



COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF HUMAN SERVICES



CERTIFICATE OF COMPLIANCE

This Certificate is hereby granted to **GDL FARMS CORP**

LEGAL ENTITY

To operate **THE PATHWAYS AT WARRINGTON**

NAME OF FACILITY OR AGENCY

Located at **2900 STREET ROAD, WARRINGTON, PA 18976**

(COMPLETE ADDRESS OF FACILITY OR AGENCY)

ADDRESS OF SATELLITE SITE

ADDRESS OF SATELLITE SITE

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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 **108**
or the maximum capacity permitted by the Certificate of Occupancy, whichever is smaller.

(MAXIMUM CAPACITY)

Restrictions: **Secure Dementia Care Unit - 55 Pa.Code §§ 2600.231-239 - Capacity 42**

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 **January 1, 2021** until **January 1, 2022**,
unless sooner revoked for non-compliance with applicable laws and regulations.

No: **147470**

Robert E. Robinson

ISSUING OFFICER

Jamie J. Buchenauer

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 – 6/20



pennsylvania
DEPARTMENT OF HUMAN SERVICES

December 30, 2020

Ms. Michele DiVincenzo
Director of Health Services
GDL Farms Corporation
3501 Mason Mill Road, Suite 403
Huntingdon Valley, Pennsylvania 19006

RE: The Pathways at Warrington
2900 Street Road
Warrington, Pennsylvania 18976
License #: 147470

Dear Ms. DiVincenzo:

As a result of the Pennsylvania Department of Human Services, Bureau of Human Services Licensing, (Department), licensing inspections on December 15, 2020 of the 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 new and 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,

A handwritten signature in black ink that reads "Jamie F. Buchenauer".

Jamie Buchenauer
Deputy Secretary
Office of Long-term Living

Enclosures
License

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

Facility Information

Name: *THE PATHWAYS AT WARRINGTON* License #: *14747* License Expiration Date:
 Address: *2900 STREET ROAD, WARRINGTON, PA 18976*
 County: *BUCKS* Region: *SOUTHEAST*

Administrator

Name: *Michele DiVincenzo* Phone: *215-593-2900* Email:
MDiVincezo@GloriaDeiCommunities.com;
shparker@pa.gov

Legal Entity

Name: *GDL FRAMS CORP.*
 Address: *3501 MASON MILL ROAD, Suite 403, HUNTINGDON VALLEY, PA, 19006*
 Phone: *215-593-2900* Email: *Vdattilo@gloriadeicommunities.com*

Certificate(s) of Occupancy

Type: *I-2* Date: *10/20/2020* Issued By: *Warrington Twp*

Staffing Hours

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

Inspection

Type: *Partial* Notice: *Announced* BHA Docket #:
 Reason: *New* Exit Conference Date: *12/15/2020*

Inspection Dates and Department Representative

12/15/2020 - On-Site: Jennie Heinberg

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *108* Residents Served: *0*

Secured Dementia Care Unit

In Home: *Yes* Area: *first floor* Capacity: *42* 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

12/15/2020 - Partial

Lead Inspector: *Jennie Heinberg*

Follow-Up Type: *Not Required*

No Deficiencies Identified