



RICK SCOTT
GOVERNOR
ELIZABETH DUDEK
SECRETARY

June 4, 2015

Administrator
Sugarmill Manor
8985 South Suncoast Boulevard
Homosassa, FL 34446

Dear Administrator:

This letter reports the findings of a state licensure survey that was conducted on May 19, 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: 06/04/2015
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11911196	(X3) DATE SURVEY COMPLETED 05/19/2015
NAME OF PROVIDER OR SUPPLIER SUGARMILL MANOR	STREET ADDRESS, CITY, STATE, ZIP CODE 8985 S. SUNCOAST BLVD. HOMOSASSA, FL 34446	

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

0000 - Initial Comments

An unannounced Biennial Licensure Survey and Limited Nursing Services monitoring survey was conducted at Sugarmill Manor in Homosassa, Florida on May 18, 2015. Deficient practice was not identified at the time of the survey. The facility was in compliance with 58A-5, FAC and Chapter 429, Part I, FS.