



Sent via email to: [REDACTED]

MAILING DATE: August 27, 2012

Ms. Staci Calabro, President
New Concepts Assisted Living, Inc.
PO Box 245
Turbotville, Pennsylvania 17772

RE: Warrior Run Heritage House
11430 State Route 44
Watsonstown, Pennsylvania 17777

Dear Ms. Calabro:

As a result of the Department of Public Welfare's licensing inspection on July 17, 2012 of the above personal care home, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed Violation Report were found.

All violations specified on the enclosed Violation Report must be corrected by the dates specified on the Violation Report and continued compliance with 55 Pa.Code Ch. 2600 must be maintained. As soon as each violation is corrected, notify the Department's Regional Office of Adult Residential Licensing so that compliance can be verified.

Sincerely,

Regional Licensing Administrator

Enclosure
Violation Report

Violation Report: 21696 - 07/17/2012 - Patton, Leslie
PCH Name: WARRIOR RUN HERITAGE HOUSE

1. REGULATION 55 Pa.Code §2600

2600.20(b)(1) - The home shall keep a record of financial transactions with the resident, including the dates, amounts of deposits, amounts of withdrawals and the current balance.

2a. DESCRIPTION OF VIOLATION

The financial record of resident #1 was not properly maintained as it does not reflect a deposit of \$85.00 which occurred on or around 7/10/12 or that the resident's current balance is \$113.52.

3. PLAN OF CORRECTION (POC) (Attach pages as necessary. Remember that you must sign and date any attached pages.)

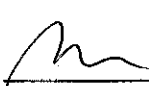
Include steps to correct the violation described above and steps to prevent a similar violation from occurring again. If steps cannot be completed immediately, include dates by which the steps will be completed.

The residents financial record was updated on 7/17/12 to accurately reflect the correct current balance of 113.52. In the future, resident financial transactions, including deposits, will be recorded immediately upon the completion of the transaction, and include a record of all required elements.

To ensure future compliance, the Administrator will have two staff persons review resident financial transactions on a monthly basis to reduce the possibility of accounting errors.

Repeat Violation: Yes	Date(s) of Previous Violation(s):	05/22/2012
Signature of Legal Entity Representative (Required on EVERY Page)		
Printed Name and Title of Legal Entity Representative (Required on EVERY Page)		Date
STRIC CALLED PCHS		7/30/12

DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!

The above plan of correction is approved as of	<u>8/24/12</u> (Date)	Plan of correction implementation status as of	<u>8/24/12</u> (Date)
The above plan of correction was approved by		<input type="checkbox"/> Fully Implemented <input checked="" type="checkbox"/> Partially Implemented - Adequate Progress <input type="checkbox"/> Partially Implemented - Inadequate Progress <input type="checkbox"/> Not Implemented	
 (Initials)			