

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

May 19, 2023

[REDACTED]
The Villages of Midtown Oaks, LLC
[REDACTED]
[REDACTED]

RE: The Villages of Midtown Oaks
1020 Green Avenue
Altoona, PA, 16601
LICENSE/COC#: 33864

Dear [REDACTED],

As a result of the Pennsylvania Department of Human Services, Bureau of Human Service Licensing review on 05/04/2023 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: <i>The Villages of Midtown Oaks</i>	License #: 33864	License Expiration:
Address: 1020 Green Avenue, Altoona, PA 16601		
County: BLAIR	Region: CENTRAL	

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

Legal Entity		
Name: <i>The Villages of Midtown Oaks, LLC</i>		
Address: [REDACTED]		
Phone: [REDACTED]	Email: [REDACTED]	

Certificate(s) of Occupancy		
Type: C 1	Date: 04/03/1996	Issued By: DOH

Staffing Hours		
Resident Support Staff:	Total Daily Staff: 48	Waking Staff: 36

Inspection Information		
Type: <i>Partial</i>	Notice: <i>Announced</i>	BHA Docket #:
Reason: <i>Complaint, Change Legal Entity</i>		Exit Conference Date: 05/04/2023

Inspection Dates and Department Representative	
05/04/2023	On Site [REDACTED]

Resident Demographic Data as of Inspection Dates			
General Information			
License Capacity:		Residents Served: 35	
Special Care Unit			
In Home: Yes	Area: 4th fl	Capacity: 16	Residents Served: 11
Hospice			
Current Residents: 0			
Number of Residents Who:			
Receive Supplemental Security Income: 0		Are 60 Years of Age or Older: 35	
Diagnosed with Mental Illness: 19		Diagnosed with Intellectual Disability: 0	
Have Mobility Need: 13		Have Physical Disability: 2	

Inspections / Reviews		
05/04/2023 - Partial		
Lead Inspector: [REDACTED]	Follow-Up Type: POC Submission	Follow-Up Date: 05/26/2023
05/18/2023 - POC Submission		
Submitted By: [REDACTED]	Date Submitted: 05/19/2023	
Reviewer: [REDACTED]	Follow-Up Type: POC Submission	Follow-Up Date: 05/22/2023

Inspections / Reviews *(continued)*

05/19/2023 - POC Submission

Submitted By: [REDACTED]

Date Submitted: 05/19/2023

Reviewer: [REDACTED]

Follow-Up Type: Document Submission Follow-Up Date: 05/26/2023

05/19/2023 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 05/19/2023

Reviewer: [REDACTED]

Follow-Up Type: Not Required

16c Incident reporting

1. Requirements

2800.

16.c. The residence shall report the incident or condition to the Department's assisted living residence office or the assisted living residence complaint hotline within 24 hours in a manner designated by the Department. Abuse reporting shall also follow the guidelines in § 2800.15 (relating to abuse reporting covered by law).

Description of Violation

On [REDACTED]/2022, Resident #1 had a fall which required hospitalization. The home did not report this incident to the Department.

Plan of Correction

Accept ([REDACTED] - 05/19/2023)

Historically, the Administrator has been the only staff member responsible for reporting incidents to the Department, in which hospitalization of a resident is required for treatment. To minimize risk of such incidents not being reported, the Clinical Coordinator/Designee, will also be responsible for such reporting, either in the absence of the Administrator, or as a form of redundancy to ensure compliance. This change was implemented on May 17, 2023 and is ongoing.

Because every reportable incident must be submitted to the Department within 24 hours, both the Administrator and Designee will run a Hospitalization Tracking Report in PointClickCare every day to ensure that all resident hospitalizations are known and reported in a timely fashion. The Hospitalization Tracking Report lists any residents who have left the residence to be treated in a hospital. After reviewing this report, if either the Administrator or Designee sees that a resident has been treated in a hospital, he/she will contact the other to determine who will complete and submit the report to the Department. That incident report will then be completed and submitted to the Department within the required time frame. This change was implemented May 17, 2023 and is ongoing.

The Administrator and Designee will review all resident hospitalizations each week (and all potentially reportable incidents), either directly before or directly after the weekly Touch Call with the staff of Senior Life – Altoona, which occurs every Tuesday at 1:30pm and will be ongoing. The next Touch call will be Tuesday May 23, 2023. During this review following the Touch Call, if any resident hospitalizations from the previous week (or any reportable incidents) have not been reported, the Administrator will immediately contact the Department by telephone to notify them of the omission, and will also immediately complete and submit a report regarding that incident.

In order to further reduce the risk of this violation recurring, all staff will be trained on all reportable incidents detailed in §2800.16 no later than June 15, 2023 by Administrator and Clinical Coordinator. The Administrator will submit verification of this training to the Department within seven days of completion.

After the initial training, all staff will be retrained every three months during our quarterly staff meetings.

Fundamental to this training will be the component that all staff know and understand which incidents must be reported, and the requirement to report to the Department within 24 hours, so it will be reinforced that the Administrator be contacted immediately when such incidents arise.

All reportable incidents are currently being reviewed in the quarterly Quality Management Plan meetings. During that meeting, the Administrator and Designee will review the system detailed above, and determine if any changes need to be instituted to ensure continued compliance. The next Quality Management Plan meeting will take place Wednesday June 14, 2023 and the tentative agenda is attached. This will be addressed in all subsequent Quality Management Plan meetings.

Licensee's Proposed Overall Completion Date: 05/19/2023

Implemented ([REDACTED] - 05/19/2023)