

## 08/04/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 07/30/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

**131f - Fire Extinguisher Inspection****1. Requirements**

2600.

131.f. Fire extinguishers shall be inspected and approved annually by a fire safety expert. The date of the inspection shall be on the extinguisher.

**Description of Violation**

*The fire extinguishers in the home have not been inspected by a fire safety expert since March 2025.*

**Plan of Correction****Accept** [REDACTED] - 07/15/2026)

*In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 06/15/2026 by the The admministrator to ensure that all fire extinguishers have been inspected. All fire extinguishers were inspected on July 9th.*

*To enhance the currently compliant operations, on 07/15/2026 the The administrator will will check monthly to ensure to ensure all fire extinguishers have been inspected and are in compliance, with a completion date of 01/15/2026.*

*Effective 07/15/2026 the The administrator will perform monthly audits of fire extinguishers, through 01/15/2026 to maintain ongoing compliance with ensuring fire extinguishers are inspected and approved annually by a fire safety expert, and to ensure the date of the inspection is on each extinguisher. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.*

**Licensee's Proposed Overall Completion Date: 07/15/2026**

**Implemented** [REDACTED] - 08/04/2026)**183e - Storing Medications****2. Requirements**

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

**Description of Violation**

*On [REDACTED] at 9:45am, there was one white, round pill observed loose in the top drawer of the home's medication cabinet.*

**Plan of Correction****Accept** [REDACTED] 07/15/2026)

*In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 07/15/2026 by the The administrator to to remove any loose pills from med drawer.*

*To enhance the currently compliant operations, on 07/15/2026 the The administrator will check weekly to ensure all med drawers are free of any loose medication, with a completion date of 01/15/2026.*

**183e Storing Medications (continued)**

Effective 07/15/2026 the The administrator will perform weekly audits of medication storage, through 01/15/2026 to maintain ongoing compliance with ensuring prescription medications, OTC medications and CAM will be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 07/15/2026

Implemented [REDACTED] 08/04/2026)

**187b - Date/Time of Medication Admin.****3. Requirements**

2600.

187.b. The information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered.

**Description of Violation**

Resident [REDACTED] is prescribed [REDACTED] tab take 1 tablet by mouth twice daily for movement disorder, [REDACTED] cap take one capsule by mouth 4x daily for [REDACTED] and [REDACTED] cap take 1 capsule by mouth morning and bedtime for mood. Resident [REDACTED] stated that they received these medications on [REDACTED] at 8:00am; however, the medications were not initialed as administered on the resident's medication administration record.

Resident [REDACTED] is prescribed [REDACTED] chew 1 tablet everyday by oral route for [REDACTED] [REDACTED] two tablets by mouth daily for vitamin supplement, [REDACTED] take one tab twice a day by oral route for [REDACTED] [REDACTED] capsule take one capsule by mouth twice daily for anxiety, [REDACTED] tab take 1 tablet once daily for [REDACTED] [REDACTED] apply a thin layer to affected area twice daily. Resident [REDACTED] stated that they received these medications on [REDACTED] at 8:00am; however, the medications were not initialed as administered on the resident's medication administration record.

Repeat Violation: [REDACTED] et al; [REDACTED]

**Plan of Correction**

Accept [REDACTED] 07/27/2026)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 07/16/2026 by the The administrator to has taken the necessary steps to ensure that medication is properly administered.

To enhance the currently compliant operations, on 07/16/2026 the The administrator will has assigned another DCS/med tech that is certified in medication administration (since 1/21/25) to administer medication, with a completion date of 01/16/2026.

**187b - Date/Time of Medication Admin. (continued)**

Effective 07/17/2026 the The administrator will perform weekly audits of medication documentation, through 07/16/2026 to maintain ongoing compliance with ensuring the information in subsection (a)(13) and (14) shall be recorded at the time the medication is administered. DCS Andy Autrey will be recertified on 07/17/2026. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 07/16/2026

Implemented [REDACTED] 08/04/2026)

**187d - Follow Prescriber's Orders****4. Requirements**

2600.

187.d. The home shall follow the directions of the prescriber.

**Description of Violation**

Resident [REDACTED] is prescribed [REDACTED] tab- take 1 tablet by mouth every 12 hours for [REDACTED]. This medication was not administered at 8:00pm on [REDACTED].

Resident [REDACTED] is prescribed [REDACTED] tab- take one tablet by mouth two times per day for movement disorder- this medication was not administered on [REDACTED] at 8:00am.

Resident [REDACTED] is prescribed [REDACTED] tab- take one tablet by mouth at bedtime for [REDACTED], [REDACTED] tab- take one tablet by mouth at bedtime for [REDACTED] and [REDACTED] tab- take one tablet by mouth at bedtime for mood. These medications were not administered to Resident [REDACTED] on [REDACTED] at 8:00pm.

Repeat Violation: [REDACTED] et al; [REDACTED]

**Plan of Correction**

Accept [REDACTED] - 07/27/2026)

In response to the violation on [REDACTED] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 07/17/2026 by the The administrator to to ensure that we have a new qualified and certified staff member to administer medication.

To enhance the currently compliant operations, on 07/17/2026 the The administrator will has a different DCS member that is certified for medication administration administering the medication to ensure the proper steps are taken in medication administration. The DCS was certified on January 21, 2025 and will be recertified on 07/17/2026, with a completion date of 07/17/2026.

**187d - Follow Prescriber's Orders (continued)**

*Effective 07/17/2026 the The administrator will perform weekly audits of med admin, through 01/01/2026 to maintain ongoing compliance with ensuring the home must follow the directions of the prescriber. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.*

**Licensee's Proposed Overall Completion Date: 07/17/2026**

**Implemented [REDACTED] 08/04/2026)**