



IDAHO DEPARTMENT OF
HEALTH & WELFARE

C.L. "BUTCH" OTTER – GOVERNOR
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DIVISION OF LICENSING & CERTIFICATION
P.O. Box 83720
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May 19, 2014

Brian Fay, Administrator
Community Connections, Inc.
1675 South Maple Grove Road
Boise, ID 83709

Dear Mr. Fay:

Thank you for accommodating us during the recertification survey concluded on March 26, 2014. Congratulations! The Department found your agency to be deficiency free.

As a result, we have issued Community Connections, Inc. full certificates for the Boise and Nampa locations effective from May 1, 2014, through April 30, 2017, unless otherwise suspended or revoked. Per IDAPA 16.04.17.101.02, this certificate is issued on the basis of substantial compliance. We challenge you to keep the same high standard shown during this survey day by day.

If you have any questions, you can reach me at (208) 364-1906.

Sincerely,

ERIC D. BROWN
Supervisor
DDA/ResHab Certification Program

EDB/slm

Enclosures

1. Statement of Deficiencies
2. Renewed Residential Habilitation Agency Certificate



Statement of Deficiencies

Residential Habilitation Agency

Community Connections, Inc. RHA-233	1675 S Maple Grove Rd Boise, ID 83709- (208) 377-9814
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Survey Type: Recertification

Entrance Date: 3/25/2014

Exit Date: 3/26/2014

Initial Comments: Survey Team: Kerrie Ann Hull, Medical Program Specialist, DDA/ResHab Certification Program; and Eric Brown, Manager, DDA/ResHab Certification Program.

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.