RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

June 13, 2014

Administrator
ALF of Pomona Park, Inc.
422 Pleasant Street
Pomona Park, Florida 32181

RE: CCR #2014004381

Dear Administrator:

This letter reports the findings of a complaint survey completed on June 4, 2014 by a representative of this office. Enclosed is the provider's copy of the Statement of Deficiencies, State (5000-3547) Form, indicating no deficiencies were identified during this survey. **You will not receive a copy of this report in the mail; you will only receive this faxed copy.**

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 contact this office at (386) 462-6201.

Sincerely,

Kristie J. Mennella
Field Office Manager

KJM/amw

Enclosure

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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968597	**06/04/2014**
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Alf Of Pomona Park, Inc	**422 Pleasant St Pomona Park, FL 32181**	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

0000-Initial Comments

On 06/04/2014, an unannounced complaint survey, CCR #2014004381, was conducted at ALF of Pomona Park Assisted Living Facility in Pomona Park, Florida. No discernible deficiencies were identified as a result of this survey. The facility was in compliance at this time.