



IDAHO DEPARTMENT OF  
HEALTH & WELFARE

C.L. "BUTCH" OTTER – GOVERNOR  
RICHARD M. ARMSTRONG – DIRECTOR

DIVISION OF LICENSING & CERTIFICATION  
P.O. Box 83720  
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September 17, 2012

Heather Walker, Administrator  
Developmental Concepts, Inc.  
8150 West Emerald Street  
Boise, ID 83704

Dear Ms. Walker:

Please find enclosed the Statement of Deficiencies reports for your Residential Habilitation Agency (RHA) and Developmental Disabilities Agency (DDA). The reports are based on the compliance review of your agency that was conducted from September 11, 2012, through September 13, 2012, for the purpose of renewing your RHA and DDA certificates.

Congratulations! The survey team did not find any deficient practices during the review.

The Department has renewed your RHA and DDA certificates (also enclosed). These certificates are effective October 27, 2012, through October 31, 2015, unless otherwise suspended or revoked.

Thank you for accommodating the survey team during the review process. Please call me with any questions or comments at (208) 364-1828.

Sincerely,

FREDÉ TRENKLE-MACALLISTER  
Medical Program Specialist  
DDA/ResHab Certification Program  
[trenklef@dhw.idaho.gov](mailto:trenklef@dhw.idaho.gov)

FTM/slm

Enclosures

1. RHA and DDA Certificates
2. Compliance Report Participant Key
3. Statements of Deficiencies



# Statement of Deficiencies

*Developmental Disabilities Agency*

Developmental Concepts, Inc.  
4DEVCON127

8150 W Emerald St  
Boise, ID 83704-  
(208) 323-6601

**Survey Type:** Recertification

**Entrance Date:** 9/11/2012

**Exit Date:** 9/13/2012

**Initial Comments:**

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.