

Department of Human Services  
Bureau of Human Service Licensing

October 12, 2021

[REDACTED], EXECUTIVE DIRECTOR  
FRIENDS BOARDING HOME OF WESTERN QUARTERLY MEETING  
147 WEST STATE STREET  
KENNETT SQUARE, PA 19348

RE: FRIENDS BOARDING HOME OF  
WESTERN QUARTERLY MEETING  
147 WEST STATE STREET  
KENNETT SQUARE, PA, 19348  
LICENSE/COC#: 14002

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing licensing inspections on 08/26/2021 of the above facility, the citations specified on the enclosed Licensing Inspection Summary (LIS) were found.

We have determined that your plan of correction is: Acceptable

All citations specified on the plan of correction must be corrected by the dates specified on the License Inspection Summary (violation report) and continued compliance with Department statutes and regulations must be maintained.

Sincerely,  
[REDACTED]

Enclosure  
Licensing Inspection Summary (LIS)

cc: Pennsylvania Bureau of Human Service Licensing

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

**Facility Information**

Name: *FRIENDS BOARDING HOME OF WESTERN QUARTERLY MEETING* License #: *14002* License Expiration Date: *02/23/2022*  
Address: *147 WEST STATE STREET, KENNETT SQUARE, PA 19348*  
County: *CHESTER* Region: *SOUTHEAST*

**Administrator**

Name: [REDACTED] Phone: *6104442577* Email: [REDACTED]

**Legal Entity**

Name: *FRIENDS BOARDING HOME OF WESTERN QUARTERLY MEETING*  
Address: *147 WEST STATE STREET, KENNETT SQUARE, PA, 19348*  
Phone: *6104442577* Email: [REDACTED]

**Certificate(s) of Occupancy**

Type: *C-2 LP* Date: *03/28/1988* Issued By: *COPA L & I*

**Staffing Hours**

Resident Support Staff: *0* Total Daily Staff: *26* Waking Staff: *20*

**Inspection**

Type: *Full* Notice: *Unannounced* BHA Docket #:  
Reason: *Renewal* Exit Conference Date: *08/26/2021*

**Inspection Dates and Department Representative**

*08/26/2021 - On-Site:* [REDACTED]

**Resident Demographic Data as of Inspection Dates**

**General Information**

License Capacity: *68* Residents Served: *26*

**Secured Dementia Care Unit**

In Home: <i>No</i>	Area:	Capacity:	Residents Served:
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**Hospice**

Current Residents: *0*

**Number of Residents Who:**

Receive Supplemental Security Income: <i>0</i>	Are 60 Years of Age or Older: <i>26</i>
Diagnosed with Mental Illness: <i>0</i>	Diagnosed with Intellectual Disability: <i>0</i>
Have Mobility Need: <i>0</i>	Have Physical Disability: <i>0</i>

Inspections / Reviews

08/26/2021 - Full

Lead Inspector: [REDACTED]

Follow-Up Type: *POC Submission*

Follow-Up Date: *10/08/2021*

10/8/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *POC Submission*

Follow-Up Date: *10/12/2021*

10/12/2021 - POC Submission

Lead Reviewer: [REDACTED]

Follow-Up Type: *Document Submission*

Follow-Up Date: *11/05/2021*

107d - Procedure Emergency Management Agency Submission

1. Requirements

2600.

107.d. The written emergency procedures shall be reviewed, updated and submitted annually to the local emergency management agency.

Description of Violation

*The home's written emergency procedures have not been submitted to the local emergency management agency since 10/31/19.*

Plan of Correction

Do Not Accept

*The Friends Home Emergency Operations Plan was reviewed, updated and shared with [REDACTED], the new Fire Chief in Kennett Square as well as [REDACTED] of the KSQ Borough. [REDACTED] also provided me with the Boroughs updated Emergency Plan.*

Completion Date: 10/08/2021

Plan of Correction

Accept

*The Friends Home Emergency Operations Plan was reviewed, updated and shared with [REDACTED], the new Fire Chief in Kennett Square as well as [REDACTED] of the KSQ Borough. [REDACTED] also provided me with the Boroughs updated Emergency Plan. The responsibility for the annual review and submission to authorities is the Executive Director. This task has been placed on the calendar in the ED manual which details ongoing annual items that need to be addressed. The task is on the September calendar in the ED manual for subsequent years*

Completion Date: 10/08/2021

183a - Original Containers and Injections

1. Requirements

2600.

183.a. Prescription medications, OTC medications and CAM shall be kept in their original labeled containers and may not be removed more than 2 hours in advance of the scheduled administration. Assistance with insulin and epinephrine injections and sterile liquids shall be provided immediately upon removal of the medication from its container.

Description of Violation

*On 8/26/21 at 1:10P.M., [REDACTED] for Resident # 1 was in a blister card. The rear of the blister card had a torn foil backing over one of the pills, with a piece of tape over the torn foil.*

Plan of Correction

Do Not Accept

*The Friends Home in Kennett will revise the weekly cart audit to include verifying insulin open dates and documenting discard date to insure insulin is being used prior to its expiring date. The revised cart audit policy and procedure is attached to the POC*

Completion Date: 10/08/2021

183a - Original Containers and Injections (*continued*)

**Plan of Correction**

**Accept**

*The medication technician was identified and took accountability as the medication technician who placed the tape over the torn foil of the pod on the blister pack. This medication technician was verbally counseled on the medication process. Attached are the documentation of the disciplinary action and Department of Human Services Medication Administration: Getting It Right? Lesson 5 Recording of Storage of Medication. Also attached is the policy and procedure on medication wasting.*

*the Medication cart audit includes checking the packaging of all medications weekly. This audit is performed weekly by a PC staff member and the results provided to the Director of PC*

**Completion Date:** 10/08/2021

183e - Storing Medications

**1. Requirements**

2600.

183.e. Prescription medications, OTC medications and CAM shall be stored in an organized manner under proper conditions of sanitation, temperature, moisture and light and in accordance with the manufacturer's instructions.

**Description of Violation**

*On 8/26/21 Resident # 2's [REDACTED], was present and opened in the medication cart with no open date. According to the manufacturer's instructions the medication should be discarded 28 days after it is opened.*

**Plan of Correction**

**Do Not Accept**

*The medication technician was identified and took accountability as the medication technician who placed the tape over the torn foil of the pod on the blister pack. This medication technician was verbally counseled on the medication process. Attached are the documentation of the disciplinary action and Department of Human Services Medication Administration: Getting It Right? Lesson 5 Recording of Storage of Medication. Also attached is the policy and procedure on medication wasting*

**Completion Date:** 10/08/2021

**Plan of Correction**

**Accept**

*The Friends Home in Kennett will revise the weekly cart audit to include verifying insulin open dates and documenting discard date to insure insulin is being used prior to its expiring date. The revised cart audit policy and procedure is attached to the POC. The audit is performed weekly by the PC staff and the result presented to the Director of PC,*

**Completion Date:** 10/08/2021