

mailed
1/3/18
(M)

WRITTEN RESPONSE TO THE OFFICE OF INSPECTOR GENERAL

Name of Service Provider: CTF Illinois

Director: [REDACTED]

OIG Case No.: 1118-0089

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 FINDINGS/RECOMMENDATIONS	SERVICE PROVIDER RESPONSE	PERSON(S) RESPONSIBLE	DATES FOR IMPLEMENTATION/COMPLETION	
Based on the facts in this case, the following was concluded: The allegation mental abuse, against [REDACTED] as defined by Title 59, Illinois Administrative Code, Chapter I, Part 50, Section 50.10, is substantiated.	[REDACTED] was terminated 9/5/17. See attached term form. (Resignation)	[REDACTED]	9/5/17	9/5/17
The Office of The Inspector General recommends the following: The agency address [REDACTED] and [REDACTED] failure to report the allegation of abuse 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.	[REDACTED] no longer works for CTF. See attached term form (Resignation)	[REDACTED]	7/31/17	7/31/17
	[REDACTED] was retained on timely reporting. See attached training.	[REDACTED]	12/27/17	12/27/17

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: 1/2/2018	[REDACTED]	Date: 1/29/18
--	-------------------	------------	------------------