

WRITTEN RESPONSE TO THE OFFICE OF THE INSPECTOR GENERAL

NAME OF SERVICE PROVIDER: Southeastern Residential Alternatives, Inc. **DIRECTOR:** [REDACTED] **OIG CASE NO.** 1318-0118

I. For this case, was there a finding of substantiated allegations? Yes No (SUBSTANTIATED NON-EGREGIOUS NEGLECT)
 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: 5-25-18

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.

FINDINGS/RECOMMENDATIONS	SERVICE PROVIDER RESPONSE	PERSON(S) RESPONSIBLE	IMPLEMENTATION/COMPLETION	
Based on the facts in this case, the following was concluded: The allegation of neglect is substantiated against [REDACTED]	Abuse + Neglect Training was Completed with [REDACTED] on 9-18-17.	[REDACTED]	9-18-17	9-18-17
	[REDACTED] quit her job on 12-21-17.		12-21-17	12-21-17

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] d Representative	DATE: <u>6-14-18</u>	[REDACTED]	DATE: <u>6/18/18</u>
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