



Statement of Deficiencies

Developmental Disabilities Agency

Royal Journeys -- Pocatello
DDA-5320

1177 Call Place
Pocatello, ID 83201-
(208) 529-3342

Survey Type: Initial

Entrance Date: 4/7/2015

Exit Date: 4/8/2015

Initial Comments: Surveyors Present: Pam Loveland-Schmidt, Medical Program Specialist, Licensing & Certification; and Kerrie Ann Hull, Medical Program Specialist, Licensing & Certification.

Rule Reference/Text	Findings	Plan of Correction	Date to be Corrected
<No Deficiencies> No deficiencies were cited over the course of the survey.	No deficiencies were cited during the course of the survey. The provider is not required to submit a Plan of Correction to the Department.		

Administrator/Provider Signature:

Date:

Department POC Approval Signature:

Date:

If deficiencies are cited, an approved plan of correction is requisite to continued program participation.