



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

February 20, 2014

Administrator
Heidi's Haven Bonaire
1205 Bonaire Drive
Leesburg, FL 34748

Dear Administrator:

This letter reports the findings of a state licensure survey that was conducted on February 6, 2014 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 this office at (386) 462-6201.

Sincerely,

Kriste J. Mennella
Field Office Manager

KJM/amw

Enclosure



AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 02/20/2014
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11967163	(X3) DATE SURVEY COMPLETED 02/06/2014
NAME OF PROVIDER OR SUPPLIER Heidis Haven Bonaire	STREET ADDRESS, CITY, STATE, ZIP CODE 1205 Bonaire Drive Leesburg, FL 34748	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

0000-Initial Comments

An unannounced abbreviated biennial licensure survey was conducted at Heidi's Haven Bonaire in Leesburg, Florida on February 06, 2014. Licensure deficiencies were not identified as a result of this survey only. The facility was in compliance at this time.