

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

September 21, 2026

[REDACTED]
NORTHEAST COUNSELING SERVICES
[REDACTED]

RE: NORTHEAST COUNSELING
SERVICES
320 S FRANKLIN STREET
WILKES-BARRE, PA, 18701
LICENSE/COC#: 23133

[REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/01/2026 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: NORTHEAST COUNSELING SERVICES

License #: 23133

License Expiration: 02/28/2027

Address: 320 S FRANKLIN STREET, WILKES BARRE, PA 18701

County: LUZERNE

Region: NORTHEAST

Administrator

Name:

Phone:

Email:

Legal Entity

Name: NORTHEAST COUNSELING SERVICES

Address:

Phone:

Email:

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 6

Waking Staff: 5

Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Incident

Exit Conference Date: 09/01/2026

Inspection Dates and Department Representative

09/01/2026 - On-Site:

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 8

Residents Served: 6

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 6

Are 60 Years of Age or Older: 1

Diagnosed with Mental Illness: 6

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 0

Have Physical Disability: 0

Inspections / Reviews

09/01/2026 Partial

Lead Inspector:

Follow-Up Type: POC Submission

Follow-Up Date: 09/24/2026

09/21/2026 - POC Submission

Submitted By:

Date Submitted: 09/21/2026

Reviewer:

Follow-Up Type: Bypass Document
Submission

Inspections / Reviews (*continued*)

09/21/2026 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/21/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

16c - Written Incident Report**1. Requirements**

2600.

16.c. The home shall report the incident or condition to the Department's personal care home regional office or the personal care home complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2600.15 (relating to abuse reporting covered by law).

Description of Violation

On [REDACTED] a Protective Services worker from Liberty Health came to the home to investigate. alleged abuse, abandonment, exploitation or neglect. The home did not report this incident to the department until [REDACTED]

Plan of Correction**Accept [REDACTED] 09/21/2026)**

On 9/1/26, the Administrator completed and sent in an incident report form for the above indicated incident (See Attachment). A staff education training memo was provided by the Administrator for all staff on 9/18/26 regarding staff to always contact the Administrator for all incidents, identifying what is a reportable incident, and forms required (See Attachment). The Administrator will monitor for compliance using a flow sheet tracker utilized by staff to document all incidents that occur in the facility (See Attachment).

Licensee's Proposed Overall Completion Date: 09/18/2026

Implemented [REDACTED] - 09/21/2026)**225a - Assessment 15 Days****2. 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

Resident [REDACTED] assessment, dated [REDACTED] does not include a rating for the securing of health services.

Plan of Correction**Accept [REDACTED] - 09/21/2026)**

Resident [REDACTED] assessment for securing of health services was corrected by the Administrator on 9/1/26 (See Attachment). An audit was conducted by the Administrator on 9/2/26, identifying that all other current resident's assessments are in compliance (See Attachment) and an audit form was created to monitor ongoing compliance upon completion of any updated/annual assessments (See Attachment).

Licensee's Proposed Overall Completion Date: 09/18/2026

Implemented [REDACTED] - 09/21/2026)