



**pennsylvania**  
DEPARTMENT OF HUMAN SERVICES

DEC 28 2017

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

RE: Warrior Run Heritage House  
11430 State Route 44  
Watsontown, Pennsylvania 17777  
License #216960

Dear Ms. Calabro:

As a result of the Department of Human Services' (Department) annual licensing inspection on October 3, 2017 of the above facility, the violations with 55 Pa.Code Ch. 2600 (relating to Personal Care Homes) specified on the enclosed License Inspection Summary were found.

All violations specified on the enclosed License Inspection Summary must be corrected by the dates specified on the License Inspection Summary and continued compliance with 55 Pa.Code Ch. 2600 must be maintained.

In an effort to improve our licensing processes, the Bureau of Human Services Licensing is soliciting feedback about your recent human services licensing inspection experience. To participate in the online provider survey, launch your web browser and go to [https://www.surveymonkey.com/r/BHSL\\_Inspection](https://www.surveymonkey.com/r/BHSL_Inspection).

The survey is brief and will only take about 5 minutes to complete. Your participation in the survey is completely voluntary and all of your responses will be kept confidential. The responses will be reviewed as part of an aggregate of provider inspection responses. Thank you in advance for providing feedback.

Sincerely,

A handwritten signature in black ink that reads "J. Rowe".

Jacqueline L. Rowe  
Director

Enclosure  
License Inspection Summary



Violation Report: 21696 - 10/03/2017 - Foulkes, Kimberli  
 PCH Name: WARRIOR RUN HERITAGE HOUSE

**1. REGULATION 55 Pa.Code §2600**

2600.51 - Criminal history checks and hiring policies shall be in accordance with the Older Adult Protective Services Act (OAPSA) (35 P.S. §§ 10225.101-10225.5102) and 6 Pa.Code Chapter 15 (relating to protective services for older adults).

**2a. DESCRIPTION OF VIOLATION**

Staff person A, date of hire 7/24/17, had a criminal background check completed on 9/12/17. This was completed greater than 30 days from the staff's date of hire.

**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 Administrator updated Staff orientation list to include completion of criminal history background check by the designated 30 days from date of hire. This is important to ensure compliance with OAPSA. The Administrator will provide ongoing monitoring.*

Repeat Violation: No

Date(s) of Previous Violation(s):

Signature of Legal Entity Representative  
 (Required on EVERY Page)

*[Handwritten Signature]*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page)

*Shirley Calabria Ares*

Date

*11/24/17*

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

The above plan of correction is approved as of

*12/6/17*  
 (Date)

Plan of correction implementation status as of

*12/6/17*  
 (Date)

The above plan of correction was approved by

*[Handwritten Initials]*  
 (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented

Violation Report: 21696 - 10/03/2017 - Foulkes, Kimberli  
 PCH Name: WARRIOR RUN HERITAGE HOUSE

1. REGULATION 55 Pa.Code §2600  
 2600.101(j)(3) - Each resident shall have the following in the bedroom: Pillows, bed linens and blankets that are clean and in good repair.

2a. DESCRIPTION OF VIOLATION  
 A pillow and pillow case in room #5 were found heavily stained in the bed closest to the right side of the room.

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 pillow and case were replaced immediately on day of inspection. Examining the condition of pillows and linens were added to the Resident Bedroom Check list. In order to maintain compliance and provide clean equipment to residents, staff will inspect linens and bed pillows weekly during laundry services and replace as necessary. Administrator will monitor and ensure ongoing compliance*

Repeat Violation: No	Date(s) of Previous Violation(s):			
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *Steve Calabro*

Printed Name and Title of Legal Entity Representative  
 (Required on EVERY Page) *STEVE CALABRO PRES* Date *11/24/17*

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

The above plan of correction is approved as of <u>12/6/17</u> (Date)	Plan of correction implementation status as of <u>12/6/17</u> (Date)
The above plan of correction was approved by <u><i>m</i></u> (Initials)	<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

Violation Report: 21696 - 10/03/2017 - Foulkes, Kimberli  
 PCH Name: WARRIOR RUN HERITAGE HOUSE

1. REGULATION 55 Pa.Code §2600  
 2600.101(j)(7) - Each resident shall have the following in the bedroom: An operable lamp or other source of lighting that can be turned on at bedside.

2a. DESCRIPTION OF VIOLATION  
 There were inoperable lamps found in room #2 and room #5.

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 bulbs were replaced in the lamps in Room #2 and Room #5 on day of inspection and immediately found to be operable.  
 Staff will test lamps and check bulbs for appropriate operation on at least weekly basis to ensure ongoing compliance and availability of operable lamps for residents  
 Administrator will monitor and assure ongoing compliance.*

Repeat Violation: No	Date(s) of Previous Violation(s):		
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Signature of Legal Entity Representative  
 (Required on EVERY Page) *Staci Calabro*

Printed Name and Title of Legal Entity Representative (Required on EVERY Page) <i>STACI CALABRO ASES</i>	Date <i>11/24/17</i>
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**DEPARTMENT USE ONLY - HOMES MAY NOT WRITE BELOW THIS LINE!**

The above plan of correction is approved as of 12/6/17  
 (Date)

Plan of correction implementation status as of 12/6/17  
 (Date)

The above plan of correction was approved by *Staci*  
 (Initials)

- Fully Implemented
- Partially Implemented - Adequate Progress
- Partially Implemented - Inadequate Progress
- Not Implemented