

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

May 28, 2024

[REDACTED]  
PITTSTON HEAVENLY MANOR INC  
[REDACTED]

RE: PITTSTON HEAVENLY MANOR  
51 NORTH MAIN STREET  
PITTSTON, PA, 18640  
LICENSE/COC#: 21869

[REDACTED],  
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 05/06/2024, 05/13/2024 of the above facility, no regulatory citations have been identified as a result of this inspection.

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

Sincerely,  
[REDACTED]

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

**Facility Information**

Name: *PITTSTON HEAVENLY MANOR* License #: *21869* License Expiration: *12/01/2024*  
Address: *51 NORTH MAIN STREET, PITTSTON, PA 18640*  
County: *LUZERNE* Region: *NORTHEAST*

**Administrator**

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

**Legal Entity**

Name: *PITTSTON HEAVENLY MANOR INC*  
Address: [REDACTED]  
Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *55* Waking Staff: *41*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
Reason: *Complaint* Exit Conference Date: *05/13/2024*

**Inspection Dates and Department Representative**

05/06/2024 - Off-Site: [REDACTED]  
05/13/2024 - Off-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information			
License Capacity:	<i>55</i>	Residents Served:	<i>55</i>
Secured Dementia Care Unit			
In Home:	<i>No</i>	Area:	
Capacity:		Residents Served:	
Hospice			
Current Residents:	<i>1</i>		
Number of Residents Who:			
Receive Supplemental Security Income:	<i>54</i>	Are 60 Years of Age or Older:	<i>39</i>
Diagnosed with Mental Illness:	<i>53</i>	Diagnosed with Intellectual Disability:	<i>4</i>
Have Mobility Need:	<i>0</i>	Have Physical Disability:	<i>3</i>

**Inspections / Reviews**

05/06/2024 - *Partial*  
Lead Inspector: [REDACTED] Follow-Up Type: *Not Required*

**NO DEFICIENCIES FOUND**