



IDAHO DEPARTMENT OF
HEALTH & WELFARE

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

TAMARA PRISOCK – ADMINISTRATOR
DIVISION OF LICENSING & CERTIFICATION
JAMIE SIMPSON – PROGRAM SUPERVISOR
RESIDENTIAL ASSISTED LIVING FACILITY PROGRAM
P.O. Box 83720
Boise, Idaho 83720-0009
PHONE: 208-364-1962
FAX: 208-364-1888

December 6, 2013

Rhonda Repp, Administrator
Virginia Rose Resident Inn
2525 North Maple Grove Road
Boise, ID 83704

Dear Ms. Repp:

On December 6, 2013, a follow-up visit to the complaint investigation survey of 9/18/2013, was conducted at Virginia Rose Resident Inn. The core issue deficiencies issued as a result of the 9/18/2013, survey have been corrected.

The conditions of your provisional license have been met. Your full license has been restored and a new certificate enclosed.

Should you have questions, please contact me at (208) 364-1962.

Sincerely,

JAMIE SIMPSON, MBA, QMRP
Program Supervisor
Residential Assisted Living Facility Program

JS/mmc

c: L&C Medicaid Notification