

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

August 31, 2026

[REDACTED]
LANCO PERSONAL CARE LLC
[REDACTED]
[REDACTED]

RE: PINE MANOR HOME
2165 NEW HOLLAND PIKE
LANCASTER, PA, 17601
LICENSE/COC#: 33734

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/16/2026 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: PINE MANOR HOME

License #: 33734

License Expiration: 09/28/2026

Address: 2165 NEW HOLLAND PIKE, LANCASTER, PA 17601

County: LANCASTER

Region: CENTRAL

Administrator

Name:

Phone:

Email:

Legal Entity

Name: LANCO PERSONAL CARE LLC

Address:

Phone:

Email:

Certificate(s) of Occupancy

Type: Other

Date: 02/24/2000

Issued By: East Lampeter Township

Staffing Hours

Resident Support Staff: 0

Total Daily Staff: 23

Waking Staff: 17

Inspection Information

Type: Partial

Notice: Unannounced

BHA Docket #:

Reason: Complaint

Exit Conference Date: 07/16/2026

Inspection Dates and Department Representative

07/16/2026 - On-Site:

Resident Demographic Data as of Inspection Dates

General Information

License Capacity: 31

Residents Served: 23

Secured Dementia Care Unit

In Home: No

Area:

Capacity:

Residents Served:

Hospice

Current Residents: 0

Number of Residents Who:

Receive Supplemental Security Income: 11

Are 60 Years of Age or Older: 22

Diagnosed with Mental Illness: 11

Diagnosed with Intellectual Disability: 0

Have Mobility Need: 0

Have Physical Disability: 0

Inspections / Reviews

07/16/2026 Partial

Lead Inspector:

Follow-Up Type: POC Submission

Follow-Up Date: 08/08/2026

08/05/2026 - POC Submission

Submitted By:

Date Submitted: 08/28/2026

Reviewer:

Follow-Up Type: Document Submission Follow-Up Date: 08/31/2026

Inspections / Reviews *(continued)*

08/31/2026 Document Submission

Submitted By: [REDACTED]

Date Submitted: 08/28/2026

Reviewer: [REDACTED]

Follow Up Type: *Not Required*

85a - Sanitary Conditions**1. Requirements**

2600.

85.a. Sanitary conditions shall be maintained.

Description of Violation

On [REDACTED], at 9:25am, there was a mattress with a stained mattress cover stored in the lower stairwell storage area of the home, a fly carcass on the windowsill near the storage area, and various debris, dirt, and bug carcasses on the floor. Incontinence briefs and other supplies are kept in this area.

On [REDACTED], at 9:45am, there were bug carcasses in the hallway located near the lounge on the lower level.

Plan of Correction

Accept [REDACTED] - 08/05/2026)

The staff removed the stained mattress from the bottom of the stairs and cleaned the floors on 7/16/2026. On 7/20/2026, the administrator trained the staff to ensure all soiled items are disposed of in the outside dumpster and that the area under the stairs is not used for storage.

To maintain sanitary conditions, the administrator will conduct monthly checks for the next four months. Additionally, housekeeping staff have been reminded to inspect rooms for any items requiring cleaning or replacement and report them to the administrator.

Licensee's Proposed Overall Completion Date: 08/31/2026

Implemented [REDACTED] - 08/31/2026)

95 - Furniture and Equipment**2. Requirements**

2600.

95. Furniture and Equipment - Furniture and equipment must be in good repair, clean and free of hazards.

Description of Violation

On [REDACTED] at 9:23am, the sink located in the large common bathroom of the lower level was not working. The sink faucet was taped up with beige masking tape, and there was a sign in the sink, stating, "Sink is out of order."

Plan of Correction

Accept [REDACTED] - 08/05/2026)

The plumbing company was initially called on 7/14/26 regarding the sink, but they were unable to complete the repair immediately as parts needed to be ordered. The sink was successfully repaired by Roto-Rooter on 7/22/26.

To prevent similar delays in the future, the following steps have been implemented:

The Assistant Administrator has been reminded staff to request service immediately upon receiving a maintenance report.

- Maintenance phone numbers have been shared with all staff members so they can report broken items directly.

Administrator will conduct monthly maintenance audits of the home for the next four months, followed by random audits thereafter, to identify any necessary repairs.

95 Furniture and Equipment (*continued*)

Licensee's Proposed Overall Completion Date: 08/31/2026

Implemented [REDACTED] 08/31/2026)

125b - Combustible Restrictions

3. Requirements

2600.

125.b. Combustible materials shall be inaccessible to residents.

Description of Violation

On [REDACTED], at 9:26am, a can of paint was located in the stairwell at the bottom level in a storage area. This can of paint was unlocked, unattended, and accessible to residents in the stairwell at the bottom level in a storage area.

Plan of Correction

Accept [REDACTED] - 08/05/2026)

The administrator removed the paint from the bottom of the steps on 7/16/26 and secured it in a locked area. Staff were retrained on 7/20/2026 on the importance of ensuring all combustible materials and poisons are locked away and inaccessible to residents.

Additionally, the administrator completed a walkthrough of the entire home to ensure no other combustible materials were left out. Moving forward, the cleaning staff has been tasked with performing weekly checks for the next month, followed by monthly checks for the subsequent three months.

Licensee's Proposed Overall Completion Date: 08/31/2026

Implemented [REDACTED] - 08/31/2026)

141a - Medical Evaluation

4. Requirements

2600.

141.a. A resident shall have a medical evaluation by a physician, physician's assistant or certified registered nurse practitioner documented on a form specified by the Department, within 60 days prior to admission or within 30 days after admission.

Description of Violation

Resident [REDACTED] initial medical evaluation was completed on [REDACTED]. However, the resident was admitted to the home on [REDACTED].

Plan of Correction

Accept [REDACTED] - 08/05/2026)

On August 5, 2026, the York administrator provided training to the Lancaster administrator regarding the requirement to complete residents' DME within 60 days prior to admission and 30 days post admission.

Additionally, the administrator audited residents' files to ensure all DME was completed in a timely manner; no documentation issues were found outside of the one listed.

To ensure future compliance, the administrator has created a log to track all upcoming DME, MA51, and RASP requirements for all residents. Calendar reminders will also be set to audit new residents' evaluations post admission to ensure they are completed within the required timeline. Administrator shall do monthly audits for all new admissions for the next four months and randomly after that.

Licensee's Proposed Overall Completion Date: 08/31/2026

141a Medical Evaluation (*continued*)

Implemented ( *08/31/2026)*