



**pennsylvania**  
DEPARTMENT OF PUBLIC WELFARE

OCT 04 2013

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 1, 2013, of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) must be maintained.

Your regular license for the period November 1, 2013 to November 1, 2014 was issued on July 18, 2013. Your regular license remains in good standing.

Sincerely,

A handwritten signature in black ink, appearing to read "Ronald Melusky".

Ronald Melusky  
Director

Enclosure  
License Inspection Summary



Violation Report: 13400 - 08/01/2013 - Scharf, Amy  
PCH Name: CLARISES PERSONAL CARE RESIDENCE

1. REGULATION 55 Pa.Code §2600

2600.3(c) - The personal care home shall post the current license, a copy of the current licensing inspection summary issued by the Department and a copy of this chapter in a conspicuous and public place in the personal care home.

2a. DESCRIPTION OF VIOLATION

On 8/1/13, the home's current violation report was not posted in the home. Previous years' violation reports were posted.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

1. FAIL TO POST CURRENT VIOLATION

THE CURRENT VIOLATION WAS IN THE ADMINISTRATOR'S OFFICE FOR REVIEW, AND FORGOT TO RETURN.

IT HELPS FAMILIES, RESIDENTS AND VISITORS TO LEARN ABOUT APPLICABLE REGULATIONS AND THE REGULATORY COMPLIANCE STATUS OF THE HOME, AND THE HOME'S PLAN TO CORRECT ANY VIOLATIONS FOUND.

ALL CURRENT VIOLATION WILL REMAIN THERE TO PREVENT THIS FROM RECURRING  
THE ADMINISTRATOR WILL DO DAILY CHECKS TO ASSURE COMPLIANCE AS FROM 8/20/2013, AND ON-GOING

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

J.M. [Signature]

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page)

CLARISES PERSONAL CARE RESIDENCE

Date: Aug 22, 2013

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of

8/29/13  
(Date)

Plan of correction implementation status as of

9/26/13  
(Date)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

The above plan of correction was approved by

CM  
(Initials)

Violation Report: 13409 - 08/01/2013 - Scharpf, Amy  
PCH Name: CLARISES PERSONAL CARE RESIDENCE

1. REGULATION 55 Pa.Code §2800

2600, 123(o) - For a home serving nine or more residents, an emergency evacuation diagram of each floor showing corridors, line of travel to exit doors and location of the fire extinguishers and pull signals shall be posted in a conspicuous and public place on each floor.

2a. DESCRIPTION OF VIOLATION

The home's emergency evacuation diagrams on the first and second floors of the home do not include line of travel to the exit doors.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The Emergency Evacuation diagram fail To Have Line of Travel To Exit Doors AS NOTED IN 2600:123 (c) which helps visitors, AND RESIDENTS IN THE EVENT OF A FIRE OR OTHER EMERGENCY.

WE HAVE NOW UPDATED OUR EVACUATION DIAGRAMS WITH LINE OF TRAVEL. (A COPY IS ATTACHED)

Administrator will monitor diagrams to ensure that they remain posted and contain all required content  
8/29/13  
cm

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

J. Ruiz (Signature)

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page)

CLARISES PERSONAL CARE RESIDENCE

Date Aug 22, 2013

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(Initials)

Violation Report: 13409 - 08/01/2013 - Scharpf, Amy  
PCH Name: CLARISES PERSONAL CARE RESIDENCE

1. REGULATION 86 Pa.Code §2600  
2600.141(b)(1) - A resident shall have a medical evaluation at least annually.

2a. DESCRIPTION OF VIOLATION

Resident #1's most recent medical evaluation was completed on 1/29/13. The previous medical evaluation was completed on 1/2/12. This is one year and 27 days apart.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

*Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.*

See Attached

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page) *J.M. [Signature]*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page) CLARISES PERSONAL CARE RESIDENCE

Date *Aug, 22, 2013*

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(Date)

Plan of correction implementation status as of 9/26/13  
(Date)

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Violation Report: 13409 - 08/01/2013 - Scharpf, Amy  
PCH Name: CLARISES PERSONAL CARE RESIDENCE

1. REGULATION 68 Pa.Code §2600

2600.162(c) - Menus, stating the specific food being served at each meal, shall be prepared for 1 week in advance and shall be followed. Weekly menus shall be posted 1 week in advance in a conspicuous and public place in the home.

2a. DESCRIPTION OF VIOLATION

The home posts menus for a month at a time. On 8/1/13, the menu that was posted was for the month of July 2013. There was no menu posted for the remainder of that week and the next week.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

REGULATIONS 162 (C) STATES WEEKLY MENUS SHALL BE POSTED ONE WEEK IN ADVANCE. IT'S BENEFICIAL FOR THE RESIDENTS SO THEY CAN PLAN THEIR MEALS IN ADVANCE.

ALL AT CLARISES PCH HAS BEEN RE-EDUCATED ABOUT POSTING MENUS

ALL RESPONSIBLE PARTY HAS BEEN MET TO ADDRESS THIS MATTER AND HAS REVIEWED THE GUIDELINES REGARDING THIS VIOLATION.

THE MENUS ARE NOW UPDATED AND POSTED

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
(Required on EVERY Page)

*J. Almond*

Printed Name and Title of Legal Entity Representative  
(Required on EVERY Page)

CLARISES PERSONAL CARE RESIDENCE

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