



RICK SCOTT
GOVERNOR
ELIZABETH DUDEK
SECRETARY

July 21, 2014

Administrator
Almost Home ALF, Inc.
14303 Spring Hill Drive
Brooksville, FL 34609

Dear Administrator:

This letter reports the findings of an initial Licensure survey conducted on July 14, 2014 by a representative of this office. Enclosed is the provider's copy of the State (5000-3547) Form, which indicates there were no discernible deficiencies noted on the date of the survey. **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,

Krista J. Mennella
Field Office Manager

KJM/amw

Enclosure



STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11968665	(X3) DATE SURVEY COMPLETED 07/14/2014
NAME OF PROVIDER OR SUPPLIER Almost Home Alf Inc	STREET ADDRESS, CITY, STATE, ZIP CODE 14303 Spring Hill Dr Brooksville, FL 34609	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

0000-Initial Comments

On 07/14/2014, an announced initial licensure survey was conducted at Almost Home Assisted Living Facility in Spring Hill, Florida. Deficient practice was not identified at the time of the survey. The facility was in compliance at this time.