



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

December 12, 2014

Administrator
Country Comfort Care, Inc
15340 Mallory Lane
Clermont, FL 34715

Dear Administrator:

This letter reports findings of a state licensure survey that was conducted on November 6, 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.

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,

Kriste J. Menhalla
Field Office Manager

KJM/amw
Enclosure

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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11968370	(X3) DATE SURVEY COMPLETED 1/06/2014
NAME OF PROVIDER OR SUPPLIER Country Comfort Care, Inc	STREET ADDRESS, CITY, STATE, ZIP CODE 15340 Mallory Ln, Clermont, FL 34715	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

0000-Initial Comments

An unannounced re-licensure survey was conducted on November 6, 2014 and January 6, 2014.
Country Comfort Care had no licensure deficiencies found at the time of the visit.