

(Y1) Provider / Supplier / CLIA / Identification Number AL11964849	(Y2) Multiple Construction A. Building B. Wing	(Y3) Date of Revisit 9/26/2012
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SAVANNAH COURT OF LAKE WALES

12 EAST GROVE AVENUE
LAKE WALES, FL 33853

(Y4)	Item	(Y5)	Date	(Y4)	Item	(Y5)	Date	(Y4)	Item	(Y5)	Date
ID Prefix	A0025	Correction Completed	09/26/2012	ID Prefix		Correction Completed		ID Prefix		Correction Completed	
Reg. #	58A-5.0182(1) FAC			Reg. #				Reg. #			
LSC				LSC				LSC			
ID Prefix		Correction Completed		ID Prefix		Correction Completed		ID Prefix		Correction Completed	
Reg. #				Reg. #				Reg. #			
LSC				LSC				LSC			
ID Prefix		Correction Completed		ID Prefix		Correction Completed		ID Prefix		Correction Completed	
Reg. #				Reg. #				Reg. #			
LSC				LSC				LSC			
ID Prefix		Correction Completed		ID Prefix		Correction Completed		ID Prefix		Correction Completed	
Reg. #				Reg. #				Reg. #			
LSC				LSC				LSC			
ID Prefix		Correction Completed		ID Prefix		Correction Completed		ID Prefix		Correction Completed	
Reg. #				Reg. #				Reg. #			
LSC				LSC				LSC			
ID Prefix		Correction Completed		ID Prefix		Correction Completed		ID Prefix		Correction Completed	
Reg. #				Reg. #				Reg. #			
LSC				LSC				LSC			

Date:

Check for any Uncorrected Deficiencies. Was a Summary of Uncorrected Deficiencies (CMS-2567) Sent to the Facility?

YES NO



RICK SCOTT
GOVERNOR

Better Health Care for all Floridians

ELIZABETH DUDEK
SECRETARY

October 1, 2012

Administrator
Savannah Court of Lake Wales
12 East Grove Avenue
Lake Wales, FL 33853

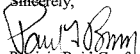
Dear Administrator:

This letter reports the findings of a second state licensure survey revisit conducted on September 26, 2012, by a representative of this office.

Attached is the provider's copy of the Revisit Report, which indicates the previously cited deficiency was found corrected on the day of the revisit.

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at <http://ahca.myflorida.com/Publications/Forms.shtml> as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under **Health Facilities and Providers** on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyor. Should you have any questions please call **Paul Brown**, HFES, at (727) 552-2000.

Sincerely,

for Patricia Reid Cauffman
Field Office Manager

PRC/kpr

Enclosure: Revisit Report

