STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967440	**06/30/2014**
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Banana River Villas	**1275 N Banana River Drive, Unit 5 Merritt Island, FL 32952**	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Corrected Tags:
0053-Medication - Administration-06/30/2014
0076-Do Not Resuscitate Orders (dnros)-06/30/2014
0078-Staffing Standards - Staff-06/30/2014
0081-Training - Staff In-Service-06/30/2014
0093-Food Service - Dietary Standards-06/30/2014

Specific Tag Findings:

0000-Initial Comments

06/30/14 revisit conducted to Change of Ownership with Limited Nursing Services. There were no deficiencies at the time of the visit.

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

July 14, 2014

Administrator
Banana River Villas
1275 N Banana River Drive, Unit 5
Merritt Island, FL 32952

RE: revisit to CHOW w/LNS

Dear Administrator:

This letter reports the findings of a state licensure survey revisit conducted on June 30, 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,

Theresa DeCanio, RN
Field Office Manager

LH/be
Enclosure

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