

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

February 14, 2024

[REDACTED]  
ANGELS FAMILY MANOR PERSONAL CARE HOME INC  
[REDACTED]  
[REDACTED]

RE: ANGEL'S FAMILY MANOR  
PERSONAL CARE HOME  
218 NORTH MAIN AVENUE  
SCRANTON, PA, 18504  
LICENSE/COC#: 21062

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 01/10/2024 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: ANGEL'S FAMILY MANOR PERSONAL CARE HOME License #: 21062 License Expiration: 11/05/2023  
 Address: 218 NORTH MAIN AVENUE, SCRANTON, PA 18504  
 County: LACKAWANNA Region: NORTHEAST

## Administrator

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

## Legal Entity

Name: ANGELS FAMILY MANOR PERSONAL CARE HOME INC  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

## Certificate(s) of Occupancy

Type: Other Date: 04/11/2014 Issued By: City of Scranton

## Staffing Hours

Resident Support Staff: 1 Total Daily Staff: 49 Waking Staff: 37

## Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:  
 Reason: Interim Exit Conference Date: 01/10/2024

## Inspection Dates and Department Representative

01/10/2024 - On-Site: [REDACTED]

## Resident Demographic Data as of Inspection Dates

## General Information

License Capacity: 53 Residents Served: 48

## Secured Dementia Care Unit

In Home: No Area: Capacity: Residents Served:

## Hospice

Current Residents: 0

## Number of Residents Who:

Receive Supplemental Security Income: 46 Are 60 Years of Age or Older: 37  
 Diagnosed with Mental Illness: 46 Diagnosed with Intellectual Disability: 2  
 Have Mobility Need: 0 Have Physical Disability: 3

## Inspections / Reviews

## 01/10/2024 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 01/27/2024

## 02/14/2024 - POC Submission

Submitted By: [REDACTED] Date Submitted: 02/14/2024  
 Reviewer: [REDACTED] Follow-Up Type: Bypass Document Submission

Inspections / Reviews (*continued*)

02/14/2024 - Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 02/14/2024

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

88a - Surfaces

1. Requirements

2600.

88.a. Floors, walls, ceilings, windows, doors and other surfaces must be clean, in good repair and free of hazards.

Description of Violation

Approximately 5 ceiling blocks in shared room [redacted] are missing and water is leaking into a bucket on the floor.

Plan of Correction

Accept [redacted] 02/06/2024)

Ceiling blocks are missing and water is leaking into a bucket. We have been having issues with the roof. The roofers have been out several times to repair it. When the weather is good enough, they will return to cut a hole in the roof and replace the entire section. Maintenance will keep an eye on it and report any further issues to the office. The administrator will periodically check to make sure there are no more leaks.

Licensee's Proposed Overall Completion Date: 01/29/2024

Implemented [redacted] 02/14/2024)

95 - Furniture and Equipment

2. Requirements

2600.

95. Furniture and Equipment - Furniture and equipment must be in good repair, clean and free of hazards.

Description of Violation

The dresser in room [redacted] used by Resident [redacted] has a drawer with the front broken off.

Plan of Correction

Accept [redacted] - 02/05/2024)

The dresser in room [redacted] had a drawer that was broken. The dresser was replaced. A meeting was held with all housekeepers to go over the importance of making sure that furniture is in good repair. Housekeepers will check daily to make sure that furniture in the rooms is in good repair. The administrator will periodically check to make sure furniture is in good repair.

Licensee's Proposed Overall Completion Date: 01/29/2024

Implemented [redacted] - 02/14/2024)

103g - Storing Food

3. Requirements

2600.

103.g. Food shall be stored in closed or sealed containers.

Description of Violation

Department Rep. noted a pound of butter and a bowl of diced potatoes on the kitchen counter not properly covered.

Plan of Correction

Accept [redacted] - 02/05/2024)

A pound of butter and a bowl of diced potatoes were on the counter not properly covered. The administrator was in the process of making potatoes and had to step away to take a phone call. Next time I will make sure to properly cover food when stepping away.

Licensee's Proposed Overall Completion Date: 01/29/2024

Implemented [redacted] 02/14/2024)

103i - Outdated Food

4. Requirements

2600.  
103.i. Outdated or spoiled food or dented cans may not be used.

Description of Violation

*A package of liverwurst and a container of lunchmeat was noted in the upright refrigerator not labeled or dated to indicate when the original packages were opened.*

**Plan of Correction** **Accept** [REDACTED] - 02/05/2024)

*A package of the liverwurst and a container of lunchmeat was not labeled or dated. The liverwurst was in the original packaging however it was not dated. A meeting was held with all staff about food safety and appropriate way to date and label food. Staff will make sure all food is dated and labeled. The administrator will periodically check to make sure all food is labeled and dated.*

**Licensee's Proposed Overall Completion Date:** 01/29/2024

**Implemented** [REDACTED] 02/14/2024)

130g - Smoke Detector Repair

5. Requirements

2600.  
130.g. If a smoke detector or fire alarm becomes inoperative, repair shall be completed within 48 hours of the time the detector or alarm was found to be inoperative.

Description of Violation

*The batteries in the smoke detector located in the second-floor hallway directly to the left when exiting the elevator have expired.*

**Plan of Correction** **Accept** [REDACTED] - 02/05/2024)

*The batteries in the smoke detector, directly to the left of the elevator were expired, the batteries in the smoke detector were not expired, it was the carbon monoxide detector. The batteries were replaced. Maintenance will make sure all batteries are changed in the smoke detectors. The administrator will periodically check to make sure batteries are replaced and smoke detectors are in working order.*

**Licensee's Proposed Overall Completion Date:** 01/29/2024

**Implemented** [REDACTED] 02/14/2024)

144c1 - Smoking Area Guidelines

6. Requirements

2600.  
144.c. A home that permits smoking inside or outside of the home shall develop and implement written fire safety policy and procedures that include the following:  
1. Proper safeguards inside and outside of the home to prevent fire hazards involved in smoking, including providing fireproof receptacles and ashtrays, direct outside ventilation, no interior ventilation from the smoking room through other parts of the home, extinguishing procedures, fire resistant furniture both inside and outside the home and fire extinguishers in the smoking rooms.

Description of Violation

*Department Rep. noted several extinguished cigarette butts on the ground of the home's designated exterior smoking area.*

## 144c1 - Smoking Area Guidelines (continued)

**Plan of Correction**

Accepted [REDACTED] - 02/05/2024)

Cigarette butts were on the ground in the designated smoking area. A meeting will be held with staff about cleaning the smoke room and the importance of fire safety. Housekeeping will continue to clean the smoking room throughout the day. The administrator will check periodically throughout the day to make sure there are no cigarette butts on the ground.

Licensee's Proposed Overall Completion Date: 01/29/2024

Implemented [REDACTED] - 02/14/2024)

## 183a - Original Containers and Injections

**7. Requirements**

2600.

183.a. Prescription medications, OTC medications and CAM shall be kept in their original labeled containers and may not be removed more than 2 hours in advance of the scheduled administration. Assistance with insulin and epinephrine injections and sterile liquids shall be provided immediately upon removal of the medication from its container.

**Description of Violation**

Department Rep. noted a small red pill, loose in the med cart drawer. Neither the pill, nor the resident it was prescribed for could be identified by the home's administrator.

**Plan of Correction**

Accepted [REDACTED] - 02/05/2024)

A loose pill was found in the med cart. A meeting will be held with all med techs about loose pills. The med tech in charge will make sure there are no loose pills in the drawers. The administrator will periodically check to make sure there are no loose pills in the drawers.

Licensee's Proposed Overall Completion Date: 01/29/2024

Implemented [REDACTED] 02/14/2024)

## 183d - Prescription Current

**8. 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] prescribed for Resident [REDACTED] was not dated to indicate when it was opened.

**Plan of Correction**

Accepted [REDACTED] - 02/05/2024)

Insulin was not dated to indicate when it was opened. A meeting was held with all med techs about the importance of dating things properly. The med tech in charge will make sure all pens are dated correctly. The administrator will periodically check to make sure they are dated properly.

Licensee's Proposed Overall Completion Date: 01/29/2024

Implemented [REDACTED] 02/14/2024)