

WRITTEN RESPONSE TO THE OFFICE OF THE INSPECTOR GENERAL

Name of Service Provider: Community Alternatives Illinois Director: [REDACTED] OIG Case No. 1218-0218

I. For this case, was there a finding of substantiated allegations?  Yes  No  
Were there Other Observations, 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: June 26, 2018

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.)

- X SERVICE PROVIDER=S RESPONSE. Summarize your action for each finding/recommendation.
- X PERSON RESPONSIBLE. Identify the person(s) responsible for each action, by name and/or job function.
- X DATES. Provide the date(s) when each action will be (1) initiated and (2) completed.

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DIVISION OF  
DEVELOPMENTAL DISABILITIES

FINDINGS/RECOMMENDATIONS	SERVICE PROVIDER RESPONSE	PERSON(S) RESPONSIBLE	DATES FOR IMPLEMENTATION/COMPLETION	
The allegation of neglect is substantiated against [REDACTED]	[REDACTED] was terminated 10/31/17. Termination due to this finding incident.	[REDACTED]	10/31/17	10/31/17

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: [REDACTED] Authorized Representative	DATE: 7/31/18	[REDACTED]	DATE: 8/2/18
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