

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11911225	(X3) DATE SURVEY COMPLETED 01/21/2015
NAME OF PROVIDER OR SUPPLIER Emeritus At River Oaks	STREET ADDRESS, CITY, STATE, ZIP CODE 925 South River Road Englewood, FL 34223	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

Revisit Corrected Tags:

St - A - 0092 - 58a-5.020(1) Fac - Food Service - General Responsibilities S-S= D

St - A - 0093 - 58a-5.020(2) Fac - Food Service - Dietary Standards S-S= B

St - A - 0152 - 58a-5.023(3) Fac - Physical Plant - Safe Living Environ/other S-S= D

On 1/21/15 a follow-up to a Biennial survey was completed at Emeritus at River Oaks, an Assisted Living Facility in Englewood, Florida.

All previously cited deficiencies were found to be corrected.



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

January 30, 2015

Administrator
Emeritus At River Oaks
925 South River Road
Englewood, FL 34223

Dear Administrator:

This letter reports the findings of a state licensure survey revisit conducted on January 21, 2015 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, RN
Acting Field Office Manager

JS:ec
Enclosure: State Form

