

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

December 2, 2025

[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 10/20/2025 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: 11/01/2026
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: 10/20/2025

Inspection Dates and Department Representative

10/20/2025 - 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: 3 Are 60 Years of Age or Older: 7
Diagnosed with Mental Illness: 6 Diagnosed with Intellectual Disability: 1
Have Mobility Need: 0 Have Physical Disability: 0

Inspections / Reviews

10/20/2025 - Full
Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 11/03/2025

10/31/2025 - POC Submission
Submitted By: [REDACTED] Date Submitted: 11/26/2025
Reviewer: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 11/05/2025

Inspections / Reviews (*continued*)

11/03/2025 - POC Submission

Submitted By: [REDACTED] Date Submitted: 11/26/2025

Reviewer: [REDACTED] Follow-Up Type: Document Submission Follow-Up Date: 11/24/2025

12/02/2025 - Document Submission

Submitted By: [REDACTED] Date Submitted: 11/26/2025

Reviewer: [REDACTED] Follow-Up Type: Not Required

64a - Admin Training

1. Requirements

2600.

64.a. Prior to initial employment as an administrator, a candidate shall successfully complete the following:

- 1. An orientation program approved and administered by the Department.
- 2. A 100-hour standardized Department-approved administrator training course.
- 3. A Department-approved competency-based training test with a passing score.
- 4. Paragraphs (1), (2) and (3) do not apply to an administrator hired or promoted prior to October 24, 2005.

Description of Violation

Staff person [REDACTED] who is a home administrator, has not successfully completed the Department-approved and administered orientation program.

Plan of Correction

Accept [REDACTED] - 10/31/2025

STAFF COMPLETED THE ORIENTATION WITH PEPP UNLIMITED BACK IN [REDACTED] UNFORTUNATELY WE CAN NOT FIND THE CERTIFCATE. STAFF ([REDACTED]) HAS SCEDULED AN ORIENTATION PROGRAMED FOR NOVEMBER 21, 2025 FROM 9AM-4PM FROM THE LINK THAT WAS PROVIDED BY THE INSPECTOR. THE SITE HAS NOT PROVIDED A CONFIRMATION OF THE CLASS BUT SAID STAFF WILL RECIEVE CONFIRMATION/REMINDER TWO DAYS PRIOR TO TH DATE.

Licensee's Proposed Overall Completion Date: 10/29/2025

Implemented ([REDACTED]) - 12/02/2025

132b - Safety Inspection/Fire Drill

2. Requirements

2600.

132.b. A fire safety inspection and fire drill conducted by a fire safety expert shall be completed annually. Documentation of this fire drill and fire safety inspection shall be kept.

Description of Violation

The last fire safety inspection and drill observed by a fire safety expert was conducted on 4/30/2025. The previous fire safety inspection and drill observed by a fire safety expert was conducted on 4/17/2024.

Plan of Correction

Accept [REDACTED] - 10/31/2025

THE FIRE DRILL WAS SCHEDULED IN A TIMELY MANNER. THE FIRE DEPARTMENT RESCHEDULED THE DATE TO LATE ON IN THAT MONTH. SOMETHING WE HAD NO CONTROL OVER. MOVING FORWARD WE WILL SCHEDULE WITH THE FIRE DEPARTMENT FOR OUR ANNUAL FIRE DRILL 30 DAYS PRIOR TO PREVENT THIS FROM HAPPENING AGAIN

Licensee's Proposed Overall Completion Date: 10/29/2025

Implemented ([REDACTED]) - 12/02/2025

190b - Insulin Injections

3. Requirements

2600.

190.b. A staff person is permitted to administer insulin injections following successful completion of a Department-approved medications administration course that includes the passing of a written performance-based competency test within the past 2 years, as well as successful completion of a Department-approved diabetes patient education program within the past 12 months.

190b - Insulin Injections (*continued*)**Description of Violation**

On 10/20/2025 at 12:30 PM, staff person A, who has not successfully completed a Department-approved diabetes patient education program with in the last 12 months, administered insulin to resident [REDACTED]

Plan of Correction

Directed ([REDACTED] - 11/03/2025)

DIABETES TRAINING IS SCHEDULED ANNUALLY. WHEN THE COURSE DATE BECAME AVAILABLE A DATE WAS CHOSEN TO WHAT WAS AVAILABLE. FROM NOW ON COURSES WILL BE SCHEDULED ONE MONTH PRIOR TO THE EXPIRATION DATE IN ORDER TO STAY IN COMPLIANCE AND BE CERTIFIED AT ALL TIMES WITH NO MISSING GAPS. THE DATE WAS IMMEDIATELY CONFIRMED AGAIN WITH [REDACTED] AT NORTHAMPTON COMMUNITY COLLEGE FOR DIAB. COURSE. IT WAS PREVIOUS CONFIRMED SINCE SEPTEMBER 2025 PRIOR TO INSPECTION. STAFF IN THE MEANTIME READ OVER THE REVISION HANDBOOK FROM FOR DIABETES HANDBOOK ON 10/29/2025

Proposed Overall Completion Date: 10/31/2025

Directed step of POC:

In addition to the above-mentioned steps:

Immediately: Staff Person A shall not be permitted to administer insulin until the staff person successfully completes a Department-approved diabetes patient education program. Documentation of successful completion of the training shall be kept.

Directed Completion Date: 11/04/2025

Implemented ([REDACTED] - 12/02/2025)

252 - Record Content

4. 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.

252 - Record Content (continued)

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

Plan of Correction

Accept (█ - 10/31/2025)

See attached.

A NEW PHOTOGRAPH WAS PLACED IN EACH RESIDENTS FILE AND ANNUALLY CHECKS WILL BE DONE TO ENSURE THIS IS NOT REPEATED. EVERY 2 YEARS STAFF WILL UPDATE PHOTO IN RESIDENTS FILE

Licensee's Proposed Overall Completion Date: 10/30/2025

Implemented (█ - 12/02/2025)