

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE

CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to CLARISES PERSONAL CARE RESIDENCE, INC.

To operate CLARISES PERSONAL CARE RESIDENCE

Located at 514 EAST ROOSEVELT BOULEVARD, PHILADELPHIA, PA 19120

ADDRESS OF SATELLITE SITE ADDRESS OF SATELLITE SITE

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To provide Personal Care Homes

The total number of persons which may be cared for at one time may not exceed 9
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller. (MAXIMUM CAPACITY)

Restrictions: _____

This certificate is granted in accordance with the Public Welfare Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from November 1, 2011 until November 1, 2012,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **134090**

Robert E. Robinson
ISSUING OFFICER

[Signature]
DIRECTOR

NOTE: This certificate is issued for the above site(s) only and is not transferable
and should be posted in a conspicuous place in the facility.



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF PUBLIC WELFARE
PO BOX 2675
HARRISBURG, PENNSYLVANIA 17105-2675

ADULT RESIDENTIAL LICENSING

PHONE: (717) 783-3670
FAX: (717) 783-5662

NOV 08 2011

Ms. J. Allison Almarales, Administrator
Clarises Personal Care Residence, Inc.
Clarises Personal Care Residence
514 East Roosevelt Boulevard
Philadelphia, Pennsylvania 19120

Dear Ms. Almarales:

As a result of the Department of Public Welfare's licensing inspection on August 18, 2011 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.

A regular license is being issued based on the enclosed Violation Report. Your license is enclosed.

Sincerely,

A handwritten signature in black ink, appearing to read 'R. Melusky', with a long horizontal line extending to the right.

Ronald Melusky
Director

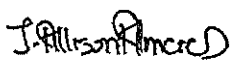

Enclosures
License
Violation Report

VIOLATION REPORT
PERSONAL CARE HOMES - 55 Pa.Code Chapter 2600

NAME AND ADDRESS OF PERSONAL CARE HOME Clarises Personal Care Residence, 514 East Roosevelt Avenue Philadelphia, PA 19120		CURRENT LICENSE NUMBER 134090	
INSPECTION DATES (Include all dates of the inspection) 08/18/2011		REGIONAL REPRESENTATIVE John Bungo, Lynn Loudenslager	
PRINTED NAME AND TITLE OF LEGAL ENTITY REPRESENTATIVE SIGNING PLAN OF CORRECTION (Required on FIRST PAGE only unless multiple representatives produce the plan)			
SIGNATURE OF LEGAL ENTITY <i>J. Allison Ahmed</i>	DATE SEPT 12 TH 2011	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION <i>[Signature]</i>	DATE 10/28/11


REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
25a1 Prior to admission, or within 24 hours after admission, a written resident-home contract between the resident and the home shall be in place. The administrator or a designee shall complete this contract and review and explain its contents to the resident and the resident's designated person if any, prior to signature.	Resident No. 1 was admitted to the home on 2/3/11. Although the contract was effective that date, the resident did not sign the contract until 2/8/11.	SEPT 12 TH 2011	<p style="text-align: center;">To Ensure Compliance The Administrator Has Develop A Checklist System So This Violation Will Not Be Repeated.</p> <p style="text-align: right;"><i>The checklist will be implemented on the first day of each resident's admission and checked annually thereafter</i> LAC 10/29/11</p>	<p style="text-align: center;">Steps have been taken to correct violation; full compliance is not verifiable</p> <p style="text-align: right;"><i>10/31/11</i> Date <i>LAC</i> Initials (DPW)</p>

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SIGNATURE OF LEGAL ENTITY 	DATE Sept 12 th 2011	REGIONAL LICENSING APPROVAL OF PLAN OF CORRECTION 	DATE 10/22/11

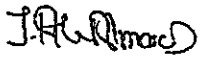

REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
54a Direct care staff persons shall have the following qualifications: (1) Be 18 years of age or older, except as permitted in subsection (b). (2) Have a high school diploma, GED or active registry status on the Pennsylvania nurse aide registry. (3) Be free from a medical condition, including drug or alcohol addiction, that would limit direct care staff persons from providing necessary personal care	Staff person A hired on 1/31/11 did not have a high school diploma, GED, or active status on the PA Nurse Registry.	Sept 12 th 2011	<p>THE ADMINISTRATOR HAS IMPLEMENT A CHECKLIST SYSTEM FOR ALL STAFF HIRED.</p> <p>ATTACH IS COPY OF HIGH SCHOOL DIPLOMA.</p> <p>An audit of all current staff records has been completed. WAC 10/29/11</p>	<p>Steps have been taken to correct violation; full compliance is not verifiable</p> <p>10/31/11 Date Initials (DPW) WAC</p>

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services with reasonable skill and safety.		SEPT 12 TH 2011		

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REGULATION 55 Pa.Code §2600	VIOLATION	DATE COMPLIANCE VERIFIED BY	PLAN OF CORRECTION (include a step-by-step plan to correct the specific violation, as well as a plan to assure the violation does not recur)	DATE COMPLIANCE VERIFIED BY
history. (7) Medication regimen, contraindicated medications, medication side effects and the ability to self-administer medications. (8) Body positioning and movement stimulation for residents, if appropriate. (9) Health status. (10) Mobility assessment, updated annually or at the Department's request.		10/22/11 SEPT 12 TH , 2011	The administrator or designee will review each medical evaluation upon completion. LWZ 10/22/11	

