



STATE OF CONNECTICUT
OFFICE OF HEALTH CARE ACCESS

M. JODI RELL
GOVERNOR

CRISTINE A. VOGEL
COMMISSIONER

April 5, 2006

Chuck Berke
Executive Director
Fairfield Counseling Services, Inc.
125 Penfield Road
Fairfield, CT 06824

Re: Certificate of Need Determination, Report Number 06-30678-DTR
Fairfield Counseling Services, Inc.
Name change and relocate Psychiatric Outpatient Clinic and Substance Abuse Outpatient
Treatment Program in Fairfield

Dear Mr. Berke:

On January 26, 2006, the Office of Health Care Access ("OHCA") received your request for the name change from Fairfield Community Services, Inc. to Fairfield Counseling Services, Inc. and relocation of the Psychiatric Outpatient Clinic and Substance Abuse Outpatient Treatment Program from 370 Beach Road, Fairfield, Connecticut, to 125 Penfield Road, Fairfield, Connecticut.

Please be advised that OHCA has reviewed your request and makes the following findings:

1. Fairfield Community Services, Inc. ("FCS") is licensed to maintain and operate a Psychiatric Outpatient Clinic for Adults and Substance Abuse Outpatient Treatment facility at 370 Beach Road, Fairfield.
2. FCS is proposing to change its name from Fairfield Community Services, Inc. to Fairfield Counseling Services, Inc. to be more descriptive of what they do.
3. FCS is proposing to relocate its Psychiatric Outpatient Clinic for Adults and Substance Abuse Outpatient Treatment Program from 370 Beach Road, Fairfield, Connecticut, to 125 Penfield Road, Fairfield, Connecticut.
4. The primary service area and target population will not change as a result of the relocation of the program.

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5. No additional programs are proposed and no programs will be terminated.
6. The total capital expenditure associated with this relocation is \$0.

Based on these findings, OHCA has determined that Certificate of Need approval is not required for you to proceed with the name change and relocation of your program. Termination of these services would require CON approval, pursuant to Section 19a-638, C.G.S.

Thank you for keeping OHCA informed of your plans regarding this proposal. If you have any questions regarding this letter, please contact Paolo Fiducia, Associate Health Care Analyst, Health System Development, at (860) 418-7035.

Sincerely,

Signed by Cristine A. Vogel
Commissioner

c: Rose McLellan, DPH,

CAV:pf