RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

June 11, 2015

Administrator
Superior Residences of Lecanto
4865 West Gulf To Lake Highway
Lecanto, FL 34461

Dear Administrator:

This letter reports the findings of a state licensure survey revisit conducted on June 3, 2015 by a representative of this office.

Enclosed 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 (386) 462-6201.

Sincerely,

Kriste J. Mennella
Field Office Manager

KJM/amw
Enclosure

Alachua Field Office
14101 N W Hwy 441, Suite 800
Alachua, FL 32615-5669
Phone:(386) 462-6201; Fax:(386) 418-5300
AHCA.MyFlorida.com

AGENCY FOR HEALTH CARE ADMINISTRATION

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968372	R **06/03/2015**
NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE	
SUPERIOR RESIDENCES OF LECANTO	**4865 WEST GULF TO LAKE HIGHWAY LECANTO, FL 34461**	

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

0000 - Initial Comments

An unannounced follow up to an Extended Congregate Care Service Monitoring Survey was conducted at Superior Residences of Lecanto in Lecanto, Florida on June 3, 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 for this survey only.