



pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to **KOMFORT KEEPERS HOME CARE LLC**
LEGAL ENTITY

To operate **KOMFORT KEEPERS HOME CARE**
NAME OF FACILITY OR AGENCY

Located at **2517 NORTH 24TH STREET, PHILADELPHIA, PA 19132**
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE/SERVICE LOCATION

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ADDRESS OF SATELLITE SITE/SERVICE LOCATION

To provide **Personal Care Homes**
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed **8**
(MAXIMUM CAPACITY)
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

Restrictions: _____

This certificate is granted in accordance with the Human Services Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from **March 12,** **2025** until **March 12,** **2026**,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **148190**

Janette Biderup
ISSUING OFFICER

Juliet Marsala
DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility.



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Emailing date: March 12, 2025

[REDACTED]
[REDACTED]
Komfort Keepers Home Care, LLC
[REDACTED]
[REDACTED]

RE: Komfort Keepers Home Care, LLC
2517 North 24th Street
Philadelphia, Pennsylvania 19132
License #: 148190

Dear [REDACTED]:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing (Department), licensing inspections on December 16, 2024, we have found the above facility to be in compliance with 55 Pa. Code Ch. 2600 (relating to Personal Care Homes). Therefore, a regular license is being issued. Your license is enclosed.

Sincerely,

A handwritten signature in black ink that reads "Juliet Marsala".

Juliet Marsala
Deputy Secretary
Office of Long-term Living

Enclosures
License
Licensing Inspection Summary



Sent via e-mail [REDACTED]
Sent via e-mail [REDACTED]
March 12, 2025

[REDACTED]
[REDACTED]
Komfort Keepers Home Care, LLC
[REDACTED]
[REDACTED]

RE: Komfort Keepers Home Care, LLC
2517 North 24th Street
Philadelphia, Pennsylvania 19132
License #: 14819

Dear [REDACTED]:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing (Department) review on January 22, 2025 and March 11, 2025 of the above facility, we have determined that your submitted plan of correction for the December 16, 2024 inspection is not fully implemented. Correction of these violations in accordance with the specified plan of correction is required. Continued compliance must be maintained.

Sincerely,

[REDACTED]
[REDACTED]
[REDACTED]

Enclosure
Licensing Inspection Summary

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

Facility Information

Name: *KOMFORT KEEPERS HOME CARE* License #: *14819* License Expiration: *02/23/2025*
Address: *2517 NORTH 24TH STREET, PHILADELPHIA, PA 19132*
County: *PHILADELPHIA* Region: *SOUTHEAST*

Administrator

Name: [REDACTED]

Legal Entity

Name: *KOMFORT KEEPERS HOME CARE LLC*
Address: [REDACTED]

Certificate(s) of Occupancy

Type: *R-4* Date: *05/21/2021* 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, Provisional* Exit Conference Date: *12/16/2024*

Inspection Dates and Department Representative

12/16/2024 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *8* 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: *7* Are 60 Years of Age or Older: *4*
Diagnosed with Mental Illness: *7* Diagnosed with Intellectual Disability: *0*
Have Mobility Need: *0* Have Physical Disability: *7*

Inspections / Reviews

12/16/2024 - Full

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *01/16/2025*

01/22/2025 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 02/07/2025

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 02/05/2025

03/12/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/07/2025

Reviewer: [REDACTED]

Follow-Up Type: Exception

26b - Quality Management Plan Content

1. Requirements

2600.

26.b. The quality management plan shall address the periodic review and evaluation of the following:

1. The reportable incident and condition reporting procedures.
2. Complaint procedures.
3. Staff person training.
4. Licensing violations and plans of correction, if applicable.
5. Resident or family councils, or both, if applicable.

Description of Violation

The home did not document resident council meeting minutes for 11/15/2024 and 12/9/2024.

Plan of Correction

Accept [REDACTED] - 01/22/2025)

In response to the violation on 12/16/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 12/23/2024 by the [REDACTED] Komfort Keepers PCH conducts monthly resident meetings. The discussion consists of any issues that the [REDACTED] may have. The Administrator also opens the floor to the residents to also voice their opinions, make suggestions, or concerns that they may have. It's all a collaborative effort to ensure the safety and comfortability of all residents in the home. A resident meeting was held on 12/23/2024.

To enhance the currently compliant operations, on 01/14/2025 the Administrator will notate and document monthly resident council meetings. Once the meeting has been conducted, The Administrator will add any issues or suggestions from the residents to the meeting notes if any. Once the meeting has been completed, the Administrator will have all residents sign the sheet along with the Administrator. Date and time of every meeting will be included, with a completion date of 12/23/2024 .

Effective 01/14/2025 the Administrator will perform quarterly audits beginning 1/ 1/2025 through 1/1/2026 to maintain ongoing compliance. The current violation was to address monthly resident meetings , however having a quality management plan that address the periodic review and evaluation of reportable incident and condition reporting procedures, complaint procedures, staff person training, licensing violations and plans of correction, if applicable, and resident or family councils, or both, if applicable. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 01/14/2025

Implemented [REDACTED] - 03/11/2025)

103f - Refrigerator/Freezer Temps

2. Requirements

2600.

103.f. Food requiring refrigeration shall be stored at or below 40°F. Frozen food shall be kept at or below 0°F. Thermometers are required in refrigerators and freezers.

Description of Violation

On 12/16/2024, there was no thermometer in the overflow freezer in the main kitchen.

Plan of Correction

Accept [REDACTED] - 01/22/2025)

103f - Refrigerator/Freezer Temps (continued)

In response to the violation on 12/16/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 12/23/2024 by the Administrator. Komfort Keepers has a main freezer and we recently just added a smaller overflow freezer as well. Our main deep freezer has a thermometer. The overflow freezer has a new thermometer placed in the bottom of the freezer where it can be visibly seen.

To enhance the currently compliant operations, on 01/14/2025 the Administrator will ensure that both thermometers in each freezer are working and legible. The Administrator recognizes the importance to maintain the correct temperature for the refrigerator and freezers, with a completion date of 12/23/24.

Effective 1/14/25 the Administrator will perform a quarterly inspection of thermometers through 1/14/26 to maintain ongoing compliance. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 01/14/2025

103i - Outdated Food

3. Requirements

2600.

103.i. Outdated or spoiled food or dented cans may not be used.

Description of Violation

On 12/16/2024, there was unlabeled, undated mushrooms, sausage, and pitcher of juice in the main kitchen refrigerator.

On 12/16/2024, there was unlabeled and undated frozen hashbrowns and chicken nuggets in the freezer in the main kitchen.

Plan of Correction

Accept [redacted] - 01/22/2025)

In response to the violation on 12/16/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 12/23/2024 by the Administrator. Komfort Keepers PCH bags and labels all incoming groceries. We were currently using permanent markers to write on bags. The Administrator noticed that overtime the writing on the freezer bags would blur. The Administrator has purchased labels that adhere directly onto the freezer bags, perfect for legibility and longer lasting print. This will decrease the amount of faded labeling on the bags.

To enhance the currently compliant operations, on 12/23/2024 the Administrator has addressed this issue with all DCS. They were informed not only to label monthly groceries but also to label intermittent groceries in an effort to have a label and date on all food in both freezers along with food in the refrigerator, with a completion date of 12/23/2024.

103i - Outdated Food (continued)

Effective 1/14/25 the Administrator will perform a monthly review of all freezer bags to ensure that all food is labeled and dated to maintain ongoing compliance. It will commence starting 1/14/25 through 1/14/26. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 01/14/2025

107a - Emergency Preparedness

4. Requirements

2600.

107.a. The administrator shall have a copy and be familiar with the emergency preparedness plan for the municipality in which the home is located.

Description of Violation

Staff person A did not have a copy of the emergency preparedness plan for the local municipality.

Plan of Correction

Accept [redacted] - 01/22/2025)

In response to the violation on 12/16/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 01/13/2025. The Administrator took immediate action to ensure the emergency preparedness plan is available. The plan has been put into a binder and placed on the table outside the office of the Administrator.

To enhance the currently compliant operations, on 01/13/2025 the Administrator will conduct a staff meeting on Saturday January 25, 2025. All staff will review and become familiar with the plan. They will also leave the communication in its original placement outside the Administrator's office. Any new information that arises will be added to the emergency preparedness plan, with a completion date of 01/20/2025.

Effective 1/20/25 the Administrator will perform a monthly audit through 1/20/26 to maintain ongoing compliance. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 01/20/2025

Implemented [redacted] - 03/11/2025)

107b - Emergency Procedures

5. Requirements

2600.

107.b. The home shall have written emergency procedures that include the following:

1. Contact information for each resident's designated person.
2. The home's plan to provide the emergency medical information for each resident that ensures confidentiality.

107b - Emergency Procedures (continued)

- 3. Contact telephone numbers of local and State emergency management agencies and local resources for housing and emergency care of residents.
- 4. Means of transportation in the event that relocation is required.
- 5. Duties and responsibilities of staff persons during evacuation, transportation and at the emergency location. These duties and responsibilities shall be specific to each resident's emergency needs.
- 6. Alternate means of meeting resident needs in the event of a utility outage.

Description of Violation

On 12/16/2024, the home did not have written emergency procedures to include the following:

- *Contact information for each resident's designated person.*
- *The home's plan to provide the emergency medical information for each resident that ensures confidentiality.*
- *Contact telephone numbers of local and State emergency management agencies and local resources for housing and emergency care of residents.*
- *Means of transportation in the event that relocation is required.*
- *Duties and responsibilities of staff persons during evacuation, transportation and at the emergency location. These duties and responsibilities shall be specific to each resident's emergency needs.*
- *Alternate means of meeting resident needs in the event of a utility outage.*

Plan of Correction

Accept [redacted] - 01/22/2025)

In response to the violation on 12/16/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 01/13/2025. The Administrator has written emergency procedures that have been put into place and fully implemented. An upcoming staff meeting has been scheduled for January 2025. The emergency medical plan will be reviewed by the Administrator and all DCS personnel at that time.

To enhance the currently compliant operations, on 01/13/2025 the Administrator will ensure that the emergency medical plan is current and up to date. The Administrator will audit the file quarterly for continued compliance, with a completion date of 01/13/2025.

Effective 1/15/2025 the Administrator will perform quarterly reviews from 1/15/2025 through 1/15/2026 to maintain ongoing compliance with . Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 01/20/2025

Implemented [redacted] - 03/11/2025)

107d - Procedure Emergency Management Agency Submission

6. Requirements

- 2600.
- 107.d. The written emergency procedures shall be reviewed, updated and submitted annually to the local emergency management agency.

Description of Violation

The home's written emergency procedures have not been sent to the local emergency management agency October 1, 2022.

107d - Procedure Emergency Management Agency Submission (*continued*)**Plan of Correction**

Accept () - 01/22/2025)

In response to the violation on 12/16/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 01/13/2025. The Administrator has mailed out our written emergency procedures for Komfort Keepers PCH to emergency management agencies. A letter has been drawn and sent out to the proper authorities of the office of Emergency Management Service and also to the Police Commissioner Bethel. The Administrator will ensure that the letter is sent out annually. A reminder has been put in place for 30 days before the letter is due to be sent out. Any changes will be documented and highlighted.

To enhance the currently compliant operations, on 01/13/2025 the Administrator will continue to make sure that all plans and procedures are current and up to date. The Administrator will notify the appropriate persons as well, with a completion date of 01/13/2025.

Effective 1/15/2025 the Administrator will perform quarterly review through 1/15/2026 to maintain ongoing compliance with reviewing, updating and submitting annually, to the local emergency management agency, written emergency procedures. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 01/20/2025

Implemented () - 03/11/2025)

184a - Resident's Meds Labeled

7. Requirements

2600.

184.a. The original container for prescription medications shall be labeled with a pharmacy label that includes the following:

1. The resident's name.
2. The name of the medication.
3. The date the prescription was issued.
4. The prescribed dosage and instructions for administration.
5. The name and title of the prescriber.

Description of Violation

The blister pack for resident #1 and resident #2 did not include:

- *The name of the medication*
- *The date the prescription was issued*
- *The prescribed dosage and instructions for administration*
- *The name and title of the prescriber.*

Plan of Correction

Accept () - 01/22/2025)

184a - Resident's Meds Labeled (continued)

In response to the violation on 12/16/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 01/13/2025 by the [REDACTED] Komfort Keepers PCH was given a very short two week notice that our current [REDACTED] was shutting their doors for good. It caused us to scramble to locate a new pharmacy in a very short time frame which proved to be a challenging task. We came across [REDACTED]. They offered monthly delivery and blister packs. We have been communicating the needs of the residents and also that it was mandatory to follow state regulations regarding the blister packs. The pharmacy put the labels on the back of the blister packs with all the pertinent information included.

To enhance the currently compliant operations, on 01/13/2025 The Administrator will monitor monthly deliveries to ensure that the labels are placed on the flap of all blister packs being sure to check for all information is printed on each label, with a completion date of 01/13/2025.

Effective 1/20/2025 the Administrator will perform monthly reviews of the blister packs through 1/20/2025 to maintain ongoing compliance.

Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 01/20/2025

Implemented [REDACTED] - 03/11/2025)

185a - Implement Storage Procedures

8. 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

Resident #1 is prescribed trazodone HCL 50 mg tabs as needed. On 12/16/2024, at 3:57 pm, the medication was not available in the home.

Plan of Correction

Accept [REDACTED] - 01/22/2025)

In response to the violation on 12/16/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 01/13/2025. The A [REDACTED] and DCS has not administered the PRN trazodone to Resident #1. Komfort Keepers assumed a new pharmacy in December 2024. We are both getting acclimated with each other. The Administrator is aware that although Resident #1 does not use the PRN medication, it needs to be in-house and available should the Resident need the medication. Resident #1 now has the PRN medication Trazodone available for use..

To enhance the currently compliant operations, The Administrator will do an audit of the MAR and all resident files to ensure we have all PRN medications available. The Administrator spoke to the pharmacy. They immediately took action and sent the PRN medication trazodone out to our facility. All PRN medications will be available and stored with resident's daily medications, with a completion date of 1/13/2025.

185a - Implement Storage Procedures (continued)

Effective 1/13/2025 the Administrator will perform quarterly audits through 1/13/2026 to maintain ongoing compliance with [] Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 01/20/2025

Implemented [REDACTED] - 03/11/2025)

187b - Date/Time of Medication Admin.**9. 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

Resident #1 is prescribed risperidone 1 mg to take one tablet by mouth daily at 8:00 am. On 12/16/2024, staff person B signed the medication administration record (MAR) for the residents 12/17/2024 8:00 am medication administration.

Resident #1 is prescribed divalproex sodium er 250 mg to take one tablet once daily at 8:00 am. On 12/16/2024, staff person B signed the medication administration record (MAR) for the residents 12/17/2024 8:00 am medication administration.

Resident #1 is prescribed divalproex sodium er 500 mg to take one tablet twice a day at 8:00 am and 8:00 pm. On 12/16/2024, staff person B signed the medication administration record (MAR) for the residents 12/17/2024 8:00 am and 8:00 pm medication administration.

Resident #1 is prescribed risperidone 4 mg to take one tablet by mouth daily at 8:00 pm. On 12/16/2024, at 3:35 pm, the MAR was signed as administered for 12/16/2024 at 8:00 pm by staff person B.

Resident #1 is prescribed trazadone HCL 50 mg to take one to two tablets by mouth daily at bedtime as needed at 8:00 pm. On 12/16/2024, at 3:57 pm, the MAR was signed as administered for 12/16/2024 at 8:00 pm by staff person B.

Resident #2 is prescribed Gabapentin 300 mg to take on capsule by mouth two times every day as needed for nerve pain. On 12/16/2024, the MAR was signed as administered for 12/17/2024 by staff person B.

Resident #2 is prescribed Olmesartan Medox 40 mg to take one tablet by mouth once daily for blood pressure at 8:00 am. On 12/16/2024, the MAR was signed as administered for 12/17/2024 by staff person B.

Resident #2 is prescribed Hydrochlorothiaz 25 mg to take one tablet by mouth every day at 8:00 am. On 12/16/2024, the MAR was signed as administered for 12/17/2024 by staff person by B.

Resident #2 is prescribed atorvastatin 40 mg to take one tablet by mouth daily at 8:00 pm. On 12/16/2024, at 3:35 pm, the MAR for 12/16/2024 and 12/17/2024 was signed as administered by staff person B.

Resident #2 is prescribed trazadone HCL 50 mg to take one tablet by mouth daily at 8:00 pm. On 12/16/2024, at 3:35 pm the MAR for 12/16/2024 was signed as administered by staff person B.

Repeat Violation 1/25/2024, et al

187b - Date/Time of Medication Admin. (continued)

Plan of Correction**Directed** [REDACTED] **01/22/2025)**

In response to the violation on 12/16/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken. The Administrator quickly addressed the issue of signing the MAR too prematurely.. Komfort Keepers PCH has an upcoming medication training scheduled for February 2025 where this specific issue can be further discussed. The MAR is to be signed once the medication has been administered. The Administrator has also has addressed this matter at a staff meeting that occurred on 1/15/2025.

To enhance the currently compliant operations, on 01/13/2025 the Administrator will review the MAR once weekly and going forward will hold DCS accountable for any discrepancies on their individual behalf, with a completion date of 01/20/2025.

Effective 1/15/2025 the Administrator will perform weekly audits through 1/15/2025 to maintain ongoing compliance. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Directed Completion Date: 01/20/2025

252 - Record Content

10. Requirements

2600.

252. Content of Resident Records - Each resident's record must include the following information:

1. Name, gender, admission date, birth date and Social Security number.
2. Race, height, weight, color of hair, color of eyes, religious affiliation, if any, and identifying marks.
3. A photograph of the resident that is no more than 2 years old.
4. Language or means of communication spoken or used by the resident.
5. The name, address, telephone number and relationship of a designated person to be contacted in case of an emergency.
6. The name, address and telephone number of the resident's physician or source of health care.
7. The current and previous 2 years' physician's examination reports, including copies of the medical evaluation forms.
8. A list of prescribed medications, OTC medications and CAM.
9. Dietary restrictions.
10. A record of incident reports for the individual resident.
11. A list of allergies.
12. The documentation of health care services and orders, including orders for the services of visiting nurse or home health agencies.
13. The preadmission screening, initial intake assessment and the most current version of the annual assessment.
14. A support plan.
15. Applicable court order, if any.
16. The resident's medical insurance information.
17. The date of entrance into the home, relocations and discharges, including the transfer of the resident to other homes owned by the same legal entity.
18. An inventory of the resident's personal property as voluntarily declared by the resident upon admission and voluntarily updated.
19. An inventory of the resident's property entrusted to the administrator for safekeeping.

252 - Record Content (*continued*)

20. The financial records of residents receiving assistance with financial management.
21. The reason for termination of services or transfer of the resident, the date of transfer and the destination.
22. Copies of transfer and discharge summaries from hospitals, if available.
23. If the resident dies in the home, a copy of the official death certificate.
24. Signed notification of rights, grievance procedures and applicable consent to treatment protections specified in § 2600.41 (relating to notification of rights and complaint procedures).
25. A copy of the resident-home contract.
26. A termination notice, if any.

Description of Violation

Resident 1's record does not include a photograph of the resident that is no more than 2 years old.

Resident 2's record does not include a photograph of the resident that is no more than 2 years old.

Plan of Correction

Accept [REDACTED] - 01/22/2025)

In response to the violation on 12/16/2024 by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 01/15/2025. The Administrator took immediate action to update the profile picture of any resident who has been with our facility for two years or more. Resident's 1 & 2 have new photos and their file has been updated.

The Administrator reviewed files and updated all resident photos.

To enhance the currently compliant operations, on 01/15/2025 the Administrator has documented the date the photo was taken, the admission date, and DOB of each resident is included on the photo for the chart. The Administrator will keep track of the dates on profile picture and ensure that each resident has a current picture taken every two years, with a completion date of 01/15/2025.

Effective 1/20/2025 the Administrator will perform annual audits through 1/20/2026 to maintain ongoing compliance with current pictures of residents.

Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: 01/20/2025

Implemented [REDACTED] - 03/11/2025)