



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

August 25, 2015

Administrator
Carington Manor
3215 East James Lee Blvd
Crestview, FL 32539

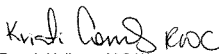
Dear Administrator:

This letter reports findings of a state licensure survey that was conducted on August 20, 2015 by representatives 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 surveyors. Should you have any questions please call me at 850-412-4540.

Sincerely,


For Donah Heiberg, M.S.W.
Field Office Manager

DH/kc
Enclosure

1GGN



**AGENCY FOR HEALTH CARE
ADMINISTRATION**

**PRINTED: 08/25/2015
FORM APPROVED**

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966948	(X3) DATE SURVEY COMPLETED 08/20/2015
NAME OF PROVIDER OR SUPPLIER CARINGTON MANOR	STREET ADDRESS, CITY, STATE, ZIP CODE 3215 EAST JAMES LEE BLVD CRESTVIEW, FL 32539	

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

0000 Initial Comments

An unannounced limited nursing services monitoring visit was conducted on 08/20/15 at Carington Manor assisted living facility. The facility had no deficiencies found at the time of the visit.