

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

August 15, 2025

[REDACTED], EXECUTIVE DIRECTOR
SPIRIT OF GHEEL
P.O.BOX 610
KIMBERTON, PA, 19442

RE: BUTTONWOOD FARM
14 BUTTONWOOD LANE,P.O.BOX
610
KIMBERTON, PA, 19442
LICENSE/COC#: 10790

Dear [REDACTED]

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 07/14/2025 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: *BUTTONWOOD FARM* License #: *10790* License Expiration: *01/15/2026*
 Address: *14 BUTTONWOOD LANE,P.O.BOX 610, KIMBERTON, PA 19442*
 County: *CHESTER* Region: *SOUTHEAST*

Administrator

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

Legal Entity

Name: *SPIRIT OF GHEEL*
 Address: *P.O.BOX 610, KIMBERTON, PA, 19442*
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: *C-3 SP* Date: *03/24/2000* Issued By: *COPA L & I*

Staffing Hours

Resident Support Staff: *0* Total Daily Staff: *3* Waking Staff: *2*

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Renewal* Exit Conference Date: *07/14/2025*

Inspection Dates and Department Representative

07/14/2025 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: *7* Residents Served: *3*
 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: *2*
 Diagnosed with Mental Illness: *0* Diagnosed with Intellectual Disability: *0*
 Have Mobility Need: *0* Have Physical Disability: *0*

Inspections / Reviews

07/14/2025 - Full
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: *08/01/2025*

08/12/2025 - POC Submission
 Submitted By: [REDACTED] Date Submitted: *08/13/2025*
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: *08/19/2025*

Inspections / Reviews (*continued*)

08/15/2025 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 08/13/2025

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

103i - Outdated Food

1. Requirements

2600.
103.i. Outdated or spoiled food or dented cans may not be used.

Description of Violation

There were three unlabeled, undated tupperware containers in the refrigerator on 7/14/25 at 9:17 A.M. The first container had fruit salad, the second container had ravioli, and the third had pasta sauce.

Plan of Correction

Accept (████) - 08/12/2025)

Staff have been retrained on 7/15/2025 by the Administrator to label and date all food items and checked prior to putting away after every meal. In addition, the House manager will take a daily inventory of stored food items to ensure again that all items are marked properly

Licensee's Proposed Overall Completion Date: 07/30/2025

Implemented (████) - 08/15/2025)

132c - Fire Drill Records

2. Requirements

2600.
132.c. A written fire drill record must include the date, time, the amount of time it took for evacuation, the exit route used, the number of residents in the home at the time of the drill, the number of residents evacuated, the number of staff persons participating, problems encountered and whether the fire alarm or smoke detector was operative.

Description of Violation

The fire drill record for the drill conducted on 5/30/25 does not include the number of staff who participated.

Plan of Correction

Accept (████) - 08/12/2025)

Staff have been retrained by the Administrator on 7/15/2025 to check that ALL boxes are completed on the fire drill log prior to filing in the fire drill log each time a fire drill is performed. Additionally, the house mgr will check that all information is completed on each section of the the fire drill log after each drill occurs to ensures the form is completed in its entirety.

Licensee's Proposed Overall Completion Date: 07/30/2025

Implemented (████) - 08/15/2025)

183e - Storing Medications

3. 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 7/14/25 at 10:15 A.M. Resident # 1 's ██████████ blister pack was torn at number 9.

Repeat Violation: 9/10/24

183e - Storing Medications (continued)**Plan of Correction****Accept ([REDACTED] - 08/12/2025)**

Staff have been retrained by the administrator on 7/15/2025 to check all packs each shift and return any medication to the pharmacy if it is damaged or torn immediately. Additionally, the house mgr will check all blister packs daily for any compromised blister pack.

Licensee's Proposed Overall Completion Date: 07/30/2025

Implemented ([REDACTED] - 08/15/2025)