

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

March 31, 2026

[REDACTED] CEO
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 02/18/2026, 02/19/2026 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]
[REDACTED]

cc: Pennsylvania Bureau of Human Service Licensing

Facility Information

Name: *THE VILLAGES OF MIDTOWN OAKS* License #: 33864 License Expiration: 07/01/2026
 Address: 1020 GREEN AVENUE, ALTOONA, PA 16601
 County: BLAIR Region: CENTRAL

Administrator

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

Legal Entity

Name: *THE VILLAGES OF MIDTOWN OAKS, LLC*
 Address: [REDACTED]
 Phone: [REDACTED] Email: [REDACTED]

Certificate(s) of Occupancy

Type: C-1 Date: 04/02/1996 Issued By: *Department of Health*

Staffing Hours

Resident Support Staff: 0 Total Daily Staff: 46 Waking Staff: 35

Inspection Information

Type: *Full* Notice: *Unannounced* BHA Docket #:
 Reason: *Renewal, Incident* Exit Conference Date: 02/19/2026

Inspection Dates and Department Representative

02/18/2026 - On-Site: [REDACTED]
 02/19/2026 - On-Site: [REDACTED]

Resident Demographic Data as of Inspection Dates

General Information
 License Capacity: 40 Residents Served: 32

Special Care Unit
 In Residence: Yes Area: *Special Care Unit* Capacity: 12 Residents Served: 11

Hospice
 Current Residents: 1

Number of Residents Who:
 Receive Supplemental Security Income: 0 Are 60 Years of Age or Older: 32
 Diagnosed with Mental Illness: 0 Diagnosed with Intellectual Disability: 0
 Have Mobility Need: 14 Have Physical Disability: 0

Inspections / Reviews

02/18/2026 - Full
 Lead Inspector: [REDACTED] Follow-Up Type: *POC Submission* Follow-Up Date: 03/13/2026

03/12/2026 - POC Submission
 Submitted By: [REDACTED] Date Submitted: 03/19/2026
 Reviewer: [REDACTED] Follow-Up Type: *Document Submission* Follow-Up Date: 03/20/2026

Inspections / Reviews *(continued)*

03/31/2026 - Document Submission

Submitted By: [REDACTED]

Date Submitted: 03/19/2026

Reviewer: [REDACTED]

Follow-Up Type: *Not Required*

42b Abuse/Neglect

1. Requirements

2800.

42.b. A resident may not be neglected, intimidated, physically or verbally abused, mistreated, subjected to corporal punishment or disciplined in any way.

Description of Violation

On July 30, 2025, Resident #1 reported to Staff Members A and B that money had been missing from ██████ bank account. Following this discovery, Resident #1 went to the bank to obtain a statement of recent activity which showed several charges that ██████ did not make. Resident #1 also attempted to use their card on July 30, 2025, and the purchase was declined due to insufficient funds.

Staff Members A and B reviewed the bank statement and noticed several transactions which Resident #1 did not make. Two transactions were processed through Cash App and the name associated with making those transactions was another staff member who worked in the home, Staff Member C. Staff Member C's name was associated with a \$300.00 transaction on July 25, 2025, and a \$100.00 transaction on July 27, 2025. There were also two other transactions that Resident #1 did not make, one purchase at Walmart.com and one for Door Dash.

This incident was reported to the local police and an active investigation is on-going.

On November 25, 2025, Resident #2 reported to Staff Member B that ██████ had an unpleasant conversation with Staff Member D on November 22, 2025. ██████ reported that Staff Member D yelled at ██████ saying "you are being ██████ actually ██████. Please be happy and have a nice day." Resident #2 stated during an interview that ██████ was heartbroken over the interaction with Staff Member D.

Plan of Correction

Accept (█████ - 03/12/2026)

Resident #1 reported missing money from ██████ bank account which occurred from ██████ bank card number being used by someone other than ██████. Event was investigated, reported to local police, and staff member C was terminated from employment. Event continues to be an active investigation by local police. Resident #2 reported that ██████ had an unpleasant conversation with staff member D in which ██████ was called inappropriate names. This interaction upset Resident #2. Staff member D was suspended, and after investigation was conducted was terminated from employment.

After the events of July 2025 and November 2025, resident interviews were conducted by the Executive Director and the Resident Care Coordinator to ensure that no other residents experienced any misappropriation or breach in resident rights.

Staff education on Abuse/Neglect and Resident Rights were conducted and completed in 7-30-2025 and 11-25-2025. Education is provided to residents on Resident -Rights and Abuse/Neglect as part of the monthly resident council meetings.

The Executive Director has developed a resident interview questionnaire which will be used to conduct conversation with interview able residents to ensure they are not experiencing abuse and are being treated with respect and dignity. This audit will be completed by the Executive Director/designee starting in March 2026 and will be conducted through August 2026. This audit will be completed on 5 residents per month and will be added quarterly

42b Abuse/Neglect (continued)

to the facility's Quality Management auditing.

The Executive Director/designee will conduct and additional Abuse/Neglect and Resident Rights education with staff at their monthly staff meeting on March 18, 2026.

Licensee's Proposed Overall Completion Date: 03/18/2026

Implemented (█ - 03/31/2026)