

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

March 3, 2023

[REDACTED]
HOME FOR THE FRIENDLESS, INC.
[REDACTED]

RE: HOMELAND CENTER
1901 NORTH FIFTH STREET
HARRISBURG, PA, 17102
LICENSE/COC#: 34280

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 02/28/2023, 03/01/2023 of the above facility, no regulatory citations have been identified as a result of this inspection.

Please note that you are required to post this Licensing Inspection Summary at your facility in a conspicuous location.

Sincerely,
[REDACTED]

Enclosure
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: *HOMELAND CENTER* License #: *34280* License Expiration: *09/11/2023*
Address: *1901 NORTH FIFTH STREET, HARRISBURG, PA 17102*
County: *DAUPHIN* Region: *CENTRAL*

Administrator

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

Legal Entity

Name: *HOME FOR THE FRIENDLESS, INC.*
Address: *1901 NORTH FIFTH STREET, HARRISBURG, PA, 17102*
Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *I-2* Date: *12/08/2003* Issued By: *City of Harrisburg*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *33* Waking Staff: *25*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
Reason: *Renewal* Exit Conference Date: *03/01/2023*

Inspection Dates and Department Representative

02/28/2023 - On-Site: [REDACTED]
03/01/2023 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information			
License Capacity:	<i>56</i>	Residents Served:	<i>30</i>
Secured Dementia Care Unit			
In Home:	<i>No</i>	Area:	
Capacity:		Residents Served:	
Hospice			
Current Residents:	<i>0</i>		
Number of Residents Who:			
Receive Supplemental Security Income:	<i>0</i>	Are 60 Years of Age or Older:	<i>30</i>
Diagnosed with Mental Illness:	<i>0</i>	Diagnosed with Intellectual Disability:	<i>0</i>
Have Mobility Need:	<i>3</i>	Have Physical Disability:	<i>0</i>

Inspections / Reviews

02/28/2023 - Full
Lead Inspector: [REDACTED] Follow-Up Type: *Not Required*

NO DEFICIENCIES FOUND