

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

October 8, 2025

[REDACTED]
WG CENTER CITY SH LLC

[REDACTED]
ATTN-ATRIA MGMT CO- LEGAL DEPT
[REDACTED]

RE: ATRIA CENTER CITY
150 NORTH 20TH STREET
PHILADELPHIA, PA, 19103
LICENSE/COC#: 13657

[REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 09/04/2025 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: *ATRIA CENTER CITY* License #: *13657* License Expiration: *05/15/2025*
 Address: *150 NORTH 20TH STREET, PHILADELPHIA, PA 19103*
 County: *PHILADELPHIA* Region: *SOUTHEAST*

Administrator

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

Legal Entity

Name: *WG CENTER CITY SH LLC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *I-1* Date: *12/12/2024* Issued By: *City of Phila, L&I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *156* Waking Staff: *117*

Inspection Information

Type: *Partial* Notice: *Unannounced* BHA Docket #:
 Reason: *Incident, Monitoring* Exit Conference Date: *09/04/2025*

Inspection Dates and Department Representative

09/04/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *165* Residents Served: *111*

Secured Dementia Care Unit
 In Home: *Yes* Area: *Life Guidance* Capacity: *25* Residents Served: *21*

Hospice
 Current Residents: *5*

Number of Residents Who:
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *111*
 Diagnosed with Mental Illness: *3* Diagnosed with Intellectual Disability: *1*
 Have Mobility Need: *45* Have Physical Disability: *0*

Inspections / Reviews

09/04/2025 Partial
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *10/04/2025*

10/08/2025 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *10/08/2025*
 Reviewer: [REDACTED] Follow-Up Type: *Bypass Document Submission*

Inspections / Reviews *(continued)*

10/08/2025 Bypass Document Submission

Submitted By: [REDACTED]

Date Submitted: 10/08/2025

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

Resident [REDACTED] and resident [REDACTED], a married couple, have lived in Life Guidance, the home's secure dementia care unit, since [REDACTED]. On [REDACTED], their power of attorney reported that two iPads belonging to the residents were missing from their apartment. The power of attorney used resident [REDACTED] cell phone to track one of the iPads to a location and reported this location to the home. The home discovered that this location was one street number/house number down from the current address of direct care staff person A.

Direct care staff person A works in Life Guidance and has provided resident [REDACTED] and resident [REDACTED] care in their apartment on several dates leading up to the date the iPads were reported to be missing. Although staff person A denied the theft when reached by the home on [REDACTED] the staff person was terminated after failing to provide a written statement. An agent for the Department reached staff person A by phone on [REDACTED] but when the agent identified themselves, staff person A immediately hung up and did not answer a return call and message. The home filed a police report on behalf of Resident [REDACTED] and Resident [REDACTED] for their stolen property.

Plan of Correction

Accept [REDACTED] 10/08/2025)

On 9/2/25, the Executive Director (ED), immediately conducted an internal investigation once notified by the Power of Attorney (POA) for Resident [REDACTED] and Resident [REDACTED] that 2 iPads were missing from their apartment. The POA gave an address with a location of one of the iPads. The ED ran that address through our internal employee database and discovered that the location was one street number/house number down from the current address of direct care staff person A.

On 9/3/25, the ED filed a police report on behalf of Resident [REDACTED] and Resident [REDACTED] for their stolen property.

On 9/3/25, the ED and Community Business Director (CBD) called and suspended staff person A as part of the investigation. Staff person A denied taking the iPads. During this call, the ED asked staff person A to provide a written statement. Staff person A acknowledged that they would send the ED an email with their statement and asked ED to text them ED's email address. The text was sent immediately after the call and staff person A responded that they would be "sending my statement over shortly".

On 9/3/25, the ED provided an in-service to the leadership team to discuss and review the importance of Chapter 2600.42b especially pertaining to theft and stolen property.

On 9/4/25, the ED followed up with staff person A. Staff person A did not provide a response or a statement regarding the iPads.

On 9/4/25, the ED and Life Guidance Director (LGD) provided an in-service to the Life Guidance Resident Services Assistants to discuss and review the importance of Chapter 2600.42b especially pertaining to theft and stolen property.

On 9/9/25, staff person A was terminated due to failure to comply with this investigation.

42b - Abuse (continued)

On 9/11/25, the ED reimbursed Resident [REDACTED] and Resident [REDACTED] for the iPads.

On 9/25/25, the ED held an employee town hall to discuss and review the importance of Chapter 2600.42b especially pertaining to theft and stolen property.

On 9/26/25, the ED reached out to the Atria Training Team to reassign all Life Guidance Caregivers, the Resident Rights and Abuse & Neglect course which will be completed no later than 10/15/25.

On 9/30/25 and ongoing, This Plan of Correction will be discussed and evaluated quarterly for two quarters by the ED and Leadership Team at the Quality Management (QAPI) meeting to verify it is still effective. If not effective, it will be amended and a new POC and training will be implemented and monitored to verify the violation does not occur.

Licensee's Proposed Overall Completion Date: 10/15/2025

Implemented [REDACTED] - 10/08/2025)