

WRITTEN RESPONSE TO THE OFFICE OF INSPECTOR GENERAL

Name of Service Provider: Avancer Homes, LLC

Director: [Redacted]

OIG Case No.: 1018-0441

I. For this case, was there a finding of substantiated allegations? Yes No
Were there Other Observations by OIG, requiring a Written Response? Yes No

II. NOTICE TO INDIVIDUAL AND LEGAL GUARDIAN (for substantiated cases). The individual and guardian (if a guardian exists) have been notified that the reported Allegation was substantiated. Yes No Date: _____

III. SERVICE PROVIDER'S RESPONSE TO OIG FINDINGS/RECOMMENDATIONS

DIRECTIONS FOR EACH COLUMN (Please use additional pages of this form if necessary to complete the report.)

SERVICE PROVIDER'S RESPONSE: Summarize your action for each finding/recommendation.

PERSON RESPONSIBLE: Identify the person(s) responsible for each action, by name and/or job function.

DATES: Provide the date(s) when each action will be (1) initiated and (2) completed.

OIG FINDING/RECOMMENDATIONS	SERVICE PROVIDER RESPONSE	PERSON(S) RESPONSIBLE	DATE FOR IMPLEMENTATION/COMPLETION
Based on the facts in this case the following was concluded: The allegation of neglect, against [Redacted] as defined by the Illinois Administrative Code, Title 59, Chapter I, Part 50, Section 50.10 is substantiated.	Employee terminated for actions associated with this investigation.	[Redacted]	5/1/18

IV. APPROVAL BY AUTHORIZED REPRESENTATIVE. I have reviewed the above Written Response. I hereby approve it as the plan for correcting the Findings/Recommendations identified in the OIG investigation for this Case Number.

SIGNATURE: Authorized Representative [Redacted]	DATE: 5/25/18	DHS Review: [Redacted]	Date: 5/30/18
--	------------------	---------------------------	------------------

RECEIVED
DHS
MAY 30 2018
DIVISION OF
DEVELOPMENTAL DISABILITIES