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

July 31, 2026

[redacted]
DIVINE LIVING HOME LLC
[redacted]

RE: DIVINE LIVING HOME
3828 COMLUMBIA AVENUE
MOUNTVILLE, PA, 17554
LICENSE/COC#: 33824

[redacted]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 06/04/2026 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]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: *DIVINE LIVING HOME* **License #**: *33824* **License Expiration**: *07/09/2026*

Address: *3828 COMLUMBIA AVENUE, MOUNTVILLE, PA 17554*

County: *LANCASTER* **Region**: *CENTRAL*

Administrator

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

Legal Entity

Name: *DIVINE LIVING HOME LLC*

Address: [redacted]

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

Certificate(s) of Occupancy

Type: *C-2 LP* **Date**: *07/07/1983* **Issued By**: *Department of Labor and Industry*

Staffing Hours

Resident Support Staff: *0* **Total Daily Staff**: *31* **Waking Staff**: *23*

Inspection Information

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

Reason: *Complaint, Incident* **Exit Conference Date**: *06/04/2026*

Inspection Dates and Department Representative

06/04/2026 - On-Site: [redacted]

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: *39* **Residents Served**: *31*

Secured Dementia Care Unit

In Home: *No* **Area**: **Capacity**: **Residents Served**:

Hospice

Current Residents: *0*

Number of Residents Who:

Receive Supplemental Security Income: *22* **Are 60 Years of Age or Older**: *23*

Diagnosed with Mental Illness: *20* **Diagnosed with Intellectual Disability**: *5*

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

Inspections / Reviews

06/04/2026 Partial

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *07/06/2026*

06/29/2026 - POC Submission

Submitted By: [redacted] **Date Submitted**: *07/30/2026*

Reviewer: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *07/06/2026*

Inspections / Reviews *(continued)*

07/07/2026 POC Submission

Submitted By: [redacted] **Date Submitted:** *07/30/2026*

Reviewer: [redacted] **Follow Up Type:** *Document Submission* **Follow Up Date:** *07/31/2026*

07/31/2026 Document Submission

Submitted By: [redacted] **Date Submitted:** *07/30/2026*

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] Resident [redacted] punched Resident [redacted] in the eye, resulting in a bruised eye. Resident [redacted] then threatened Resident [redacted] stating, "I got big scissors, [I'll] [redacted] you". The police were contacted and Resident [redacted] requested that assault charges be filed against Resident [redacted]

Repeated Violation - [redacted], et al., [redacted], et al.

Plan of Correction ***Accept ([redacted] 07/07/2026)***

Direct Care staff immediately intervened and confiscated scissors from Resident [redacted] s possession. DCS asked resident [redacted] if [redacted] wanted police to be called, [redacted] refused.
House manager contacted administrator when report was given [redacted] on 5/7/2026. Administrator completed incident report on 5/7/26, within state required time. Administrator contacted protective services on 5/7/2026. Act 13 was completed and sent to AAA on 5/8/26. Administrator spoke to both residents involved, as well as staff on 5/7/2026. During this interview Resident [redacted] stated [redacted] did in fact want to contact law enforcement to file a police report, which administrator called at that time. Police took a report from both residents and returned on 05/11/2026 to confirm resident [redacted] still wanted to press charges; and [redacted] confirmed [redacted] did. Outcome of charges still pending. Protective services conducted their own investigation in which it was later closed.
DCS was instructed from 05/08/2026 on to conduct hourly walk-throughs of hallways outside of both residents' rooms during night hours to ensure safety for the week to follow ending 05/15/2026 and report any issues found. No issues occurred. Both residents were instructed to have no contact with each other at all. Both residents were able to contract for safety on 05/08/2026 agreeing that they are not a threat to anyone or themselves or that they will not hurt anyone or themselves. Both residents are still residing in the home.
Administrator [redacted] provided education to all residents on Residents Rights on 4/22/26. Administrator [redacted] will provide more education on residents rights within 30 days, before July 31, 2026.
Supervision has already been increased from the date of the incident. Both residents are being checked on hourly while in the facility. The support plan was updated to reflect support needed for both residents on 5/7/26 and 6/10/26.
To help prevent abuse between residents, staff will continue to closely supervise interactions, identify and respond to conflicts early, and separate residents if there is a risk of harm. Encourage respectful behavior, ensure residents know how to report concerns, and Regular monitoring and person-centered support can help maintain a safe environment for everyone.
To ensure Continued compliance with the state regulations, administrator will report any incidents within 24 hours to the state and within 48 hours to protective services with no end date.

Licensee's Proposed Overall Completion Date: *07/31/2026*

Implemented [redacted] - 07/31/2026)

225c - Additional Assessment

2. Requirements

2600.
225.c. The resident shall have additional assessments as follows:
2. If the condition of the resident significantly changes prior to the annual assessment.

Description of Violation

Resident [redacted] assessment, dated [redacted] indicated no Behavioral or Cognitive needs related to Irritability or Agitation. However, multiple staff interviews indicated Resident [redacted] is "really mean to everyone" and "very angry all the time."

Resident [redacted] assessment, dated [redacted] indicated no Behavioral or Cognitive needs related to Judgement. However, staff interviews indicated Resident [redacted] "is very impulsive and doesn't think of repercussions". On [redacted], Resident [redacted] was transported back to the home by a police officer after an allegation of the resident removing items from vehicles. Additionally, Resident [redacted] is diagnosed with [redacted] and [redacted] and is prescribed [redacted] (take 1 tablet by mouth daily) and [redacted] (take 1 tablet by mouth every morning before breakfast on an empty stomach). The resident's May 2026 Medication Administration Record (MAR) indicated 22 instances of Resident [redacted] either refusing medication or not returning home to receive medication.

Resident [redacted] assessment, dated [redacted] indicated no Behavioral or Cognitive needs related to [redacted]. However, on [redacted], Resident [redacted] received a write up after several warnings for verbal insults toward other residents, including calling a resident a "[redacted]", "which highly upset that resident". Staff notes within the resident's record indicate bullying, belittling, and name-calling of other residents continued into May of 2026. Multiple resident interviews indicated Resident [redacted] has called others a "[redacted], and [redacted]

Resident [redacted] s assessment has not been updated to reflect the resident's changes in the area of Behavioral needs

Repeated Violation - [redacted], et al.

Plan of Correction ***Accept [redacted] - 06/29/2026)***

In response to the violation on [redacted] by the Pennsylvania Bureau of Human Service Licensing, immediate action was taken on 05/11/2026 by the administrator to update resident [redacted] RASP to reflect behavioral needs for support.

To enhance the currently compliant operations, on 05/11/2026 the administrator will update RASP after any significant observed behavior change, with a completion date of 12/31/2026.

Effective 05/11/2026 the administrator will sit with the resident after any reportable incident or reported change of behavior by direct care staff to assess if an update in support is needed or change needs to be made on RASP, through 12/31/2026 to maintain ongoing compliance with ensuring each resident has additional assessments, including if the condition of the resident significantly changes prior to the annual assessment. Any deficiencies will be corrected immediately, and findings will be documented and reviewed internally for continuous improvement purposes.

Licensee's Proposed Overall Completion Date: *12/31/2026*

Implemented [redacted] - 07/31/2026)