

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

July 7, 2025

[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 04/28/2025 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:** ANGEL'S FAMILY MANOR PERSONAL CARE HOME      **License #:** 21062      **License Expiration:** 11/05/2025  
**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:** 0      **Total Daily Staff:** 57      **Waking Staff:** 43

## Inspection Information

**Type:** Partial      **Notice:** Unannounced      **BHA Docket #:**  
**Reason:** Incident      **Exit Conference Date:** 04/28/2025

## Inspection Dates and Department Representative

04/28/2025 - On-Site: [REDACTED]

## Resident Demographic Data as of Inspection Dates

## General Information

**License Capacity:** 53      **Residents Served:** 51

## Secured Dementia Care Unit

**In Home:** No      **Area:**      **Capacity:**      **Residents Served:**

## Hospice

**Current Residents:** 0

## Number of Residents Who:

**Receive Supplemental Security Income:** 47      **Are 60 Years of Age or Older:** 31  
**Diagnosed with Mental Illness:** 51      **Diagnosed with Intellectual Disability:** 2  
**Have Mobility Need:** 6      **Have Physical Disability:** 5

## Inspections / Reviews

04/28/2025 Partial

**Lead Inspector:** [REDACTED]      **Follow-Up Type:** POC Submission      **Follow-Up Date:** 05/29/2025

06/05/2025 - POC Submission

**Submitted By:** [REDACTED]      **Date Submitted:** 06/25/2025  
**Reviewer:** [REDACTED]      **Follow-Up Type:** POC Submission      **Follow-Up Date:** 06/12/2025

Inspections / Reviews *(continued)*

06/18/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 06/25/2025

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 06/27/2025

07/07/2025 Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/25/2025

Reviewer: [REDACTED]

Follow Up Type: Not Required

## 42b - Abuse

## 1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

## Description of Violation

On [REDACTED] at 4:30 p.m. Resident [REDACTED] told Resident [REDACTED] they were not sitting in the correct seat for dinner and told the resident to move. Resident [REDACTED] then grabbed Resident [REDACTED]'s arm causing multiple scrapes and punctured Resident [REDACTED] arm with their fingernails. Resident [REDACTED] was overheard by other residents in the home using foul language toward Resident [REDACTED] and yelling they hoped Resident [REDACTED] would die. Resident [REDACTED] reported feeling afraid of Resident [REDACTED] and reported feeling uncomfortable about Resident [REDACTED] continuing to reside in the home.

## Plan of Correction

Accept [REDACTED] - 06/18/2025)

On 4/22/2025 resident [REDACTED] told Resident [REDACTED] they were not sitting in the correct seat for dinner and told the resident to move. Resident [REDACTED] then grabbed Resident [REDACTED] arm causing multiple scrapes and punctured Resident [REDACTED]'s arm with their fingernails. Resident [REDACTED] was overheard by other residents in the home using foul language toward Resident [REDACTED] and yelling they hoped Resident [REDACTED] would die. Resident [REDACTED] reported feeling afraid of Resident [REDACTED] and reported feeling uncomfortable about Resident [REDACTED] continuing to reside in the home. On 04/22/2025 resident [REDACTED] was given a 30 day notice and was sent to the hospital. On 06/06/2025 resident [REDACTED] was moved to another facility upon being released from the hospital. The Med tech will monitor when situations arise and try to redirect residents before things escalate.

Licensee's Proposed Overall Completion Date: 06/12/2025

Implemented [REDACTED] - 07/07/2025)

## 144c1 - Smoking Area Guidelines

## 2. 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

At 10:50 a.m. more than 10 cigarette butts were observed in the smoking area of the home. In addition, a cigarette butt can filled with cigarette packs and plastic bottles was observed next to the exit in the left side of the smoking area and paper napkins were observed on the ground.

On the weekend of [REDACTED], staff reported Resident [REDACTED] was observed lighting fires in the cigarette butt containers in the designated smoking area of the home. During the weekend, the resident was also observed smoking inside the building in multiple resident's rooms by staff of the home.

Repeat violation: [REDACTED]

## 144c1 Smoking Area Guidelines (continued)

**Plan of Correction****Directed** [REDACTED] - 06/18/2025)

Cigarette butts were found on the ground and there was garbage by the can. Staff will go out and clean the smoking area every 2 hours and sign a cleaning sheet stating that it was done. Admin will go out periodically throughout the day to ensure that staff are cleaning the smoking area every 2 hours. On 04/28/2025 resident [REDACTED] was given a written warning that if they smoke in the building or purposely setting butt cans on fire, they will receive a 30 day notice. Workers will check on resident [REDACTED] when [REDACTED] is out smoking to make sure [REDACTED] is not lighting cans on fire.

Proposed Overall Completion Date: 06/12/2025

**(Directed)**

**Effective immediately Resident [REDACTED] will be monitored every 30 minutes for 3 months while in the building for the safety of all residents. The 30 minute safety checks will be documented and maintained. If evidence of Resident [REDACTED] smoking inside the building is noted the resident will be given a 30 day notice immediately and the resident will be monitored every 15 minutes. The Administrator will review the safety checks daily to make sure they are being completed.**

Directed Completion Date: 06/27/2025

**Implemented** [REDACTED] - 07/07/2025)