STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11963788	**05/29/2014**
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Balmy Beach Retirement Home	**1030 Balmy Beach Drive Apopka, FL 32703**	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Corrected Tags:
0026-Resident Care - Social & Leisure Activities-05/29/2014
0030-Resident Care - Rights & Facility Procedures-05/29/2014
0053-Medication - Administration-05/29/2014
0078-Staffing Standards - Staff-05/29/2014
0093-Food Service - Dietary Standards-05/29/2014
0152-Physical Plant - Safe Living Environ/other-05/29/2014
0167-Resident Contracts-05/29/2014

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Specific Tag Findings:

0000-Initial Comments
On May 29, 2014 a revisit to the Change of Ownership (CHOW) with Extended Congregate Care (ECC) survey was conducted. Balmy Beach Retirement Home had no deficiencies found at the time of the visit.

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

June 9, 2014

Administrator
Balmy Beach Retirement Home
1030 Balmy Beach Drive
Apopka, FL 32703

Dear Administrator:

This letter reports the findings of a state licensure survey revisit conducted on May 29, 2014 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,

Lorraine Henry

Theresa DeCanio, RN
Field Office Manager

LH/be
Enclosure