

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

November 26, 2024

[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 licensing inspections on 11/25/2024 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: *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**

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *146* Waking Staff: *110*

**Inspection Information**

Type: *Partial* Notice: *Unannounced* BHA Docket #:  
 Reason: *Fine* Exit Conference Date: *11/25/2024*

**Inspection Dates and Department Representative**

11/25/2024 - On-Site: [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *165* Residents Served: *110*

**Secured Dementia Care Unit**

In Home: *Yes* Area: *Life Guidance* Capacity: *25* Residents Served: *20*

**Hospice**

Current Residents: *4*

**Number of Residents Who:**

Receive Supplemental Security Income: *0* Are 60 Years of Age or Older: *110*  
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *1*  
 Have Mobility Need: *36* Have Physical Disability: *8*

**Inspections / Reviews**

11/25/2024 Partial

Lead Inspector: [REDACTED] Follow-Up Type: *Not Required*

**NO DEFICIENCIES FOUND**