

Department of Human Services
Bureau of Human Service Licensing

August 11, 2022

[REDACTED] ARALES, ADMINISTRATOR
[REDACTED]
[REDACTED]
[REDACTED]

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 07/13/2022 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Sincerely,
[REDACTED]

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: *11/01/2023*
Address: *514 EAST ROOSEVELT BOULEVARD, PHILADELPHIA, PA 19120*
County: *PHILADELPHIA* Region: *SOUTHEAST*

Administrator

Name: [REDACTED] Phone: [REDACTED] Email: [REDACTED]

Legal Entity

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

Certificate(s) of Occupancy

Type: *I-1* Date: *02/06/1996* Issued By: *City of Philadelphia*

Staffing Hours

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

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *07/13/2022*

Inspection Dates and Department Representative

07/13/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

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

Secured Dementia Care Unit

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

Hospice

Current Residents: *NA*

Number of Residents Who:

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

Inspections / Reviews

07/13/2022 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *08/04/2022*

08/09/2022 - POC Submission

Inspections / Reviews *(continued)*

Reviewer: [REDACTED]

Follow-Up Type: *Document Submission* Follow-Up Date: *08/19/2022*

08/11/2022 - Document Submission

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

89a - Water Pressure

1. Requirements

2600.

89.a. The home must have hot and cold water under pressure in each bathroom, kitchen and laundry area to accommodate the needs of the residents in the home.

Description of Violation

On 7/13/22, the home did not have cold water in the hallway bathroom on the 1st floor. The home also did not have sufficient hot water in the bathroom on the 2nd floor back bedroom.

Plan of Correction

Accept

This was the sink in the bathroom on the 1st floor. It was caused by Calcium built-up in the faucet. The faucet was replaced with a new one. The 2nd Floor bathroom sink hot water had a slow running. The faucet was also replaced. Staff will do daily checks when cleaning the bathroom to prevent this violation from reoccurring.

Completion Date: 08/01/2022

Document Submission

Implemented

This was the sink in the bathroom on the 1st floor. It was caused by Calcium built-up in the faucet. The faucet was replaced with a new one. The 2nd Floor bathroom sink hot water had a slow running. The faucet was also replaced. Staff will do daily checks when cleaning the bathroom to prevent this violation from reoccurring.

102h - Toilet Paper

1. Requirements

2600.

102.h. Toilet paper shall be provided for every toilet.

Description of Violation

On 7/13/22, at approximately 11:45am, there was no toilet paper for the toilet in the 2nd floor hallway bathroom.

Plan of Correction

Accept

A resident took the toilet paper from the bathroom and put it in her bedroom. The resident was told not to remove toilet paper from bathrooms. Staff had additional training to ensure the toilet paper is in the bathroom at all times. A rack was also purchased that holds 5 toilet paper rolls. Staff to make sure all 5 rolls are there daily.

Completion Date: 07/27/2022

Document Submission

Implemented

A resident took the toilet paper from the bathroom and put it in her bedroom. The resident was told not to remove toilet paper from bathrooms. Staff had additional training to ensure the toilet paper is in the bathroom at all times. A rack was also purchased that holds 5 toilet paper rolls. Staff to make sure all 5 rolls are there daily.

183d - Prescription Current

1. Requirements

2600.

183.d. Only current prescription, OTC, sample and CAM for individuals living in the home may be kept in the home.

Description of Violation

The [REDACTED] that was prescribed to resident #1 was discontinued and expired. However, on 7/13/22 the medication was still on the medication cart.

Plan of Correction

Accept

[REDACTED] was expired and discontinued and left in medication cart. Administrator and staff will do weekly checks to

183d - Prescription Current (continued)

remove any expired and discontinued medications from cart to ensure this is not repeated.

Completion Date: 07/27/2022

Document Submission**Implemented**

Mucinex was expired and discontinued and left in medication cart. Administrator and staff will do weekly checks to remove any expired and discontinued medications from cart to ensure this is not repeated.

183f - Discontinued Medications**1. Requirements**

2600.

183.f. Prescription medications, OTC medications and CAM that are discontinued, expired or for residents who are no longer served at the home shall be destroyed in a safe manner according to the Department of Environmental Protection and Federal and State regulations. When a resident permanently leaves the home, the resident's medications shall be given to the resident, the designated person, if any, or the person or entity taking responsibility for the new placement on the day of departure from the home.

Description of Violation

The home had discontinued and expired [REDACTED] on the medication cart for resident #1.

Plan of Correction**Accept**

The home had expired and discontinued medication in the medication cart. The medication cart was checked for expired and discontinued and left in medication cart. Administrator and staff will do weekly checks to remove any expired and discontinued medications from cart to ensure this is not repeated.

Completion Date: 07/27/2022

Document Submission**Implemented**

The home had expired and discontinued medication in the medication cart. The medication cart was checked for expired and discontinued and left in medication cart. Administrator and staff will do weekly checks to remove any expired and discontinued medications from cart to ensure this is not repeated.

187a - Medication Record**1. Requirements**

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

1. Resident's name.
2. Drug allergies.
3. Name of medication.
4. Strength.
5. Dosage form.
6. Dose.
7. Route of administration.
8. Frequency of administration.
9. Administration times.
10. Duration of therapy, if applicable.
11. Special precautions, if applicable.
12. Diagnosis or purpose for the medication, including pro re nata (PRN).
13. Date and time of medication administration.
14. Name and initials of the staff person administering the medication.

187a - Medication Record (continued)

Description of Violation

Resident #1's medication administration record does not include the diagnosis or purpose for their medication.

Plan of Correction

Accept

The pharmacy is required to fill the diagnosis on MARs and administrator and staff to verify all MARS for completeness, which we failed to do. This was corrected and staff checked all MARs and will check monthly when we received them for any missing diagnosis. When receiving MARs from the pharmacy the administrator will check all columns for completeness including diagnosis before placing MARs in charts.

Completion Date: 08/01/2022

Document Submission

Implemented

The pharmacy is required to fill the diagnosis on MARs and administrator and staff to verify all MARS for completeness, which we failed to do. This was corrected and staff checked all MARs and will check monthly when we received them for any missing diagnosis. When receiving MARs from the pharmacy the administrator will check all columns for completeness including diagnosis before placing MARs in charts.

187b - Date/Time of Medication Admin.

1. 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

On 7/13/22 at 10:30am, resident #2's medication administration record or MAR was signed before the actual time of the medication administration. The PM meds were signed off on 7/13/22 for:

12PM and 5PM [redacted]

12PM and 5PM [redacted]

12PM and 5PM [redacted]

12PM and 8PM [redacted]

5PM [redacted]

8PM - [redacted]

Plan of Correction

Accept

Medication is documented at the time the medication is administered. Staff initialed in the MARs that medication was administrated at times that did not come up yet. Staff realized that the lines are close together and thought she was signing the prior date and time. Staff will now use ruler as a marker to stay on the correct date to prevent this violation from reoccurring.

Completion Date: 08/01/2022

Document Submission

Implemented

Medication is documented at the time the medication is administered. Staff initialed in the MARs that medication was administrated at times that did not come up yet. Staff realized that the lines are close together and thought she was signing the prior date and time. Staff will now use ruler as a marker to stay on the correct date to prevent this violation from reoccurring.