

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

September 18, 2025

[REDACTED]
SERENITY CARE KINGSTON LLC
[REDACTED]

RE: SERENITY CARE KINGSTON
700 THIRD AVENUE
KINGSTON, PA, 18704
LICENSE/COC#: 23052

[REDACTED],
As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 08/26/2025 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: *SERENITY CARE KINGSTON* License #: *23052* License Expiration: *03/28/2026*
 Address: *700 THIRD AVENUE, KINGSTON, PA 18704*
 County: *LUZERNE* Region: *NORTHEAST*

Administrator

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

Legal Entity

Name: *SERENITY CARE KINGSTON LLC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Staffing Hours

Resident Support Staff: *21* Total Daily Staff: *97* Waking Staff: *73*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #: [REDACTED]
 Reason: *Incident* Exit Conference Date: *08/26/2025*

Inspection Dates and Department Representative

08/26/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *122* Residents Served: *55*

Secured Dementia Care Unit
 In Home: *Yes* Area: *separate wing* Capacity: *28* Residents Served: *18*

Hospice
 Current Residents: *2*

Number of Residents Who:
 Receive Supplemental Security Income: *1* Are 60 Years of Age or Older: *55*
 Diagnosed with Mental Illness: *1* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *21* Have Physical Disability: *2*

Inspections / Reviews

08/26/2025 Partial

Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *09/19/2025*

09/12/2025 - POC Submission

Submitted By: [REDACTED] Date Submitted: *09/18/2025*
 Reviewer: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *09/22/2025*

Inspections / Reviews *(continued)*

09/18/2025 POC Submission

Submitted By: [REDACTED]

Date Submitted: 09/18/2025

Reviewer: [REDACTED]

Follow Up Type: *Bypass Document Submission*

09/18/2025 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 09/18/2025

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

42b - Abuse

1. Requirements

2600.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On [redacted] Employee A handled Resident [redacted] roughly and struck [redacted] in the back with a closed fist while holding a washcloth in the process of washing [redacted] back during a shower.

Plan of Correction

Accept [redacted] - 09/18/2025)

This regulation was violated due to an incident that occurred on 8/11/25 Employee A handled Resident # [redacted] roughly and struck [redacted] in the back with a closed fist while holding a washcloth in the process of washing [redacted] back during a shower. This regulation is important because it violates basic human rights, including the right to safety and respect. There is zero tolerance relating to resident abuse, physically or verbally in the facility.

Steps taken by Administrator, [redacted].

After resident reported incident to an evening staff member on 8/12/25- Administrator spoke to resident regarding incident that occurred via phone call.

On 8/12/25 Administrator conducted an oral report to Area Agency on Aging followed by a written report on 8/13/25.

Body assessment done on resident- No injuries 8/12/25 and 8/13/25

Notified family and PCP of incident on 8/13/2025

Educated resident on reporting any abuse or mistreatment to administrator or another staff member immediately on 8/13/2025

Inservice held on 9/16/25 and 9/17/2025 with staff (see attached)

To fix this problem, employee was terminated from employment on 8/13/25.

The administrator, [redacted] is responsible for maintaining compliance with this regulation.

Licensee's Proposed Overall Completion Date: 09/18/2025

Implemented [redacted] - 09/18/2025)

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

On [redacted] at about 10:00 am, a grey wheeled utility cart blocked egress from the home's dining room exit door to the outside parking lot.

Plan of Correction

Accept ([redacted] 09/12/2025)

This regulation was violated on [redacted] at about 10:00 am, due to a grey wheeled utility cart blocked egress from the home's dining room exit door to the outside parking lot. This regulation is important because it allows residents and staff to make a safe exit during fire drill or fire emergency.

To fix this problem, the wheeled cart was immediately removed from the area in the front of the fire exit and

121a - Unobstructed Egress (continued)

signage stating "do not block this exit" placed on the door. To stay in compliance with this regulation, staff on duty were immediately re-instructed to move all unused carts to the back of the dining room to avoid carts being too close to the door.

Administrator, [REDACTED] and Dietary Manager [REDACTED] are responsible for maintaining compliance with this regulation.

Licensee's Proposed Overall Completion Date: 09/11/2025

Implemented [REDACTED] - 09/18/2025)