RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

June 13, 2014

Administrator
Camelot Chateau
1831 S.E. Lake Weir Avenue
Ocala, FL 34471

Dear Administrator:

This letter reports the findings of a state licensure survey revisit conducted on June 10, 2014 by a representative of this office. Enclosed is the provider's copy of the Revisit Report, 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. Should you have any questions please call this office at (386) 462-6201.

Sincerely,

for
Kristie J. Mennella
Field Office Manager

KJM/amw

Enclosure

Alachua Field Office
14101 N W Hwy 441, Suite 800
Alachua, FL 32615-5669
Phone:(386) 462-6201; Fax:(386) 418-5300
AHCA.MyFlorida.com

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11953185	**06/10/2014**
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Camelot Chateau	**1831 S.E. Lake Weir Avenue Ocala, FL 34471**	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Corrected Tags:

0052-Medication - Assistance With Self-Admin-06/10/2014

0000-Initial Comments

An unannounced survey revisit to a biennial Licensure survey was conducted on June 10, 2014 at Camelot Chateau, an assisted living facility in Ocala, Florida. Deficient practice was not identified at the time of the survey. Previously cited deficiency was cleared.