



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

May 13, 2015

Administrator
Bridgewater, The
500 Waterman Avenue
Mount Dora, FL 32757

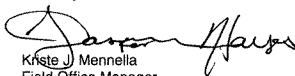
Dear Administrator:

This letter reports findings of a state licensure survey that was conducted on April 28, 2015 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. Mennella
Field Office Manager

KJM/amw
Enclosure



**AGENCY FOR HEALTH CARE
ADMINISTRATION**

**PRINTED: 05/13/2015
FORM APPROVED**

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11912099	(X3) DATE SURVEY COMPLETED 04/28/2015
NAME OF PROVIDER OR SUPPLIER BRIDGEWATER (THE)	STREET ADDRESS, CITY, STATE, ZIP CODE 500 WATERMAN AVENUE MOUNT DORA, FL 32757	

**SUMMARY STATEMENT OF DEFICIENCIES
(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)**

0000 - Initial Comments

On April 28, 2015 an unannounced Extended Congregate Care monitoring visit was conducted at The Bridgewater at Waterman Assisted Living Facility located in MT Dora, Florida. There were no deficiencies cited.