pennsylvania
DEPARTMENT OF HUMAN SERVICES

CERTIFICATE OF COMPLIANCE

This certificate is hereby granted to **TREE OF LIFE PERSONAL CARE HOME**
LEGAL ENTITY

To operate **TREE OF LIFE PERSONAL CARE HOME**
NAME OF FACILITY OR AGENCY

Located at **3101 GRANDVIEW ROAD, HANOVER, PA 17331**
(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE/SERVICE LOCATION

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To provide **Personal Care Homes**
TYPE OF SERVICE(S) TO BE PROVIDED

The total number of persons which may be cared for at one time may not exceed **41**
(MAXIMUM CAPACITY)
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

Restrictions: **Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 41**

This certificate is granted in accordance with the Human Services Code of 1967, P.L. 31, as amended, and Regulations

55 Pa.Code Chapter 2600: Personal Care Homes
(MANUAL NUMBER AND TITLE OF REGULATIONS)

and shall remain in effect from **June 20, 2025** until **June 20, 2026**,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **338790**

ISSUING OFFICER

DEPUTY SECRETARY

NOTE: This certificate is issued for the above site(s) only and is not transferable and should be posted in a conspicuous place in the facility.

HS 628 – 04/23

Pennsylvania
Department of Human Services

Via email to: [redacted]

Date: June 20, 2025

[redacted]
Tree of Life Personal Care Home
236 North Railroad Street
Hanover, PA 17331

Tree of Life Personal Care Home
236 North Railroad Street
Hanover, PA 17331
Certificate #: 338790

Dear [redacted],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department), licensing inspections on May 20, 2025the above facility, we have found that your facility is in substantial compliance with the regulations, set forth in 55 Pa. Code Ch. 2600 (relating to Personal Care Homes), that can be adequately assessed at this time. The licensing inspector was unable to complete a full inspection because the home is not yet serving four or more residents.

In accordance with 55 Pa.Code § 2600.11(b) (relating to procedural requirements for licensure or approval of personal care homes? a re-inspection of your newly licensed facility will be conducted within 3 months of the effective date of this license. Complete compliance with all applicable regulations is required in order to maintain your license.

Your NEW license is enclosed.

Sincerely,

Juliet Marsala

Juliet Marsala
Deputy Secretary
Office of Long-term Living

Enclosures
License
Licensing Inspection Summary

Facility Information

Name: *TREE OF LIFE PERSONAL CARE HOME* **License #**: *33879* **License Expiration**: *05/08/2026*

Address: *3101 GRANDVIEW ROAD, HANOVER, PA 17331*

County: *YORK* **Region**: *CENTRAL*

Administrator

Name: [redacted] **Phone**: [redacted] **Email**: [redacted]

Legal Entity

Name: *TREE OF LIFE PERSONAL CARE HOME*

Address: *236 NORTH RAILROAD STREET, HANOVER, PA, 17331*

Phone: [redacted] **Email**: [redacted]

Certificate(s) of Occupancy

Type: *I-2* **Date**: *03/03/2025* **Issued By**: *Penn Township*

Staffing Hours

Resident Support Staff: *0* **Total Daily Staff**: *0* **Waking Staff**: *0*

Inspection Information

Type: *Partial* **Notice**: *Unannounced* **BHA Docket #**:

Reason: *New* **Exit Conference Date**: *05/30/2025*

Inspection Dates and Department Representative

05/20/2025 - On-Site: [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *41* **Residents Served**: *0*

Secured Dementia Care Unit

In Home: *Yes* **Area**: *SDCU* **Capacity**: *41* **Residents Served**: *0*

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *0* **Are 60 Years of Age or Older**: *0*

Diagnosed with Mental Illness: *0* **Diagnosed with Intellectual Disability**: *0*

Have Mobility Need: *0* **Have Physical Disability**: *0*

Inspections / Reviews

05/20/2025 - Partial

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *06/22/2025*

06/17/2025 - POC Submission

Submitted By: [redacted] **Date Submitted**: *06/20/2025*

Reviewer: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *06/23/2025*

Inspections / Reviews *(continued)*

06/20/2025 - POC Submission

Submitted By: [redacted] **Date Submitted:** *06/20/2025*

Reviewer: [redacted] **Follow-Up Type:** *Document Submission* **Follow-Up Date:** *06/22/2025*

06/20/2025 - Document Submission

Submitted By: [redacted] **Date Submitted:** *06/20/2025*

Reviewer: [redacted] **Follow-Up Type:**

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

The Clean Indoor Air Act requires that the home post a sign at each entrance that states, "Smoking Permitted in Designated Areas Only" or "No Smoking." On 5/20/25, signs were not posted at the home's entrances to the building

Plan of Correction ***Accept ([redacted] - 06/20/2025)***

Immediate step taken
"Smoking Prohibited Except in Designated Areas" signs have been posted at all entrances to the building. Photos attached for verification of completed work.
Start date/date completed
Signs ordered 05/20/2025 they have been installed on 05/22/2025 by contractors for Tree of Life Personal Care.

Training or additional audit
Start date/date completed
VP of Operations trained maintenance staff on the importance of this signage to remain in place with Maintenance staff of Tree of Life on 05/22/2025.
Staff member
VP of Operations and Maintenance staff
Completion Date
Completed 05/22/2025
Ensure continued compliance
Start date/date completed
Started 05/20/2025
Completed 05/22/2025
Staff member
Maintenance Staff has added a line item to the monthly maintenance checklist to verify that signs are continuously in place.
Completion Date
Effective 06/17/2025 maintenance staff will complete the checklist on a monthly basis to ensure continued compliance with regulation 2600.18.

Licensee's Proposed Overall Completion Date: *06/18/2025*

Implemented ([redacted] - 06/20/2025)

42s - Privacy

2. Requirements

2600.

42s - Privacy *(continued)*

42.s. A resident has the right to privacy of self and possessions. Privacy shall be provided to the resident during bathing, dressing, changing and medical procedures.

Description of Violation

On 5/20/25, doors on common bathrooms and Jack & Jill bathrooms in resident rooms 113-128 did not have latches or locks to ensure privacy.

Plan of Correction ***Accept ([redacted] - 06/20/2025)***

Immediate step taken
Doors on common bathrooms and Jack & Jill bathrooms in resident rooms 113-128 did not have latches or locks to ensure privacy. New door handles with locking mechanisms were ordered immediately and replaced the non-locking handles.
Start date/date completed
New locking handles were ordered 05/20/2025, they have been installed by contractors for Tree of Life Personal Care on 05/22/2025

Training or additional audit
Start date/date completed
VP of Operations trained Maintenance staff of Tree of Life on 05/22/2025 on the importance on ongoing compliance of regulation 2600.42s

Ensure continued compliance
Start date/date completed
Started 05/20/2025
Completed 05/22/2025
Staff member
Maintenance Staff has added a line item to the monthly maintenance checklist to verify that bathroom doors are checked to make sure that they have locking handles. This will begin effective 06/17/2025.

Licensee's Proposed Overall Completion Date: *06/18/2025*

Implemented ([redacted] - 06/20/2025)

90a - Landline Telephone

3. Requirements

2600.
90.a. The home shall have a working, noncoin operated, landline telephone that is accessible in emergencies and accessible to individuals with disabilities.

Description of Violation

On 5/20/2025, the home did not have a working, non-coin-operated landline telephone that was accessible in emergencies. The home's only landline telephone was located in the Administrator's office, which the Administrator confirmed was not always unlocked.

90a - Landline Telephone *(continued)*

Plan of Correction ***Accept ([redacted] - 06/20/2025)***

Immediate step taken
The home did not have a working, non-coin-operated landline telephone that was accessible in emergencies. The home's only landline telephone was located in the Administrator's office, which the Administrator confirmed was not always unlocked.
Tech Services for Tree of Life Personal Care was contacted to install additional phone for resident usage. It is located in the lounge/living room area of the building.
Start date/date completed
Tech services contacted 05/20/2025 this has been completed by contractors for Tree of Life Personal Care on 05/27/2025

Training or additional audit
Start date/date completed
VP of Operations trained Maintenance staff and PCHA of Tree of Life on 05/22/2025.
Staff member
VP of Operations, Maintenance staff and PCHA

Ensure continued compliance
Start date/date completed
Started 05/20/2025
Completed 05/22/2025
Staff member
Maintenance Staff has added a line item to the monthly maintenance checklist to verify that the phone continues to stay in a resident accessible area.
Completion Date

Maintenance staff added a line item to monthly checklist, to verify that effective 06/17/2025 a phone will stay in a resident accessible area.

Licensee's Proposed Overall Completion Date: *06/18/2025*

Implemented ([redacted] - 06/20/2025)

91 - Telephone Numbers

4. Requirements

2600.
91. Emergency Telephone Numbers - Telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline shall be posted on or by each telephone with an outside line.

Description of Violation

On 5/20/2025, the telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline were not posted by the only

91 - Telephone Numbers (continued)

telephone with an outside line which is located in the Administrator's office.

Plan of Correction ***Accept (- 06/20/2025)***

Immediate step taken
The telephone numbers for the nearest hospital, police department, fire department, ambulance, poison control, local emergency management and personal care home complaint hotline were not posted by the only telephone with an outside line which is located in the Administrator's office.
On 05/21/2025 the required phone numbers listed above have been posted by every phone located in the building.
This has been completed by contractors for Tree of Life Personal Care
Completion Date
Work Completed 05/21/2025
Training or additional audit
Start date/date completed
VP of Operations trained Maintenance staff and PCHA of Tree of Life on 05/22/2025.

Ensure continued compliance
Start date/date completed
Started 05/21/2025
Completed 05/22/2025
Staff member
Maintenance Staff has added a line item to the monthly maintenance checklist to verify that the required phone numbers continue to stay near all phones in the building.
Effective 06/17/2025 monthly maintenance check list has been updated to have the phone in the resident accessible area.

Licensee's Proposed Overall Completion Date: *06/18/2025*

Implemented (- 06/20/2025)

107d - Procedure Emergency Management Agency Submission

5. Requirements

2600.
107.d. The written emergency procedures shall be reviewed, updated and submitted annually to the local emergency management agency.

Description of Violation

The home's written emergency procedures have not been submitted to the local emergency management agency.

Plan of Correction ***Accept (- 06/20/2025)***

Immediate step taken
The home's written emergency procedures have not been submitted to the local emergency management agency.
Emergency plans were emailed to [redacted] at the local emergency management agency on 05/21/2025
Start date/date completed
05/21/2025
Staff member
This has been completed by VP of Operations
Completion Date

107d - Procedure Emergency Management Agency Submission (continued)

Work Completed 05/21/2025
Training or additional audit
Start date/date completed
06/01/2025
Staff member
VP of Operations reviewed regulation 107d as a reminder of the information that is required to be sent to local emergency management services.
Completion Date
06/01/2025
Ensure continued compliance
Start date/date completed
Started 05/21/2025
Completed 05/21/2025
Staff member
VP has entered a reoccurring reminder on calendar to resend emergency plans annually to local emergency management agency
Completion Date
06/12/2025

Licensee's Proposed Overall Completion Date: *06/18/2025*

Implemented ([redacted] - 06/20/2025)

108 - Firearms & Weapons

6. Requirements

2600.
108. Firearms, weapons and ammunition shall be permitted on the licensed premises of a home only when the following conditions are met:
1. Firearms and weapons shall be contained in a locked cabinet located in a place other than the residents' room or in a common living area.

Description of Violation

On 5/20/25, firearms were present on the licensed premises of the home and were not contained in a locked cabinet located in a place other than the residents' room or in a common living area. The home's Vice President of Operations, Owner and three maintenance staff members were carrying concealed weapons during the inspection.

Plan of Correction ***Accept ([redacted] - 06/20/2025)***

firearms were present on the licensed premises of the home and were not contained in a locked cabinet located in a place other than the residents' room or in a common living area. The home's Vice President of Operations, Owner and three maintenance staff members were carrying concealed weapons during the inspection.
Policy was evaluated and discussed. We will continue to follow the current house rule of a no weapon policy. House Rules are signed upon admission.
Start date/date completed
05/21/2025
Staff member
This has been completed by VP of Operations and President.
Completion Date

108 - Firearms & Weapons (continued)

05/21/2025
Training or additional audit
Start date/date completed
Not needed
Staff member
VP of Operations
Completion Date
06/01/2025
Ensure continued compliance
Start date/date completed
05/21/2025
Staff member
VP, PCHA and President discussed the no weapons allowed on the property at 3101 Grandview Road
Completion Date
06/02/2025
Effective 06/17/2025 all job descriptions that referenced carrying a weapon have been updated. There are no longer weapons listed as part of the job description.
For ongoing compliance effective 07/1/2025 hiring of new staff will be trained through orientation that weapons are not allowed on premise.

Licensee's Proposed Overall Completion Date: *06/18/2025*

Implemented ([redacted] - 06/20/2025)

123b - Emergency Procedures Posted

7. Requirements

2600.
123.b. Copies of the emergency procedures as specified in § 2600.107 (relating to emergency preparedness) shall be posted in a conspicuous and public place in the home and a copy shall be kept.

Description of Violation

On 5/20/2025, the written emergency procedures for the home and the home's municipality were not posted in a conspicuous and public place in the home.

Plan of Correction ***Accept ([redacted] - 06/20/2025)***

The written emergency procedures for the home and the home's municipality were not posted in a conspicuous and public place in the home.
Maintenance was instructed to mount a file wall hanger near the main entrance and place the binder in that. The binder includes the emergency procedures are within the red binder.
Start date/date completed
05/21/2025
Staff member
This has been completed by maintenance.
Completion Date
05/21/2025
Training or additional audit
Start date/date completed
05/21/2025

123b - Emergency Procedures Posted (continued)

Staff member
VP of Operations trained maintenance staff on the importance of maintaining the accurate emergency plan in a public and conspicuous area.
Completion Date
06/02/2025
Ensure continued compliance
Start date/date completed
05/21/2025
Staff member
VP of Operations and Maintenance staff reviewed the regulation, and it was added to the monthly checklist to verify the binder has not been removed. effective 06/17/2025

Licensee's Proposed Overall Completion Date: *06/18/2025*

Implemented ([redacted] - 06/20/2025)

123c - Evacuation Diagrams

8. Requirements

2600.
123.c. For a home serving nine or more residents, an emergency evacuation diagram of each floor showing corridors, line of travel to exit doors and location of the fire extinguishers and pull signals shall be posted in a conspicuous and public place on each floor.

Description of Violation

The home's emergency evacuation diagrams do not include the location of pull stations.

Plan of Correction ***Accept ([redacted] - 06/20/2025)***

Immediate step taken
The home's emergency evacuation diagrams do not include the location of pull stations.
Maintence staff corrected the evacuation diagrams to show the pull stations
Start date/date completed
05/20/2025
Staff member
This has been completed by maintenance.
Completion Date
05/21/2025
Training or additional audit
Start date/date completed
05/21/2025
Staff member
VP of Operations trained maintenance staff on the importance of having accurate evacuation diagrams posted.
Completion Date
05/21/2025
Ensure continued compliance
Start date/date completed
05/21/2025

123c - Evacuation Diagrams (continued)

Staff member
VP of Operations and Maintenance staff reviewed the regulation the document will be verified to be correct at the time of monthly checklist. The checklist had been updated and completed effective 06/17/2025.

Licensee's Proposed Overall Completion Date: *06/18/2025*

Implemented ([redacted] - 06/20/2025)