



pennsylvania
DEPARTMENT OF HUMAN SERVICES

Sent via e-mail: [REDACTED]
MAILING DATE: May 14, 2026

[REDACTED] OWNER
ANGELS FAMILY MANOR
PERSONAL CARE HOME INC
218 NORTH MAIN AVENUE
SCRANTON, PA, 18504

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

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department) review on March 13, 2026, of the above facility, we have determined that your submitted plan of correction is not fully implemented. Correction of these violations in accordance with the specified plan of correction is required. Continued compliance must be maintained.

Sincerely,

[REDACTED]

Enclosure
Licensing Inspection Summary

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

Facility Information

Name: ANGEL'S FAMILY MANOR PERSONAL CARE HOME License #: 21062 License Expiration: 11/05/2026
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: 218 NORTH MAIN AVENUE, SCRANTON, PA, 18504
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: Other Date: 03/31/2013 Issued By: City of Scranton

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 45 Waking Staff: 34

Inspection Information

Type: Partial Notice: Unannounced BHA Docket #:
Reason: Interim Exit Conference Date: 03/13/2026

Inspection Dates and Department Representative

03/13/2026 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 53 Residents Served: 45

Secured Dementia Care Unit

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

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 44	Are 60 Years of Age or Older: 33
Diagnosed with Mental Illness: 43	Diagnosed with Intellectual Disability: 0
Have Mobility Need: 0	Have Physical Disability: 4

Inspections / Reviews

03/13/2026 - Partial

Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 04/03/2026

Inspections / Reviews *(continued)*

04/16/2026 POC Submission

Submitted By: [REDACTED] Date Submitted: 04/21/2026

Reviewer: [REDACTED] Follow Up Type: Document Submission Follow Up Date: 04/22/2026

05/14/2026 Document Submission

Submitted By: [REDACTED] Date Submitted: 04/21/2026

Reviewer: [REDACTED] Follow Up Type: Exception

85a - Sanitary Conditions

1. Requirements

2600.
85.a. Sanitary conditions shall be maintained.

Description of Violation

At 9:45 A.M., the toilet located in resident room 302 had a brown substance smeared on the floor.

Plan of Correction

Directed () - 04/16/2026

At 9:45 A.M., the toilet located in resident room 302 had a brown substance smeared on the floor. Bathrooms are cleaned on every shift and every hour bathrooms are checked. Bathrooms were checked at 9a.m. and they were clean. At 9:45a.m. the staff member assigned to that floor was assisting another resident in the shower. The bathroom was immediately cleaned. Staff will continue to check the bathrooms every hour and clean when needed. The administrator will walk the building through out the day to ensure cleanliness.

Proposed Overall Completion Date: 04/07/2026

(Directed Plan of Correction)

The home will create and maintain a bathroom checklist. The bathrooms will be checked every hour and documented on the checklist. The home will maintain the bathroom checklist.

Directed Completion Date: 04/22/2026

Implemented () - 05/14/2026

86b - Bathroom

2. Requirements

2600.
86.b. A bathroom that does not have an operable, outside window shall be equipped with an exhaust fan for ventilation.

Description of Violation

At 9:50A.M., the bathroom is resident room 303 had an exhaust fan that was inoperable and had no window or other source of ventilation.

Plan of Correction

Accept () - 04/16/2026

At 9:50A.M., the bathroom is resident room 303 had an exhaust fan that was inoperable and had no window or other source of ventilation. The exhaust fan was replaced on 02/13/2026. The on/off switch was not working properly. An electrician was out and has replaced it and it is now working properly. Housekeeping will notify the administrator daily if something is not working properly. The administrator will periodically walk the building to make sure everything is in good repair.

Proposed Overall Completion Date: 04/07/2026

Licensee's Proposed Overall Completion Date: 04/07/2026

86b - Bathroom (continued)

Implemented () - 05/14/2026)

101o - Walls, Floors, Ceilings

3. Requirements

2600.

101.o. The bedrooms must have walls, floors and ceilings, which are finished, clean and in good repair.

Description of Violation*At 9:45A.M., It was noted that two gallon size buckets were located in room 302 to catch water leaking from the ceiling.**At 9:55 A.M., Resident room 304 still had 8 missing floor tiles.**At 9:35A.M., the window in resident room 205 does not close properly. The home reported they are waiting for the installer to put in the new window.***Plan of Correction**

Directed () - 04/16/2026)

*At 9:45A.M., It was noted that two gallon size buckets were located in room 302 to catch water leaking from the ceiling. The roof was repaired and the buckets were there as a precaution. When the roof was repaired, we had freezing weather, The buckets were placed in case it did leak again when it thawed. However it is currently not leaking.**At 9:55 A.M., Resident room 304 still had 8 missing floor tiles. Floor tiles were on backorder and have come in and the floor was fixed.**At 9:35A.M., the window in resident room 205 does not close properly. The home reported they are waiting for the installer to put in the new window. The window was ordered and the installer had a medical emergency and was unable to put it in. The installer has replaced the window. Housekeeping will notify the administrator daily if something is not working properly. The administrator will periodically walk the building to make sure everything is in good repair.**Proposed Overall Completion Date: 04/07/2026***(Directed Plan of Correction)*****The home will have the roof repaired by a professional roofing company and replace the ceiling tiles in rooms 205 and 304. The home will maintain the roof repair receipt.***

Directed Completion Date: 04/22/2026

Not Implemented () - 05/14/2026)

107c - Food/Water 3 Day Supply

4. Requirements

2600.

107.c. The home shall maintain at least a 3-day supply of nonperishable food and drinking water for residents.

Description of Violation*At 9:30 AM the home served 45 residents requiring 45 gallons of emergency water. However, the home had only 14 gallons on hand. The home does have updated letter for Culligan to supply emergency water within 24 hours.*

107c Food/Water 3 Day Supply (continued)

Plan of Correction

Accept (█) - 04/16/2026)

At 9:30 AM the home served 45 residents requiring 45 gallons of emergency water. However, the home had only 14 gallons on hand. The home does have updated letter for Culligan to supply emergency water within 24 hours. The home now has 45 gallons of water on hand and will continue to have it on hand at all times. In the event that the water is used, the administrator will ensure that there is enough water on hand for each resident in the event of an emergency.

Licensee's Proposed Overall Completion Date: 04/07/2026

Implemented (█) - 05/14/2026)

183e - Storing Medications

5. Requirements

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

Description of Violation

At 11:00A.M., resident #1 had a Lantus Sol 100 units flex pen in the medication cart that did not have a date of opening. According to the manufactures directions the medication should be used within 28 days of opening.

Plan of Correction

Directed (█) - 04/16/2026)

At 11:00A.M., resident #1 had a Lantus Sol 100 units flex pen in the medication cart that did not have a date of opening. According to the manufactures directions the medication should be used within 28 days of opening. The med techs will now check and sign daily for all insulin pens. The administrator will check weekly to ensure that the new procedure is followed.

Proposed Overall Completion Date: 04/07/2026

(Directed Plan of Correction)

The home will retrain med techs on dating medications labels. This training documentation will be kept by the home. The administrator will conduct weekly audits of medication cart and document the audit. The home will maintain medication cart audits.

Directed Completion Date: 04/22/2026

Implemented (█) - 05/14/2026)

185a - Implement Storage Procedures

6. Requirements

2600.

185.a. The home shall develop and implement procedures for the safe storage, access, security, distribution and use of medications and medical equipment by trained staff persons.

Description of Violation

At 9:05 AM, The main lobby next to the kitchen contained an oxygen tank standing that was not properly stored in a

185a - Implement Storage Procedures (continued)

storage container or stand, per manufacturing instructions.

Plan of Correction**Accept (█ - 04/16/2026)**

At 9:05 AM, The main lobby next to the kitchen contained an oxygen tank standing that was not properly stored in a storage container or stand, per manufacturing instructions. That day we were waiting for the company to pick up the oxygen tank and it was not in a storage container. The med tech will ensure that all oxygen tanks are stored in milk crates or similar containers even when waiting for a pick up. The administrator will check periodically to ensure all tanks are stored properly.

Licensee's Proposed Overall Completion Date: 04/07/2026

Implemented (█ - 05/14/2026)

Department of Human Services
Bureau of Human Service Licensing
PRIVACY CODING

Facility Information

Name: ANGEL'S FAMILY MANOR PERSONAL CARE HOME License #: 21062 License Expiration: 11/05/2026
Address: 218 NORTH MAIN AVENUE, SCRANTON, PA 18504

Inspection Information

Start Date: 03/13/2026 Type: Partial

Staff Privacy Coding

<u>Designation</u>	<u>Staff Members Name</u>	<u>Job Title</u>	<u>Date Hired</u>
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Resident Privacy Coding

<u>Designation</u>	<u>Resident's Name</u>
Resident 1	[REDACTED]