STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968545	**11/18/2014**
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Discovery Village At The Forum Llc	**2619 Forum Blvd Fort Myers, FL 33905**	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Corrected Tags:
0055-Medication - Storage And Disposal-11/18/2014
0057-Medication - Over The Counter (otc) Products-11/18/2014
0078-Staffing Standards - Staff-11/18/2014
0081-Training - Staff In-Service-11/18/2014
0090-Training - Do Not Resuscitate Orders-11/18/2014

An unannounced follow-up to Complaint Survey, CCR# 2014006645 conducted on 11/18/14 at Discovery Village at the Forum LLC an Assisted Living an Assisted Living Facility (ALF) located in Ft. Myers, Florida.

All previous deficiencies have been corrected.

0055-Medication - Storage and Disposal 58A-5.0185(6) FAC

0057-Medication - Over The Counter (OTC) Products 58A-5.0185(8) FAC

0078-Staffing Standards - Staff 58A-5.019(2) FAC

0081-Training - Staff In-Service 58A-5.0191(2) FAC

0090-Training - Do Not Resuscitate Orders 58A-5.0191(11) FAC

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

December 5, 2014

Administrator
Discovery Village At The Forum LLC
2619 Forum Blvd
Fort Myers, FL 33905

Dear Administrator:

This letter reports the findings of a state licensure survey revisit conducted on November 18, 2014 by a representative 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. Should you have any questions please call this office at (239) 335-1315.

Sincerely,

Jon Seehawer, R.N.
Acting Field Office Manager

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Enclosure: State Form

Fort Myers Field Office
2295 Victoria Avenue, Room 340
Fort Myers, FL 33901
Phone:(239) 335-1315; Fax:(239) 338-2372
AHCA.MyFlorida.com

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