

Department of Human Services
Bureau of Human Service Licensing

October 3, 2022

[REDACTED]
CLARISES PERSONAL CARE RESIDENCE INC
514 EAST ROOSEVELT BOULEVARD
PHILADELPHIA, PA, 19120

RE: CLARISES PERSONAL CARE
RESIDENCE
514 EAST ROOSEVELT BOULEVARD
PHILADELPHIA, PA, 19120
LICENSE/COC#: 13409

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/30/2021 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
Mia Johnson

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

Facility Information

Name: *CLARISES PERSONAL CARE RESIDENCE* License #: *13409* License Expiration: *11/01/2022*
Address: *514 EAST ROOSEVELT BOULEVARD, PHILADELPHIA, PA 19120*
County: *PHILADELPHIA* Region: *SOUTHEAST*

Administrator

Name: [REDACTED] Phone: *2154578774* Email: [REDACTED]

Legal Entity

Name: *CLARISES PERSONAL CARE RESIDENCE INC*
Address: *514 EAST ROOSEVELT BOULEVARD, PHILADELPHIA, PA, 19120*
Phone: *2154578774* Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *7* Waking Staff: *5*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Monitoring* Exit Conference Date: *09/30/2021*

Inspection Dates and Department Representative

09/30/2021 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *9* Residents Served: *7*

Secured Dementia Care Unit

In Home: <i>No</i>	Area:	Capacity:	Residents Served:
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Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: <i>4</i>	Are 60 Years of Age or Older: <i>7</i>
Diagnosed with Mental Illness: <i>7</i>	Diagnosed with Intellectual Disability: <i>1</i>
Have Mobility Need: <i>0</i>	Have Physical Disability: <i>0</i>

Inspections / Reviews

09/30/2021 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *10/19/2021*

10/28/2021 - POC Submission

Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *10/31/2021*

Inspections / Reviews (*continued*)

10/03/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

224a - Preadmission Screen Form

1. Requirements

2600.

224.a. A determination shall be made within 30 days prior to admission and documented on the Department's preadmission screening form that the needs of the resident can be met by the services provided by the home.

Description of Violation

Resident #1 was admitted to the home on [REDACTED]; however, the resident's preadmission screening form was completed on 7/3/20.

Plan of Correction**Accept**

All residents files were checked for "within 30 days prior admission". All residents files were checked for accuracy on their pre-admission form to ensure this violation is not repeated

Completion Date: 10/14/2021

Document Submission**Implemented**

All residents files were checked for "within 30 days prior admission". All residents files were checked for accuracy on their pre-admission form to ensure this violation is not repeated

This violation was submitted last year and accepted on

Completion Date: 10/14/2021 supporting documents attached