STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11912046	**12/02/2014**
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
Livewell At Coral Plaza	**5850 Margate Blvd. Margate, FL 33063**	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Corrected Tags:
0025-Resident Care - Supervision-12/2/2014

Specific Tag Findings:

0000-Initial Comments
An unannounced follow-up to the complaint survey for CCR#2014006164, CCR#2014005964 & CCR#2014005985 was conducted on 11/19/14 through 11/21/14 and 12/2/14. The facility had no deficiencies identified at the time related to this revisit survey.

This survey was conducted in conjunction with the unannounced licensure complaint survey, CCR#2014008477, on the same date. Please refer to separate report for findings.

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

December 19, 2014

Administrator
Livewell At Coral Plaza
5850 Margate Blvd.
Margate, FL 33063

Dear Administrator:

This letter reports the findings of a state licensure survey revisit conducted on November 19-21, 2014 and December 2, 2014 by representatives 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 representatives. Should you have any questions please call this office at (561) 381-5840.

Sincerely,

Arlene Mayo-Davis
Field Office Manager

AMD/dlt
Enclosure

DT9D

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