OFFICE OF THE INSPECTOR GENERAL		INVESTIGATIVE REPORT
Case No.	**Report Date**	**Investigator Name**
1118-0216	March 01, 2018	XXXXX
Facility/Agency Name		
Progressive Housing, Inc.		
Facility/Agency Address		**Incident Location**
20180 Governors Drive, Suite 300 Olympia Fields, IL 60461		CILA XXXXX

Allegation

On November 19, 2017, the Office of the Inspector General received a reported allegation of neglect from Progressive Housing, Inc. It is alleged that XXXXX was unaware that individual XXXXX eloped from the CILA. XXXXX was found wandering and was taken to St. James Olympia Fields hospital, where he was found to have no injuries. During the investigation, it was discovered that Progressive Housing, Inc. failed to adequately staff the shift, as XXXXX worked alone and was unable to provide proper supervision to individual XXXXX, who required 1:1 supervision at all times or XXXXX, who required close monitoring.

Synopsis

Progressive Housing, Inc. failed to ensure that adequate staff worked 3rd shift, on November 18-19, 2017, as XXXXX required 1:1 supervision and XXXXX required close monitoring. XXXXX was scheduled and worked the shift alone. She (admittedly) failed to conduct the required thirty (30) minute bed checks, for extended periods of time, which resulted in XXXXX eloping. At approximately 12:35 a.m., he was spotted 1.7 miles away from the CILA, walking from the Forest Preserve, wearing only a t-shirt and pajamas; with no shoes or socks on, in 37-degree weather. Park Forest Police Department (PFPD) was contacted and because it was unknown, how long he had been outside this way, Park Forest Paramedics were requested and he was transported to St. James Chicago Heights Hospital, for evaluation. XXXXX did not discover he was missing until XXXXX arrived for her shift, at approximately 5:00 a.m. (4 ½ hours after he was located.) XXXXX was contacted and instructed XXXXX to pick him up; however, she failed to contact OIG to report the alleged neglect. XXXXX received a full medical work-up and was found to have no issues/injuries. He was discharged to XXXXX and taken back to the CILA.

Findings

Based on the facts in this case the following was concluded: The allegation of neglect is substantiated against XXXXX and Progressive Housing, Inc.

Recommendations

The Office of The Inspector General recommends the following: The agency addresses XXXXX failure to report the allegation of neglect in a timely manner, which is a violation of 20 ILCS 1305/1-17(k). Willful failure to comply with OIG's reporting requirements is a Class A misdemeanor. The agency addresses that XXXXX falsified the Bed Check Monitoring logs.