

WRITTEN RESPONSE TO THE OFFICE OF THE INSPECTOR GENERAL

Name of Service Provider: Fox D.C. Director: [REDACTED] OIG Case No. 8818-0016

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: May 10, 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.

FINDINGS/RECOMMENDATIONS	SERVICE PROVIDER RESPONSE	PERSON(S) RESPONSIBLE	DATES FOR IMPLEMENTATION/COMPLETION	
The allegation of neglect is substantiated against [REDACTED]	A pre-disciplinary meeting was held 4/13/18 and later reconvened 5/29/18. Subsequent to the meetings, a 30-day suspension was recommended to [REDACTED]	[REDACTED]	6-25-18	7-25-18
	Following the conclusion of the OIG investigation, [REDACTED] will be retrained as a MHT prior to resuming his direct care position. He will participate in the new MHT-TR class.	[REDACTED]	4-16-18	6-1-18

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.

[REDACTED] Authorized Representative	DATE: <u>6/18/18</u>	DHS Reviewer: [REDACTED]	DATE: <u>6/20/18</u>
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