

Disabled Persons Protection Commission
M.G.L. c. 19C / 118 CMR /115 CMR Investigation Report

RECEIVED
MAR 10 2014
BY: *[Signature]*

Alleged Victim: [REDACTED]

DPPC Case Number: 119592, 119604, 119610, 119639

DDS Case Number: 03-MCRW-13-0428

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Allegation Investigated: 119592-The ALV's family says the ALAB has been roughing up the ALV for years. At one point another client was restrained with a phone cord. The ALV was unresponsive on the floor, 911 was called. 2 fractured [REDACTED] and bruises found on the ALV of various stages of healing. The ALV is expected to be a quadriplegic.

[REDACTED]
The attending Dr. feels the injury to [REDACTED] was from a fall.

119604-On 8/27/13-at 6:50am-an ambulance was called to the group home. The ALV was on floor of bedroom and appeared dehydrated and unresponsive. [REDACTED] and the ALV has a black eye, bloody nose, gash on knee, bruises on inner calves and finger bruises. The ALV may be paralyzed.

119610-The ALV was found on 8/27/13 around 6-6:30am laying on the floor near bed. 911 was called as the ALV was lethargic and couldn't get up. Upon arrival to hospital, the ALV was going to be discharged but still couldn't get up so he was admitted. [REDACTED]. The ALV had immediate surgery. The only behavior the ALV has is he hits his ears.

119639- ALV is currently in hospital. [REDACTED]. According to ALAB sometime between Sunday night and Monday morning during overnight they heard rumbling from ALV's room, never checked on him and in the morning ALV was found on the floor, on his back, not moving. ALV was sent to ER. [REDACTED]. ALV also was seen to have bruises on his body and other older injuries, that did not appear to be self inflicted. ALV also had a black eye and foot prints on the back of his shins. It is believed that staff at group home used extreme force on ALV resulting in the injuries. [REDACTED] is concerned over other clients in the home. It was indicated that in past a client was observed tied up in a chair.

What "act" as defined by M.G.L. Chapter 19C &/or 118 CMR did the Alleged Abuser commit? There is sufficient evidence that the ALAB committed an act as defined by M.G.L. 19C. The evidence supports that after finding the ALV unresponsive on his bedroom floor, ALAB ignored his training in First Aid and lifted the ALV up off the floor and put him back in bed.

[REDACTED]

What "omission" as defined by M.G.L. Chapter 19C &/or 118 CMR did the Alleged Abuser commit? There is sufficient evidence ALAB committed an omission as defined by M.G.L. c 19C.

ALAB admitted he slept during the 11:00pm-9:00am shift on 8/26/13. The ALAB also admitted he failed to check on the ALV after he heard a "rustling" noise from his bedroom.

After finding the ALV unresponsive on the floor of his bedroom, ALAB waited approximately 25 minutes before calling 911 for emergency assistance.

Was the act and/or omission "Abuse Per Se?" No

If yes, type of abuse:

118 CMR Definition: Abuse Per Se - the acts or omissions of a caretaker that include or result in the following regardless of whether a serious physical injury or serious emotional injury is manifested: a pattern of touching neither required nor appropriate for tending to the safety and welfare of a person with a disability; or any of the sexual activity included within the definitions of sexual abuse or sexual exploitation; or the withholding of adaptive aids used by the person with a disability provided that said withholding is unrelated to that person's safety, care or treatment; or the intentional, wanton or reckless application of physical force in a manner that inflicts pain or serious emotional injury as determined by an evaluation of the totality of the circumstance. In instances of a person with a disability who is unable to express or demonstrate a reaction to physical pain or serious emotional injury, it is presumed that abuse exists; provided that, given the same set of factual circumstances the assigned investigator determines by a preponderance of the evidence that a reasonable man would have expressed or demonstrated a reaction to the physical pain or serious emotional injury inflicted. For purposes of 118 CMR 2.02: Abuse Per Se the term reasonable man shall mean " A person who in a similar circumstance would exercise the qualities and attention, knowledge, intelligence and judgment which society requires of its members for the protection of himself and the interest of others.

What "serious physical injury" as defined by M.G.L. Chapter 19C &/or 118 CMR did the Alleged Victim sustain? Fracture of any bone

If more than one type of injury: Other

If "other" or more than two types of injury explain: The ALV sustained fractures [REDACTED] as well as [REDACTED]. ALV also sustained bruising to his face, legs and arms. ALV sustained a laceration to his left leg and [REDACTED]

What "serious emotional injury" as defined by M.G.L. Chapter 19C &/or 118 CMR did the Alleged Victim sustain? None

If more than one type of emotional reaction:

If "other" or more than two types of emotional reaction explain:

M.G.L. c. 19C / 118 CMR Conclusion:

Based on information gathered by the Investigator during the investigation of DPPC case #s 119592, 119604, 119610, and 119639, there is sufficient evidence to conclude that ALV was seriously injured as the result of an act and/or omission by his caretaker ALAB or "Abuse Per Se" exists, and therefore, abuse as defined by M.G.L. c. 19C and/or 118 CMR is substantiated.

► **Provide facts to support the conclusion:** I-23 stated he was dispatched to the ALV's group home on 8/27/13 for a medical aid call. The ALV was reportedly found unresponsive on his bedroom floor. The ALV presented with visible injuries but that cause of the ALV's injuries was not known by the ALAB, the only staff on-duty when the discovery was made.

-I-24 responded to the ALV's residence to initiate the criminal investigation. He testified that he toured the home and interviewed the ALAB. The ALAB re-iterated to him that he found the ALV on the floor of his bedroom around 6:30am on 8/27/13. ALAB informed him that he noticed the ALV had injuries to his legs and arm prior to finding him on the floor. According to I-24, ALAB stated that he attempted to get the ALV to stand up but ALV was unable. I-24 recalled ALAB stated that the ALV's legs didn't seem to be working, so he lifted him off the floor, put him over his shoulder and then placed him back in his bed. I-24 also recalled ALAB revealed that instead of calling 911 immediately, ALAB tried to have ALV drink juice. ALAB reported he monitored ALV's condition and tried unsuccessfully to contact two supervisors. According to I-24, ALAB acknowledged that he waited approximately 25 minutes to call 911.

- I-24 noticed that the ALAB had a fresh scratch on the right side of his face. The scratch started at the bottom of ALAB's right ear lobe and extended down the side of his face approximately 1 1/2 inches long that had started to scab. When questioned how he scratched himself, the ALAB stated, "I have a scratch on my face, I have no idea; I didn't even know it was there." I-24 testified that he found ALAB's response suspicious.

-I-1 completed the police investigation into how the ALV sustained the injuries [REDACTED]. I-1 testified that during the course of the investigation it was discovered that the ALV does not communicate verbally nor do [REDACTED] (R-3, R-4, and R-5). Based on testimony obtained and documents reviewed I-1 also determined that R-3, R-4, and R-5 do not have aggressive or assaultive behaviors that could have caused the ALV's injuries. ALAB worked the [REDACTED] on 8/26/13 and was last caretaker responsible for ALV, prior to discovering him on his bedroom floor at 6:30am on 8/27/13. The required staffing ratio at the group home during the overnight shift was 1:4.

- I-1 revealed he was unable to identify how the ALV sustained his injuries. [REDACTED]. I-1 indicated that during his investigation he found no evidence to conclude that one of the ALV's roommates had been tied to chair in the group home.

- [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

- I-6 and I-7 both worked second shift with the ALV on 8/26/13. Both testified that the ALV was awake and walking around the house as he usually did. I-6 and I-7 revealed the ALV suffers from [REDACTED] and is up most nights wandering around the home. I-7 gave ALV a bath and testified that the ALV did not have any physical injuries to the back of his legs, a black eye or bloody nose. I-6 and I-7 confirmed that when their shifts ended and they left the residence at 10:30pm and 11:00pm

respectively, the ALV had no injury other than the usual abrasions to his knees from dropping. The ALV does have a history of dropping to his knees on the carpeted floor and dragging his knees and legs across the floor. At times, this causes abrasions and rug burns.

- I-6 stated that ALV was still awake and ambulatory at 10:30pm. I-7 stated he assisted the ALV to his bedroom just before ALAB arrived at 11:00pm. I-7 testified that when the ALAB arrived he asked about the ALV and checked on all of the residents. At that time, ALV was laying in his bed, with the lights on, chewing on his blanket, moving his hands, and mumbling, which were described by I-7 as typical behaviors when he was attempting to relax.

- Documents reviewed noted that the ALV has no history of falling or an unsteady gait. He also has no history of falling out of bed. In addition, the ALV has no history of causing injury to his face. The ALV may slap his ears when he becomes upset, or bite his finger but he has never slapped or punched his face/eye.

- I-9 indicated the ALAB had also worked the [REDACTED] on 8/25/13 and transported ALV to his day program on the morning of 8/26/13. However, ALAB reported to her that ALV was sent back home by the day program due to hyperactive behavior.

-I-10, I-11, and I-12 testified that the ALV arrived at his day program on 8/26/13, and was only there for approximately five minutes. Each described ALV as ambulatory and hyper. I-10 and I-11 noticed that the ALV had abrasions to his legs. According to I-10 and I-11, when they informed ALAB that ALV needed to be examined by I-12, ALAB refused and left the building with the ALV before I-12 could examine ALV. I-10, I-11, and I-12 all testified that they did not notice an any injury to ALV's face when he arrived at the program. Contrary to the information ALAB provided to I-9, I-10 and I-11 did not refuse to accept ALV for the day because of his hyper behavior. Instead ALAB just left the program with the ALV.

-I-3, I-14, I-15, I-25, and I-26 all testified that they believe the ALV sustained [REDACTED] [REDACTED], bruise to his eye, bloody nose and bruises to his legs and arms as the result of physical abuse. I-3, I-14, I-15, I-25 and I-26 stated that they did not witness the ALV being abused, nor have they ever witnessed an incident of abuse. By each of their accounts, ALV has had unexplained injuries over the years. However, by each of their accounts, ALV has never fallen out of bed nor has he ever sustained a black eye from punching himself in the face. Each acknowledged they have no evidence to support the ALV's injuries were the result of abuse, each believed that the ALAB became violent with the ALV and attempted to push and force him into bed during an [REDACTED] episode.

- I-3 stated she was extremely upset with the vendor agency because she did not receive a telephone call regarding the ALV's injuries and his having been taken to the hospital by ambulance until approximately 8:30am on 8/27/13. This was approximately two hours after ALV was reportedly found on the floor. She testified that because of this, she was unable to get to the ALV until approximately 9:40am. As [REDACTED], I-3 believed she should have been notified immediately so the ALV did not have a delay in care. I-3 confirmed that the ALV can not communicate. I-3 stated that when she arrived at the hospital, ALV was by himself with no agency staff person to explain the ALV's disability and normal baseline to hospital staff.

-I-17 testified that 911 was called at 6:55am on 8/27/13. She arrived at the ALV's residence at

7:02am. I-17 testified that she was greeted by ALAB, who was the only staff present. I-17 recalled ALAB informed her that he found the ALV on the floor next to his bed. ALV was reportedly laying on his side. ALAB also informed I-17 that the ALV was non-responsive to moving, only twitching his arms. According to I-17, ALAB stated he picked the ALV up and put him back in bed which is where she first observed ALV.

- I-17 stated that upon her initial exam ALV was [REDACTED]. In addition, she noted multiple bruises to his extremities and dried blood in his right nostril. I-17 testified that the ALAB informed her that he believed the ALV was dehydrated because his diaper was dry when he found him. I-17 testified that she applied a full spinal immobilization because of the concern of falling and the ALV inability to move limbs. She then applied blankets to the ALV to warm his body temperature. ALV's upper extremities were shivering. I-17 transported the ALV to Lahey Hospital and transferred care to the emergency room department. [REDACTED]

- C-1, C-2, and C-3 elected to have R-1 present during their interviews. C-1, C-2, and C-3 testified that there was insufficient medical evidence to identify how the ALV sustained the fracture [REDACTED]. C-1, C-2, and C-3 testified that there was no medical means to determine if the injuries were sustained during a fall or if the injuries were sustained as a result of an act/assault. However, C-2 testified that the ALV had various bruises on his body, including his eye, nose, ankle and leg that were in different stages of healing which was concerning and indicative they were not all sustained at the same time.

- C-3 testified that ALV sustained a [REDACTED] as the result of the fracture [REDACTED]. C-3 testified that the ALV underwent surgery on 8/28/2013 [REDACTED]

-C-1 testified that the ALV had a prior condition of [REDACTED]. C-1 expressed his medical opinion that the ALV's [REDACTED] fracture was not the direct result of the [REDACTED]. He revealed that due to the type and location of ALV's [REDACTED] injuries, the paralysis experienced by the ALV would have been immediate to sustaining the [REDACTED] fracture. Thus, it was not possible for the ALV to move after the fracture was sustained. Based on the information provided, C-1 stated ALV sustained the injuries [REDACTED] between 11:00pm 8/26/13 and the time he was reportedly discovered on his bedroom floor.

- C-1 stated the act of moving the ALV without first immobilizing the spine, not seeking immediate medical attention, and leaving him on the floor for a period of time more likely than not exacerbated the ALV's [REDACTED] injuries.

- ALAB confirmed that he worked the [REDACTED] on 8/26/13. He confirmed that he was

the only staff person on-duty and his shift was an awake overnight slot. He corroborated I-7's testimony with respect to asking about ALV and checking in on him at 11:00pm. According to ALAB, the light was on in ALV's room and he noticed no injury to his face. He also stated the ALV was chewing on his blanket and moving his arms and hands. ALAB initially indicated his shift was uneventful until he discovered the ALV laying on the floor next to his bed at approximately 6:30am. When asked if he fell asleep during his shift, ALAB denied sleeping.

- ALAB provided statements relative to ALV's behaviors, and the incident on 8/26/13 at the ALV's day program that were determined to be false. Specifically, ALAB was asked why the ALV was sent home from day program on the morning of 8/26/13. ALAB stated ALV was sent home because of the abrasions on his legs. When confronted with I-9's testimony that ALV was reportedly sent home because of hyper behavior, ALAB acknowledged his statement was false. When questioned how the ALV might sustain a black eye, the ALAB responded that the ALV hits his face. When presented with the evidence to the contrary, ALAB acknowledged that his statement was false. He acknowledged the ALV only hits his ears, not his face.

- ALAB admitted he lied and stated he did fall asleep during his 8/26/13 overnight shift. ALAB reported that he did not check on the ALV after 11:00pm until 6:30am. ALAB recalled that he fell asleep on the couch around 12:00am. According to ALAB, he awoke around 2:30am and attended to one of the residents and checked on the others but not the ALV. ALAB gave no explanation why he didn't check on the ALV. ALAB admitted he then went back to sleep and awoke again when he heard a noise from the ALV's room. ALAB guessed it was approximately 4:00am when he heard the noise. When questioned what the noise was he stated he couldn't remember but he thought it was movement of some kind. He described the noise as "a rustling." The ALAB never got up and checked on the ALV and went back to sleep until 6:30am.

- ALAB stated at 6:30am he found the ALV laying on his bedroom floor, on his side. He stated that the ALV's hand was twitching and he repeatedly asked the ALV to get up, but the ALV did not respond. ALAB stated he lifted the ALV off the floor and placed him back in his bed. The ALAB believed the ALV fell out of bed at some point, and this could have been when he heard the noise from his room. ALAB acknowledged that he had been trained on First Aid and admitted that he knew he shouldn't have moved the ALV. He further admitted that the ALV could have been on the floor and injured for hours, while he was asleep on the couch.

- When questioned if ALAB ever physically assaulted the ALV or if there was any sort of a physical altercation involving ALV due to his [REDACTED] ALAB denied both scenarios. The truthfulness of ALAB's denial is called into question by the false statements he provided during this investigation.

-Based on the above facts, there is sufficient evidence to conclude the ALAB committed both an act and omission that exacerbated a serious physical injury sustained by ALV. ALAB admitted that he fell asleep during his shift for several hours. ALAB also admitted he never checked on the ALV between the hours of 12:00am and 6:30am despite being awakened by a noise in ALV's bedroom. ALAB admitted that after finding the ALV unresponsive and unable to move he waited approximately 25 minutes before calling 911 to obtain emergency medical services for the ALV. Upon finding ALV laying on his bedroom floor and unable to move or get up, despite his First Aid training; ALAB lifted the ALV off the floor and placed him back in his bed. C-1 testified the paralysis experienced by the ALV would have been immediate to sustaining the fracture [REDACTED]. C-1 provided testimony that moving the ALV without first immobilizing the spine,

not seeking immediate medical attention, and leaving him on the floor for a period of time more likely than not exacerbated the ALV's [REDACTED] injuries. Therefore, the allegation of abuse is substantiated.

► **If the allegation is unsubstantiated, based on the facts gathered, does it appear that the abuse report constitutes a malicious "False Report?"** No

118 CMR Definition: False Report - a report of abuse which at the time it is made is known by the reporter not to be true and is maliciously made for: the purpose of harassing, embarrassing or harming another person; the personal financial gain of the reporter; acquiring custody of the person with a disability; or the personal benefit of the reporter in any other private dispute involving a person with a disability. The term False Report does not include a report of abuse of a person with a disability that is made in good faith to the Commission and subsequently is unsubstantiated or screened out for lack of jurisdiction under M.G.L. c. 19C.

► **Protective Service Actions Taken and/or Recommended (required when abuse is substantiated):** The ALV was taken by ambulance to the ER at Lahey Clinic Hospital in Burlington, Ma. He was subsequently admitted and surgery was performed [REDACTED].

The ALV's guardian/family states they will not be sending ALV back to the care of the Edinburg Center. The ALV's needs have changed since 8/27/13. It is recommended that ALV's clinical team re-evaluate the ALV's current needs and ensure his level of supports are adequate to meet his current needs.

It is recommended the vendor agency consider re-training all staff on emergency protocols and policies, particularly with respect to protocols for calling 911 and lifting individuals after witnessed or suspected falls, or when an individual is unable to get up independently.

Although ALAB was reportedly terminated by the vendor agency for sleeping while on-duty, it is recommended the appropriate discipline ensure the stated disciplinary action has in fact been taken, and that the ALAB not be considered for re-hire at any point in the future.

This incident occurred during the overnight hours whereby the ALAB was able to sleep during his shift for a couple of hours at a time without the vendor agency's or anyone's knowledge. It is recommended the vendor agency consider implementing a system of checks to ensure awake overnight staff in their programs are in fact awake.

- It is recommended the vendor agency consider implementing documented bed checks at routine intervals during the overnight shifts in order to document the status of residents during these hours and to ensure any health or safety issues are detected more immediately.

- The ALV, who has minimal communication skills, was transported to the emergency room via ambulance and had no staff or family member with him at the hospital for more than 2 hours. It is recommended the appropriate designee review this service delivery issue to determine what actions, if any, could be taken to improve this service.

► **Additional Findings of Risk:** N/A

► **Additional Recommendations and/or Actions Already Completed (required when additional risk is identified):** N/A

EOHHS Agency Regulatory Conclusion Section

Has a regulatory investigation been completed? Yes

Regulatory Conclusions: Based on the evidence gathered by the Investigator during the investigation of DDS Case #03-MCRW-13-0428, there is sufficient evidence to conclude that ALV was mistreated as the result of an act and/or omission by his caretaker, ALAB. Therefore, mistreatment as defined by 115 CMR 5.05 is substantiated. This conclusion is supported by the following facts:

- On 8/27/13, ALV was diagnosed with serious physical injuries that required emergency medical and surgical care. During the time frame ALV sustained his injuries, ALAB was the sole caretaker on-duty.
- ALAB admitted to falling asleep while on-duty during the time frame the ALV sustained his injuries.
- ALAB admitted to hearing a noise come from ALV's bedroom but he never investigated the sound and never checked on the ALV. ALAB estimated the sound was heard at 4:00am. ALAB admitted falling back to sleep until 6:30am.
- ALAB reportedly discovered the ALV on his bedroom floor at 6:30am. ALAB acknowledged waiting approximately 25 minutes to call 911.
- Upon discovery of ALV on the bedroom floor and his being unable to move or get up, ALAB disregarded his training in First Aid and lifted him off the floor and placed him back in his bed. The medical evidence and testimony of C-1 supports ALV had a [REDACTED] injury when the ALAB lifted the ALV. C-1 stated the act of moving the ALV without first immobilizing the spine, not seeking immediate medical attention, and leaving him on the floor for a period of time more likely than not exacerbated the ALV's [REDACTED] injuries. Thus, it is evident ALAB's act and omissions exposed the ALV to a serious risk of physical harm.

Provide facts to support the conclusion:

Alleged Victim (Alv) Name: [REDACTED]

Address: [REDACTED]

Date of Birth: 1 [REDACTED]

Social Security Number: XXX-XX-[REDACTED]

Is the Alleged Victim a "Disabled Person" as defined by M.G.L. Chapter 19C &/or 118 CMR? Yes

If no, please list the facts that support this determination:

Pertinent information regarding the Alleged Victim: [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]
[REDACTED]
[REDACTED]

► Was the Alleged Victim interviewed? No Date:
If no, explain why not. ALV was observed on 9/5/13, however the ALV does not communicate verbally and could not provide any details regarding the events of 8/27/13.

Guardian Information:
[REDACTED]
[REDACTED]
[REDACTED]

Guardian Information:
[REDACTED]
[REDACTED]
[REDACTED]

Other Individual (OI) Name:

Address:

Date of Birth:

Social Security Number:

Is the OI a person with a disability as defined by M.G.L. c. 19C?

Disability:

Pertinent information regarding the OI:

Guardian Information:

Name:

Address:

Telephone Number:

Alleged Abuser (Alab) Name: [REDACTED]

Home Address: [REDACTED]

Telephone Number:

Date of Birth: [REDACTED]

Social Security Number:

Relationship to Alleged Victim: [REDACTED]

Employer: Edinburg Center, 1040 Waltham Street, Lexington, MA, 02173, 781-862-3600

Does the Alleged Abuser meet the definition of a "caretaker" as defined by M.G.L. Chapter 19C &/or 118 CMR? Yes

If no, please list the facts that support this determination:

Pertinent information regarding the Alleged Abuser: [REDACTED]

[REDACTED]

[REDACTED]

► Was the Alleged Abuser interviewed? Yes

Date: 09/05/2013

If no, explain why not.

► Was the Reporter interviewed? Yes

If no, explain why not.

► Was an agency representative interviewed? Yes

Date: 09/05/2013

If no, explain why not.

Redaction Code Key

ALV - Alleged Victim (required)

ALAB - Alleged Abuser

OI - Other Individual

I - Denotes person interviewed during this investigation

C - Denotes person contacted for collateral or expert/professional opinion.

R - Denotes person referred to in the report that was not questioned.

* - Denotes telephone interview

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Individuals Interviewed or Contacted by Investigator:

Name and Position	Agency	Redaction Code	Redacted Number	Date	Telephone Interview?
[REDACTED]		ALV	1	09/05/2013	No
[REDACTED] d	Edinburg Center	ALAB	1	09/05/2013	No
[REDACTED]					
Detective Jim Hunt	Bedford PD	I	1	01/07/2014	No
Detective Jim Hunt	Bedford PD	I	1	09/05/2013	No
[REDACTED]	Lahey Clinic	I	2	09/05/2013	No
[REDACTED]					
[REDACTED]		I	3	09/05/2013	No
[REDACTED]	Edinburg Center	I	4	09/05/2013	No
[REDACTED]					
Lisa McGovern ADA	Middlesex DA's Office	I	5	01/07/2014	No
Lisa McGovern ADA	Middlesex DA's Office	I	5	11/12/2013	No
[REDACTED]	Edinburg Center	I	6	09/05/2013	No
[REDACTED]					
[REDACTED]	Edinburg Center	I	6	12/05/2013	No
[REDACTED]					
[REDACTED]	Edinburg Center	I	7	09/05/2013	No
[REDACTED]					
[REDACTED]	Edinburg Center	I	7	12/05/2013	No
[REDACTED]					
[REDACTED]	Edinburg Center	I	8	09/05/2013	No
[REDACTED]					
[REDACTED]	Edinburg Center	I	9	09/04/2013	Yes
[REDACTED]					
[REDACTED]	Edinburg Center	I	9	12/05/2013	No
[REDACTED]					
[REDACTED]	NuPath	I	10	09/17/2013	No
[REDACTED]	NuPath	I	11	09/17/2013	No
[REDACTED]	NuPath	I	12	09/17/2013	No
[REDACTED]	NuPath	I	13	09/17/2013	No
[REDACTED]					
[REDACTED]		I	14	09/19/2013	Yes
[REDACTED]		I	15	09/05/2013	No
[REDACTED]					
[REDACTED]	Lahey Clinic	I	16	11/18/2013	No
[REDACTED]	Armstrong Ambulance	I	17	11/12/2013	No

[REDACTED]	Edinburg Center	I	18	12/05/2013	No
[REDACTED]	Edinburg Center	I	19	12/05/2013	No
[REDACTED]					
[REDACTED]	Edinburg Center	I	20	12/05/2013	No
[REDACTED]					
[REDACTED]	Edinburg Center	I	21	12/05/2013	No
[REDACTED]					
Lori Riccio VWA	Middlesex District Attorney's Office	I	22	01/07/2014	No
Officer Robert Abajian	Bedford PD	I	23	09/11/2013	No
Detective Sargeant Michael L'Heureux	Bedford PD	I	24	09/11/2013	No
[REDACTED]		I	25	09/11/2013	Yes
[REDACTED]		I	26	09/11/2013	Yes
[REDACTED]					
[REDACTED]	Lahey Clinic Hospital	C	1	11/18/2013	No
[REDACTED]					
[REDACTED]	Lahey Clinic Hospital	C	2	11/18/2013	No
[REDACTED]					
[REDACTED]	Lahey Clinic Hospital	C	3	11/21/2013	No
[REDACTED]					
[REDACTED]	Lahey Clinic Legal Department	R	1	11/18/2013	No
[REDACTED]					
[REDACTED]	Edinburg Legal Counsel	R	2	12/05/2013	No
[REDACTED]					
[REDACTED]		R	3		No
[REDACTED]		R	4		No
[REDACTED]		R	5		No
[REDACTED]					

► **Pertinent Information regarding the Site of Abuse:** The site of abuse is the ALV's group home in Bedford, MA. The dwelling is a ranch style home. The ALV was found in his private bedroom. ALV's bed was approximately 18 inches off the floor. There was no other furniture in the area where the ALV was reportedly found. The living room and kitchen in the home are within a close proximity of the bedrooms. Reportedly, this is beneficial for staff as they can hear the residents when they need assistance. There were no apparent safety issues observed during the site visit.

► **Photographs /Physical /Other Evidence:** - Photographs depicting the ALV's visible injuries were taken by I-14 and emailed to I-1. In addition, I-1 was able to take photographs of the ALV's injuries to his face. All photographs are in the possession of I-1 and the Bedford Police Department.

► Documents Reviewed:	Date(s):
<input type="checkbox"/> Accident Report	
<input type="checkbox"/> Activity Report	
<input type="checkbox"/> Admission Report	
<input checked="" type="checkbox"/> Ambulance Log/ Trip Sheet	08/27/2013
<input type="checkbox"/> Audio Recording	
<input type="checkbox"/> Communication Book	
<input type="checkbox"/> Death Report	
<input type="checkbox"/> Discharge Summary	
<input type="checkbox"/> Doctor's Orders/ Note	
<input type="checkbox"/> Facility Security Log	
<input checked="" type="checkbox"/> Hospital Record	08/27/2013
<input type="checkbox"/> Human Rights Complaint	
<input type="checkbox"/> Human Rights Report	
<input checked="" type="checkbox"/> Incident Report	08/27/2013
<input checked="" type="checkbox"/> Individual Day Program Agency Record	09/17/2013
<input type="checkbox"/> Individual Education Plan	
<input checked="" type="checkbox"/> Individual Residential Agency Record	09/05/2013
<input type="checkbox"/> Individual Service Agency Record	
<input type="checkbox"/> Individual Service Plan	
<input type="checkbox"/> Individual Treatment Plan	
<input checked="" type="checkbox"/> Injury Report	08/27/2013
<input type="checkbox"/> Level of Supervision Form	
<input type="checkbox"/> Medical Examiner's Report	
<input checked="" type="checkbox"/> Medical Record	08/27/2013
<input type="checkbox"/> Medication Error Report/ Form	
<input type="checkbox"/> On-Call Record/ Schedule	
<input type="checkbox"/> Personnel File	
<input type="checkbox"/> Policies and Procedures	
<input type="checkbox"/> Previous Abuse Investigation Report	
<input type="checkbox"/> Previous Hotline Report	
<input type="checkbox"/> Progress Notes	
<input checked="" type="checkbox"/> Police Report	08/27/2013
<input type="checkbox"/> Psychiatric Evaluation/ Report	
<input type="checkbox"/> Psychological Evaluation/ Report	
<input type="checkbox"/> Psychosocial Evaluation/ Report	
<input type="checkbox"/> Quality Assurance Report/ Evaluation	
<input type="checkbox"/> Restraint/ Seclusion Form	
<input type="checkbox"/> Staff Assignment Schedule	
<input type="checkbox"/> Staff Communication Log	
<input type="checkbox"/> Video Recording	

Additional Documents Reviewed: Related Emails

The assigned investigator and their supervisor certify that to the best of their knowledge the information contained in this M.G.L. c. 19C investigation report for DPPC case number 119592, 119604, 119610, 119639 is accurate.

CHAPPELL-MOOSKIAN, HEATHER 02/13/2014
Investigator Name (print or type) Date Report Submitted to Supervisor

DOWNING, JOHN 02/20/2014
Supervisor Name (print or type) Date Report Approved by Supervisor

This report was submitted by CHAPPELL-MOOSKIAN, HEATHER on 02/13/2014.

This report was approved by DOWNING, JOHN on 02/20/2014.

This report was finalized by DOWNING, JOHN on 02/20/2014.