

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

**PRINTED: 07/08/2015
FORM APPROVED**

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11968845	(X3) DATE SURVEY COMPLETED 07/07/2015
NAME OF PROVIDER OR SUPPLIER DISCOVERY VILLAGE AT NAPLES, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 8417 SIERRA MEADOWS BLVD NAPLES, FL 34113	

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

0000 - Initial Comments

An announced Initial licensure survey was completed on 7/7/15 at Discovery Village at Naples, an Assisted Living Facility (ALF) in Naples, Florida.

Discovery Village at Naples is recommended for a Standard Assisted Living Facility license with a capacity of 150, effective 7/7/15.



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

July 8, 2015

Administrator
Discovery Village At Naples, LLC
8417 Sierra Meadows Blvd
Naples, FL 34113

Dear Administrator:

This letter reports findings of a state licensure initial survey that was conducted on July 7, 2015 by a representative of this office. Attached 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 (239) 335-1315.

Sincerely,

Jon Seehawer, R.N.
Field Office Manager

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Enclosure: State Form

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