



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

October 11, 2013

Administrator
Emeritus at Ocala East
1601 S.E. 24th Road
Ocala, FL 32671

Re: CCR: 2013007257

Dear Administrator:

This letter reports findings of a state licensure survey that was conducted on August 7-8, 2013 by a representative of this office. Enclosed is the provider's copy of the State (5000-3547) Form, which indicates there were no discernible deficiencies noted on the date of the survey.

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 at (386) 462-6201.

Sincerely,

Kriste J. Mennella
Field Office Manager

Enclosure



AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 10/14/2013
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11911441	(X3) DATE SURVEY COMPLETED 08/08/2013
NAME OF PROVIDER OR SUPPLIER Emeritus At Ocala East	STREET ADDRESS, CITY, STATE, ZIP CODE 1601 S.E. 24th Road Ocala, FL 32671	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

0000-Initial Comments

An unannounced Biennial Licensure Survey was conducted from 8/7/13-8/8/13 at Emeritus of Ocala Assisted Living Facility, located at 1601 SE 24th Road, Ocala, Florida 32671. The facility was found to be in compliance with Chapter 429 Part I, & Chapter 408 Part II, Florida Statutes and Chapter 58A-5, Florida Administration Code.

Note, following a Supervisory QA review the Biannual and CCR are to be surveyed a second time.