

AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 06/09/2014
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11968653	(X3) DATE SURVEY COMPLETED 05/22/2014
NAME OF PROVIDER OR SUPPLIER Southern Living Of Titusville	STREET ADDRESS, CITY, STATE, ZIP CODE 2375 Jay Jay Rd Titusville, FL 32796	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Specific Tag Findings:

0000-Initial Comments

Initial survey with Extended Congregate Care and Limited Nursing Services was conducted on 5/22/14. Southern Living of Titusville had no deficiencies found at the time of the visit.



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

June 9, 2014

Administrator
Southern Living Of Titusville
2375 Jay Jay Rd
Titusville, FL 32796

Dear Administrator:

This letter reports the findings of an **initial Licensure survey with Extended Congregate Care (ECC) and Limited Nursing Services (LNS)** conducted on May 22, 2014 by representative(s) of this office. Attached 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. **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

