

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

March 28, 2024

[REDACTED], CEO/NHA  
HOME FOR THE FRIENDLESS, INC.  
1901 NORTH FIFTH STREET  
HARRISBURG, PA, 17102

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 review on 02/29/2024 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: *HOMELAND CENTER* License #: *34280* License Expiration: *09/11/2024*  
 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-1* Date: *12/08/2003* Issued By: *City of Harrisburg*  
 Type: *Other* Date: *08/16/1982* Issued By: *Department of Labor & Industry*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *42* Waking Staff: *32*

**Inspection Information**

Type: *Full* Notice: *Unannounced* BHA Docket #:  
 Reason: *Renewal* Exit Conference Date: *02/29/2024*

**Inspection Dates and Department Representative**

*02/29/2024 - On-Site* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

General Information  
 License Capacity: *56* Residents Served: *38*  
 Secured Dementia Care Unit  
 In Home: *No* Area: Capacity: Residents Served:  
 Hospice  
 Current Residents: *0*  
 Number of Residents Who:  
 Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *40*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*  
 Have Mobility Need: *4* Have Physical Disability: *0*

**Inspections / Reviews**

*02/29/2024 Full*  
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *03/14/2024*

Inspections / Reviews *(continued)*

03/15/2024 POC Submission

Submitted By: [REDACTED]

Date Submitted: 03/25/2024

Reviewer: [REDACTED]

Follow Up Type: Document Submission Follow Up Date: 04/01/2024

03/28/2024 Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/25/2024

Reviewer: [REDACTED]

Follow Up Type: Not Required

182c - Medication Administration

1. Requirements

2600.

182.c. Medication administration includes the following activities, based on the needs of the resident:

Description of Violation

Per staff interview on 2/29/2024, the home administers medications to residents who require assistance during evening mealtime. Their medication administration process consists of staff filling multiple cups with multiple residents' medications at the same time, placing the cups on a cart referred to as the "cow," then leaving the medication area to disperse the medications to each resident.

Plan of Correction

Accept [redacted] - 03/15/2024

1. Staff was notified of the violation report and procedure change during meetings on 3/6/24 & 3/7/24. (see attached sign-in sheet)
2. Smaller med carts were requested from contracted pharmacy on 3/7/24 so that they will be easier to maneuver to the dining room, on the elevators and through the hallways. The new carts were delivered on 3/13/24 and the medications are being re-organized to fit.
3. Beginning on 3/18/24, the COW (cart on wheels) will only be used if staff needs to deliver one resident's medication to a location outside of the medication prep area.
4. Beginning on 3/18/24, staff will not pre-pour medication & will begin to use the medication cart in the dining room for meals & room to room.
5. Residents will be notified of the reason for the change at the scheduled Resident Council meeting on 3/21/24.
6. Med Administration audits will be conducted by Administrator or designee weekly x4, then monthly x4, then quarterly going forward to measure compliance. The first audit will occur on 3/25/24. (see attached audit form)

Licensee's Proposed Overall Completion Date: 03/25/2024

Implemented [redacted] - 03/28/2024

187a - Medication Record

2. Requirements

2600.

187.a. A medication record shall be kept to include the following for each resident for whom medications are administered:

Description of Violation

Resident #1 is prescribed [redacted] by mouth at bedtime. The medication was on hold from [redacted] and not administered; however, staff documented an administration in the resident's Medication Administration Record on [redacted].

Plan of Correction

Accept [redacted] - 03/15/2024

1. Staff person involved with the error on [redacted] was formally disciplined on [redacted]. Staff member states that [redacted] did not give the held medication because it was not available. [redacted] inadvertently charted the medication because the hold released on [redacted] and it popped up on the Point Click Care charting system to give. [redacted] stated that [redacted] knew [redacted] had a charting error but forgot to go back and correct [redacted] charting. (see attached disciplinary form)
2. Education of all Med Techs & LPNs on proper medication administration and documentation will be completed by 3/7/24. (see attached sign-in sheet)
3. Training included doing proper checks, glucose monitoring & proper documentation. Directions were given/reviewed with all Med Techs & LPNs on how to place a "hold" and a "continued hold" on medication in the

187a Medication Record (continued)

Point Click Care system. (see attached documents)

Licensee's Proposed Overall Completion Date: 03/13/2024

Implemented ( [REDACTED] - 03/28/2024)