

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

August 25, 2023

[REDACTED], ADMINISTRATOR
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 08/02/2023 of the above facility, we have determined that your submitted plan of correction is fully implemented. Continued compliance must be maintained.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,

[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

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: 11 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: 08/02/2023

Inspection Dates and Department Representative

08/02/2023 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: 0
 Number of Residents Who:
 Receive Supplemental Security Income: 4 Are 60 Years of Age or Older: 6
 Diagnosed with Mental Illness: 7 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 0 Have Physical Disability: 0

Inspections / Reviews

08/02/2023 - Full
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 08/18/2023

08/17/2023 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 08/25/2023
 Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 08/22/2023

Inspections / Reviews *(continued)*

08/24/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 08/25/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 08/26/2023

08/25/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 08/25/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

89b - Hot Water Temperature

1. Requirements

2600.

89.b. Hot water temperature in areas accessible to the resident may not exceed 120°F.

Description of Violation

On 8/2/2023, at 1:00 pm, the hot water temperature at the 2nd floor front bathroom measured 124.6 degrees Fahrenheit and at 1:55 pm, it was measured at 122.3 degrees Fahrenheit.

Plan of Correction

Accept (████ - 08/24/2023)

We had a new hot water tank installed and the administrator failed to test the water after installation. The hot water tank meter was lowered by a licensed plumber on 8/2/2023 during inspection and the temperature started going down before inspection was over. The hot water is now at the temperature it should be according to state regulations. The hot water is being tested by a thermometer twice per week by Administrator and recorded on a log sheet to ensure violation is not repeated. Log attached.

Licensee's Proposed Overall Completion Date: 08/21/2023

Implemented (████ 08/25/2023)

185a - Implement Storage Procedures

2. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

On 7/23/2023, resident 1's glucometer had a reading of █████ but was documented on the Medication Administration record as 146.

Plan of Correction

Accept (████ - 08/24/2023)

Safe storage, access, security and distribution and use of medication and medical equipment is in place by trained staff. The violation was the glucometer reading was written incorrectly in a notebook that is used to record daily glucometer readings. It was a typo error in transferring the number from the glucometer to the notebook. Administrator will recheck glucometer twice before recording number to be transferred into notebook to ensure this error does not repeat. Additionally, training on the importance of recording glucometer readings correctly was done 8/21/2023 to all staff from the website of Centers for Disease Control and Prevention.

In addition to the above plan of correction: a staff person authorized to administer medications will audit all glucometers each shift to ensure correct readings are documented. The administrator or designated staff person will audit all glucometers weekly to ensure correct readings are documented. MJ

Licensee's Proposed Overall Completion Date: 08/21/2023

Implemented (████ - 08/25/2023)

191 - Resident Right to Refuse

3. Requirements

2600.

191 - Resident Right to Refuse (continued)

191. Resident Education - The home shall educate the resident of the right to question or refuse a medication if the resident believes there may be a medication error. Documentation of this resident education shall be kept.

Description of Violation

Resident 1, admitted [REDACTED] has not been educated to the resident's right to refuse medication if the resident believes that there may be a medication error. The home could not provide written documentation.

Plan of Correction

Accept [REDACTED] - 08/17/2023)

The resident was admitted into the home on 2/1/2023 and was not educated on his right to refuse medication. The resident has since been educated on 8/03/2023 and know his rights to question or refuse medication at his will. He has signed the document and it was added to his file. Staff will do weekly checks to ensure all documents are signed in all residents files.

Licensee's Proposed Overall Completion Date: 08/14/2023

Implemented [REDACTED] - 08/25/2023)