

Department of Human Services
Bureau of Human Service Licensing

October 17, 2022

[REDACTED]
WEST SIDE KOZY COMFORT PERSONAL CARE HOME INC
906 SOUTH MAIN AVENUE
SCRANTON, PA, 18504

RE: WEST SIDE KOZY COMFORT
PERSONAL CARE HOME
906 SOUTH MAIN AVENUE
SCRANTON, PA, 18504
LICENSE/COC#: 20449

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 09/29/2022 of the above facility, no regulatory citations have been identified as a result of this inspection.

Sincerely,
Michele Moskalczyk
Human Services Licensing Supervisor

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: *WEST SIDE KOZY COMFORT PERSONAL CARE HOME* License #: *20449* License Expiration: *09/20/2023*
Address: *906 SOUTH MAIN AVENUE, SCRANTON, PA 18504*
County: *LACKAWANNA* Region: *NORTHEAST*

Administrator

Name: [REDACTED] Phone: *5703415840* Email: [REDACTED]

Legal Entity

Name: *WEST SIDE KOZY COMFORT PERSONAL CARE HOME INC*
Address: *906 SOUTH MAIN AVENUE, SCRANTON, PA, 18504*
Phone: *5703415840* Email: [REDACTED]

Certificate(s) of Occupancy

Type: *Other* Date: *04/01/2017* Issued By: *City of Scranton*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *33* Waking Staff: *25*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
Reason: *Interim* Exit Conference Date: *09/29/2022*

Inspection Dates and Department Representative

09/29/2022 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *36* Residents Served: *33*

Secured Dementia Care Unit

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

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *32* Are 60 Years of Age or Older: *22*
Diagnosed with Mental Illness: *33* Diagnosed with Intellectual Disability: *5*
Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

09/29/2022 - Partial
Lead Inspector: [REDACTED] Follow-Up Type: *Not Required*

NO DEFICIENCIES FOUND