Department of Human Services
Office of Children, Youth and Families

Licensing Inspection Summary - Public

55 PA.CODE CHAPTER 3800

July 18, 2025

[redacted], DIRECTOR
ABH PENNSYLVANIA CHILDREN'S SERVICES, INC.
444 DEVEREUX DRIVE
VILLANOVA, PA, 19085

RE: JACKSON A
106 DEVEREUX CIRCLE
WEST CHESTER, PA, 19380
LICENSE/COC#: 15077

Dear [redacted],

As a result of the Pennsylvania Department of Human Services, Office of Children, Youth and Families review on 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 Office of Children, Youth and Families

Agency/Facility Information

Name: *JACKSON A*
Address: *106 DEVEREUX CIRCLE, WEST CHESTER, PA 19380*
County: *CHESTER*
License Number: *15077*
License Expiration: *09/01/2025*

Administrator

Name: [redacted] **Phone**: [redacted] **Email**: [redacted]

Legal Entity

Name: *ABH PENNSYLVANIA CHILDREN'S SERVICES, INC.*
Address: *444 DEVEREUX DRIVE, VILLANOVA, PA, 19085*
Phone: [redacted] **Email**: [redacted]

Inspection Information

Start Date: *05/27/2025* **End Date**: *05/28/2025* **Type**: *Renewal* **Notice**: *Announced Visit*

Inspector(s): [redacted]

Inspection Narrative

The Department of Human Services Office of Children Youth and Families conducted a license inspection at ABH Pennsylvania Children's Services (Jackson A) on 5/27/25 5/30/25. During the period under review 5/1/24 4/30/25, the Department reviewed 142 staff files and 16 resident files. The Department also completed a physical site inspection of the facility which they are in compliance.

Inspections / Reviews

05/27/2025 Renewal

Lead Inspector: [redacted] **Follow-Up Type**: *POC Submission* **Follow-Up Date**: *06/16/2025*

07/02/2025 - POC Submission

Reviewer: [redacted] **Follow Up Type**: *On site Verification* **Follow Up Date**: *07/18/2025*

07/02/2025 On site Verification

Submitted By: [redacted] **Date Submitted**: *06/19/2025*
Reviewer: [redacted] **Follow Up Type**: *Not Required*

3800.181 Storage of Medications

1. Requirements

3800.181.f. Discontinued and expired medications, and prescription medications for children who are no longer served at the facility, shall be disposed of in a safe manner.

Description of Violation

On 5/9/25, discontinued prescription medications for Child A were found on-site and not disposed of in a safe manner.

Plan of Correction ***Accept (- 07/02/2025)***

Nursing protocol requires that when a nurse receives medications from pharmacy weekly, he/she will inspect the medication delivery for accuracy regarding current orders. In this instance, a blister pack should have been labeled with sticker stating (medication discontinued- see MAR), as well as informing the pharmacy that the medication was discontinued. Expectations will be reviewed with all nursing staff with a deadline of July 15, 2025. Nurse Manager will monitor compliance moving forward.

Licensee's Proposed Overall Completion Date: *07/15/2025*

On-site Verification ***Implemented (- 07/18/2025)***

Training completed on 7/12/25 indicating that nursing staff will adhere to the procedure for discontinued medication is that they will discontinue the Meds in ChartMeds and destroy all discontinued medication is Drug Buster as well as send discontinued medication order to the pharmacy.

3800.184 Medication Log

2. Requirements

3800.184.b. For each prescription and over-the-counter medication including insulin administered or self-administered, documentation in the log shall include the medication that was administered, dosage, date, time and the name of the person who administered or self-administered the medication.

Description of Violation

The medication log for child A did not include a signature on 5/23/25.

Plan of Correction ***Accept (- 07/02/2025)***

The Nurse Manager will review Devereux Procedure 267: Medication Administration expectations as well as the 3800 requirements related to documentation of medication administration with all of the nursing staff. This will be completed by July 15, 2025. Primary Unit Nurses will audit bi-weekly for 60 days to ensure compliance.

Licensee's Proposed Overall Completion Date: *07/15/2025*

On-site Verification ***Implemented (- 07/18/2025)***

All nursing staff completed the required training indicating that will adhere to the medication policy (Check EMARs) for all individuals and to ensure that initials are not missing and all medication are signed out properly.