

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

June 17, 2026

[REDACTED], EXECUTIVE DIRECTOR  
PROVIDENCE PLACE OF HAZLETON ASSOCIATES  
[REDACTED]

RE: PROVIDENCE PLACE OF HAZLETON  
149 SOUTH HUNTER HIGHWAY  
DRUMS, PA, 18222  
LICENSE/COC#: 22760

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/27/2026 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: PROVIDENCE PLACE OF HAZLETON License #: 22760 License Expiration: 04/01/2027  
 Address: 149 SOUTH HUNTER HIGHWAY, DRUMS, PA 18222  
 County: LUZERNE Region: NORTHEAST

**Administrator**

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

**Legal Entity**

Name: PROVIDENCE PLACE OF HAZLETON ASSOCIATES  
 Address: [REDACTED]  
 Phone: [REDACTED] Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: I-2 Date: 08/16/2010 Issued By: Butler Township

**Staffing Hours**

Resident Support Staff: 61 Total Daily Staff: 216 Waking Staff: 162

**Inspection Information**

Type: Full Notice: Unannounced BHA Docket #:  
 Reason: Renewal, Incident Exit Conference Date: 05/27/2026

**Inspection Dates and Department Representative**

05/27/2026 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**  
 License Capacity: 155 Residents Served: 96

**Special Care Unit**  
 In Residence: Yes Area: SDCU Capacity: 42 Residents Served: 28

**Hospice**  
 Current Residents: 6

**Number of Residents Who:**  
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 96  
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0  
 Have Mobility Need: 59 Have Physical Disability: 0

**Inspections / Reviews**

05/27/2026 Full  
 Lead Inspector: [REDACTED] Follow-Up Type: POC Submission Follow-Up Date: 06/18/2026

06/17/2026 - POC Submission  
 Submitted By: [REDACTED] Date Submitted: 06/17/2026  
 Reviewer: [REDACTED] Follow-Up Type: Bypass Document Submission

Inspections / Reviews (*continued*)

06/17/2026 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 06/17/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

## 105g Dryer lint removal

**1. Requirements**

2800.

105.g. To reduce the risks of fire hazards, lint shall be removed from the lint trap and drum of clothes dryers after each use. Lint shall be cleaned from the vent duct and internal and external ductwork of clothes dryers according to the manufacturer's instructions.

**Description of Violation**

*At approximately 9:50 a.m. in the 3rd floor laundry, there was an approximate 1/4 inch accumulation of lint in the lint trap of dryer #3. There were no clothes in the dryer at the time.*

**Plan of Correction**

Accept (█) - 06/17/2026)

*On 5/27/2026, all dryers were checked and cleaned of any lint. Starting on 5/28/2026, a daily check was initiated to ensure that every dryer on each floor was cleaned. This check was done by the manager on duty, continuing through 6/11/2026. Documentation of these checks is attached. To prevent future accumulation of lint, signs were hung as a reminder to remove lint after each use. Documentation of this preventative measure is also attached.*

**Licensee's Proposed Overall Completion Date: 06/11/2026**

Implemented (█) - 06/17/2026)

## 183e Storing Medications

**2. Requirements**

2800.

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**

*Resident #1's Tramadol 50 mg medication card was tampered with and had tape on the back of the card holding tablet #7 in place.*

**Plan of Correction**

Accept (█) - 06/17/2026)

*On 5/27/2026, all carts were audited to ensure no more medication cards were tampered with and/or taped. Starting 5/28/2026, each cart was checked daily by the Director of Nursing, the Connections Director, an LPN, or a medication technician through 6/11/2026. Documentation of this is attached. As a preventative measure, all LPN's and medication technician's were re-trained by 6/10/2026 on proper medication storage. Documentation is attached.*

*Proposed Overall Completion Date: 06/16/2026*

**Licensee's Proposed Overall Completion Date: 06/16/2026**

Implemented (█) - 06/17/2026)