STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11963814	**10/15/2014**
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Bv Assisted Living Inc.	**2127 W. New Haven Avenue West Melbourne, FL 32904**	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Corrected Tags:
0078-Staffing Standards - Staff-10/15/2014
0081-Training - Staff In-Service-10/15/2014
0084-Training - Assis Self-Admin Meds & Med Mgmt-10/15/2014
0085-Training - Nutrition & Food Service-10/15/2014
0090-Training - Do Not Resuscitate Orders-10/15/2014
0093-Food Service - Dietary Standards-10/15/2014

Specific Tag Findings:
0000-Initial Comments
A revisit survey was conducted at BV Assisted Living Facility on 10/15/2014. No deficiencies were identified at the time of the visit.

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

October 27, 2014

Administrator
Bv Assisted Living Inc.
2127 W. New Haven Avenue
West Melbourne, FL 32904

RE: 2nd revisit to biennial relicensure

Dear Administrator:

This letter reports the findings of a state licensure survey revisit conducted on October 15, 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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