AGENCY FOR HEALTH CARE ADMINISTRATION

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965695	**05/26/2015**
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
HARBOR PLACE AT PORT ST LUCIE,	**3700 SE JENNINGS ROAD FORT PIERCE, FL 34952**	

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

0000 - Initial Comments

Two unannounced licensure complaint surveys, CCR# 2015001707 and CCR# 2015002200, were conducted on 5/26/15 at Harbor Place at Port St Lucie. The facility had no deficiencies found at the time of the visit.

These complaint surveys were conducted in conjunction with the revisit to the licensure survey.

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

June 8, 2015

Administrator
Harbor Place At Port St Lucie
3700 SE Jennings Road
Fort Pierce, FL 34952

RE: CCR #2015001707 & CCR #2015002200

Dear Administrator:

This letter reports the findings of complaint surveys completed on May 26, 2015 by a representative of this office. Attached is the provider's copy of the Statement of Deficiencies, State (5000-3547) Form, indicating no deficiencies were identified during this 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 representative. Should you have any questions, please contact this office at (561) 381-5840.

Sincerely,

Arlene Mayo-Davis
Field Office Manager

AMD
Enclosure

Delray Beach Field Office
5150 Linton Boulevard, Suite 500
Delray Beach, FL 33484
Phone:(561) 381-5840; Fax:(561) 496-5924
AHCA.MyFlorida.com