

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11966815	(X3) DATE SURVEY COMPLETED 10/28/2014
NAME OF PROVIDER OR SUPPLIER Circle Of Care (the)	STREET ADDRESS, CITY, STATE, ZIP CODE 4161 Sw Tumble St Fort Pierce, FL 34953	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

0000-Initial Comments

An unannounced follow-up to the licensure survey was conducted on 10/28/2014. The Circle of Care had no deficiencies identified at the time of this visit.

Revisit Corrected Tags:

0053-Medication - Administration-10/28/2014
 0055-Medication - Storage And Disposal-10/28/2014
 0081-Training - Staff In-Service-10/28/2014
 0083-Training - First Aid And Cpr-10/28/2014
 0084-Training - Assis Self-Admin Meds & Med Mgmt-10/28/2014
 0161-Records - Staff-10/28/2014



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

November 05, 2014

Administrator
Circle Of Care (The)
4161 SW Tumble St
Fort Pierce, FL 34953

Dear Administrator:

This letter reports the findings of a State Relicensure Revisit Survey conducted on October 28, 2014 by a representative from 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.

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 representative. Should you have any questions please call this office at (561) 381-5840.

Sincerely,


Arlene Mayo - Davis
Field Office Manager

AMD/jw
Enclosure

DT9D

