

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

August 25, 2025

[REDACTED] CEO  
NORTHEAST COUNSELING SERVICES  
[REDACTED]

RE: CONYNGHAM CARE CENTER  
63 S.HUNTER HIGHWAY,PO BOX  
473  
DRUMS, PA, 18222  
LICENSE/COC#: 22175

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/07/2025 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: *CONYNGHAM CARE CENTER* License #: *22175* License Expiration: *08/03/2026*  
 Address: *63 S.HUNTER HIGHWAY,PO BOX 473, DRUMS, PA 18222*  
 County: *LUZERNE* Region: *NORTHEAST*

**Administrator**

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

**Legal Entity**

Name: *NORTHEAST COUNSELING SERVICES*  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *C-2 LP* Date: *11/08/1995* Issued By: *L&I*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *14* Waking Staff: *11*

**Inspection Information**

Type: *Full* Notice: *Unannounced* BHA Docket #:  
 Reason: *Renewal* Exit Conference Date: *08/07/2025*

**Inspection Dates and Department Representative**

*08/07/2025 - On-Site:* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: *20* Residents Served: *14*  
 Secured Dementia Care Unit  
 In Home: *No* Area: Capacity: Residents Served:  
 Hospice  
 Current Residents: *0*  
 Number of Residents Who:  
 Receive Supplemental Security Income: *14* Are 60 Years of Age or Older: *7*  
 Diagnosed with Mental Illness: *14* Diagnosed with Intellectual Disability: *3*  
 Have Mobility Need: *0* Have Physical Disability: *0*

**Inspections / Reviews**

**08/07/2025 - Full**  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *08/23/2025*

**08/25/2025 - POC Submission**  
 Submitted By: [REDACTED] Date Submitted: *08/25/2025*  
 Reviewer: [REDACTED] Follow-Up Type: *Bypass Document Submission*

Inspections / Reviews *(continued)*

08/25/2025 - Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 08/25/2025

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

85d - Trash Receptacles

1. Requirements

2600.

85.d. Trash in kitchens and bathrooms shall be kept in covered trash receptacles that prevent the penetration of insects and rodents.

Description of Violation

At approximately 9:30 a.m. there was a full, uncovered, unattended trash can in the 3rd floor bathroom.

Plan of Correction

Accept (█ - 08/25/2025)

The homes third floor garbage can was immediately emptied during inspection. A new garbage can with a lid was purchased on 8-14-25 (see attached) and replaced the garbage can without a lid. Regular weekly checks have been added to our weekly cleaning schedule (see attached) and Administrator will monitor for compliance.

Licensee's Proposed Overall Completion Date: 08/15/2025

Implemented (█ - 08/25/2025)

121a - Unobstructed Egress

2. Requirements

2600.

121.a. Stairways, hallways, doorways, passageways and egress routes from rooms and from the building must be unlocked and unobstructed.

Description of Violation

At approximately 9:30 a.m. the exit on 3rd floor leading to the fire escape required excessive force to push open.

Repeat violation 9/24/24.

Plan of Correction

Accept (█ - 08/25/2025)

Maintenance was at the facility on 8-18-25 to look at our 3rd floor fire escape door. The door is metal and surrounded by a metal frame, maintenance applied silicone all around the door and added extra screws to secure the frame to prevent using excessive force to open the door. We realize the safety of Residents being able to evacuate immediately in the event of an emergency. All emergency exits are tested monthly during fire drills. Monthly checks by Maintenance has been added to the Administrator check list to ensure the door, (especially during hot, humid weather) is easily opening and not preventing immediate egress in an emergency.

Licensee's Proposed Overall Completion Date: 08/18/2025

Implemented (█ - 08/25/2025)

131f - Fire Extinguisher Inspection

3. Requirements

2600.

131.f. Fire extinguishers shall be inspected and approved annually by a fire safety expert. The date of the inspection shall be on the extinguisher.

Description of Violation

The inspection tag for the fire extinguisher stored in the outdoor smoking area nearest the home expired in July 2025.

Plan of Correction

Accept (█ - 08/25/2025)

The fire extinguisher stored outside was reinspected by a safety expert on 8-18-25. The tag was replaced to reflect the current inspection year. Upon upcoming inspections staff will accompany fire expert to all fire extinguishers to ensure all tags are replaced and current. Administrator will monitor for compliance and task has been added to

131f - Fire Extinguisher Inspection (continued)

Administrator monthly checklist.

Licensee's Proposed Overall Completion Date: 08/15/2025

Implemented ( [REDACTED] - 08/25/2025)