

AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 08/19/2013
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11911310	(X3) DATE SURVEY COMPLETED 08/12/2013
NAME OF PROVIDER OR SUPPLIER Pine Acres Golden Age Centre	STREET ADDRESS, CITY, STATE, ZIP CODE 5030 Cub Lake Drive Apopka, FL 32703	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Corrected Tags:

0081-Training - Staff In-Service-08/12/2013
0082-Training - Hiv/aids-08/12/2013
0083-Training - First Aid And Cpr-08/12/2013
0086-Training - Adrd-08/12/2013
0090-Training - Do Not Resuscitate Orders-08/12/2013
0162-Records - Resident-08/12/2013
E207-Ecc - Services-08/12/2013
E208-Ecc - Records-08/12/2013
E210-Ecc - Training-08/12/2013

Specific Tag Findings:

0000-Initial Comments

8/12/13 conducted Assisted Living Facility follow up to the 3/25/13 Extended Congregate Care ECC monitoring visit. Pine Acres Golden Age Centre had no deficiencies found at the time of the visit.



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

August 19, 2013

Administrator
Pine Acres Golden Age Centre
5030 Cub Lake Drive
Apopka, FL 32703

RE: Revisit to ECC monitoring

Dear Administrator:

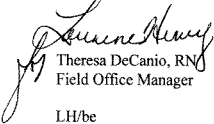
This letter reports the findings of a state licensure survey revisit conducted on August 12, 2013 by representative(s) of this office.

Attached is the provider's copy of the State Form (5000-3547), which indicates the previously cited deficiencies were found corrected on the day of the revisit. **You will not receive a copy of this report in the mail; you will only receive this faxed report.**

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(s). Should you have any questions please call Lorraine Henry at (407) 420-2502.

Sincerely,



Theresa DeCanio, RN
Field Office Manager

LH/be
Enclosure

