

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

October 5, 2026

[REDACTED]
PITTSTON HEAVENLY MANOR INC
[REDACTED]
[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 review on 07/07/2026, 07/14/2026, 07/17/2026, 07/21/2026, 08/05/2026 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]
Human Services Licensing Supervisor

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: PITTSTON HEAVENLY MANOR

License #: 21869

License Expiration: 12/01/2026

Address: 51 NORTH MAIN STREET, PITTSTON, PA 18640

County: LUZERNE

Region: NORTHEAST

Administrator

Name:

Phone:

Email:

Legal Entity

Name: PITTSTON HEAVENLY MANOR INC

Address:

Phone:

Email:

Certificate(s) of Occupancy

Type: C-2 LP

Date: 05/10/1999

Issued By: L&I

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 51

Waking Staff: 38

Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Complaint, Incident

Exit Conference Date: 08/05/2026

Inspection Dates and Department Representative

07/07/2026 - On-Site:

07/14/2026 - On-Site:

07/17/2026 - On-Site:

07/21/2026 - On-Site:

08/05/2026 - On-Site:

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 55

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: 51

Are 60 Years of Age or Older: 14

Diagnosed with Mental Illness: 51

Diagnosed with Intellectual Disability: 5

Have Mobility Need: 0

Have Physical Disability: 1

Inspections / Reviews

07/07/2026 Partial

Lead Inspector:

Follow-Up Type: POC Submission

Follow-Up Date: 08/30/2026

10/01/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/05/2026

Reviewer: [REDACTED]

Follow Up Type: POC Submission

Follow Up Date: 10/02/2026

10/05/2026 POC Submission

Submitted By: [REDACTED]

Date Submitted: 10/05/2026

Reviewer: [REDACTED]

Follow Up Type: Bypass Document
Submission**10/05/2026 Bypass Document Submission**

Submitted By: [REDACTED]

Date Submitted: 10/05/2026

Reviewer: [REDACTED]

Follow Up Type: Not Required

18 Compliance With Laws

1. Requirements

2600.

18. Applicable Health and Safety Laws A home shall comply with applicable Federal, State and local laws, ordinances and regulations.

Description of Violation

On [REDACTED] the home did not have a current inspection certificate for the elevator. The current inspection certificate indicated the elevator inspection expired on [REDACTED]

Plan of Correction

Accept [REDACTED] - 10/01/2026)

The administrator will be responsible to maintain the proper license and signatures for further inspections in accordance with the health and safety regulations and keep a copy of the original license in the office with the emergency preparedness licenses. The inspection done on 3/18/2026 and another 07/30/2026. The administrator will check weekly to ensure not removed.

Licensee's Proposed Overall Completion Date: 09/28/2026

Implemented [REDACTED] - 10/05/2026)

23a Activities of Daily Living Assistance

2. Requirements

2600.

- 23.a. A home shall provide each resident with assistance with ADLs as indicated in the resident's assessment and support plan.

Description of Violation

Resident [REDACTED] room is located on the first floor The assessment dated [REDACTED] for resident [REDACTED] indicates the resident requires assistance with showers twice per week. On [REDACTED] the home's elevator had been inoperable since [REDACTED] and staff were unable to assist resident [REDACTED] with showering. Resident # [REDACTED] was not able to access the shower room on 3rd floor due to their mobility needs and the elevator being inoperable.

Plan of Correction

Accept [REDACTED] 10/01/2026)

Elevator was inoperable because chip was bad and needed to be replaced and facility was waiting for the new chip to be delivered. The resident was offered a sponge bath and hair washed over tub with shower extension in first floor bathroom and resident refused as of 7/08/2026 was transferred to our other facility Angel's Family Manor where [REDACTED] received assistance for [REDACTED] showers until elevator fixed on 07/30/2026.

Licensee's Proposed Overall Completion Date: 09/28/2026

Implemented [REDACTED] - 10/05/2026)

95 Furniture and Equipment

4. Requirements

2600.

95. Furniture and Equipment Furniture and equipment must be in good repair, clean and free of hazards.

Description of Violation

On [REDACTED] the home's elevator was inoperable. Staff interviews indicated the elevator became inoperable on [REDACTED] The elevator was still inoperable on [REDACTED]

95 Furniture and Equipment (*continued*)

Plan of Correction

Accept [REDACTED] 10/01/2026)

The water inoperable, the facility had called out to Thyseuncrupt to find out what was wrong. the company found out the chip that operates the elevator was fried 7/07/2026. The facility paid the company to get replacement chip, because of lack of chips available for the elevators in the area. the company had to order one and had to wait for the delivery and be reinstalled to the motherboard. the elevator fixed on 7/30/2026.

Licensee's Proposed Overall Completion Date: 09/28/2026

Implemented [REDACTED] - 10/05/2026)

101i - Access to Bedroom

5. Requirements

2600.

101.i. A resident shall have access to [REDACTED] bedroom at all times.

Description of Violation

On [REDACTED] the home's elevator became inoperable. Residents [REDACTED] and [REDACTED] were interviewed on [REDACTED] and all three residents indicated they were unable to access their bedrooms due to their mobility needs preventing them from using the stairs. The residents were unable to access their rooms from [REDACTED] to [REDACTED].

Plan of Correction

Accept [REDACTED] - 10/05/2026)

Resident [REDACTED] was not able to use the steps in the facility. The facility relocated the resident to Angel Manor until elevator fixed on 7/30/26.

Resident [REDACTED] and [REDACTED] were able to use the facility stairs. They refused to walk up the stairs unless they wanted something there and instead the staff retrieved the belongings. They walked up the stairs to go to bed at night on 7/07/2026 after they were asked if they would like to be transferred to another facility due to the elevator or choosing the staff to assist up and down stairs while they walked. explained they were unable to stay downstairs to sleep and be able to go to room per regulations.

The elevator was fixed and operable on 7/30/2026

Resident #1 returned access to Pittston Heavenly Manor and original room on 7/30/26.

Going forward the elevator is fixed and the residents will be able to access as they need, if this is not possible due the elevator needing to be fixed the Emergency preparedness protocol will immediately be established.

Licensee's Proposed Overall Completion Date: 10/05/2026

Implemented [REDACTED] - 10/05/2026)

225a - Assessment 15 Days

6. Requirements

2600.

225.a. A resident shall have a written initial assessment that is documented on the Department's assessment form within 15 days of admission. The administrator or designee, or a human service agency may complete the initial assessment.

Description of Violation

The assessment dated [REDACTED] for resident [REDACTED] does not include the resident's need to use a wheelchair for mobility.

225a - Assessment 15 Days (continued)

Plan of Correction**Accept** [REDACTED] - 10/05/2026)

The error occurs when the assistant wrote the resident used a walker for mobility in the care plan and the resident uses a wheelchair for mobility. The chart audits will start for all charts to be reviewed and any other paperwork the assistant does. Sept. 20th was started and completed first audit.

The RASP was updated on 7/07/2026 for Resident [REDACTED]

The chart audits were started on 9/20/2026

Licensee's Proposed Overall Completion Date: 10/05/2026**Implemented** ([REDACTED] 10/05/2026)