



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

July 16, 2014

Administrator
Good Samaritan Retirement Home
507 S.E. 1st Avenue
Williston, FL 32696

Re: CCR #2013013064

Dear Administrator:

This letter reports the findings of a complaint survey revisit conducted on July 8, 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,

Kriste J. Mennella
Field Office Manager

KJM/amw

Enclosure

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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11910275	(X3) DATE SURVEY COMPLETED 07/08/2014
NAME OF PROVIDER OR SUPPLIER Good Samaritan Retirement Hm	STREET ADDRESS, CITY, STATE, ZIP CODE 507 S.E. 1st Avenue Williston, FL 32696	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Corrected Tags:

0165-Risk Mgmt & Qa; Adverse Incident Report-07/08/2014

0000-Initial Comments

An unannounced survey revisit to a complaint (CCR #2013013064) was conducted on July 8, 2014. Previously cited deficiency was found corrected at the time of the visit.