STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11953542	12/10/2015
NAME OF PROVIDER OR SUPPLIER **CORNERSTONE AT LONGWOOD (THE)**	STREET ADDRESS, CITY, STATE, ZIP CODE **480 EAST CHURCH AVENUE LONGWOOD, FL 32750**	

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

0000 Initial Comments

An unannounced complaint investigation (CCR 2015009644) was conducted at The Cornerstone of Longwood, Longwood, Florida on . At the time of the investigation, the facility had deficiencies.

Z812 Change of Ownership

Based on interviews and record review the facility underwent a change of ownership (CHOW) and failed to notify the Florida Agency for Health Care Administrator (AHCA) in writing at least 60 days prior to the anticipated date of the change of ownership.
Findings:
In an interview on at 9:00 AM with the Executive Director, the Executive Director stated a new ownership group took over the facility on . The Executive Director stated the new ownership group stated that they had 60 days from that date to file the change of ownership with AHCA.
In an interview on at 12:05 PM with a representative to the ownership group, the representative stated they have an attorney working with AHCA on the change of ownership. The representative provided a business card which contained his e-mail address and the name of the new owners. The representative stated he did not know the name of the attorney.
In an interview on at 2:45 PM with the Executive Director, the Executive Director stated the last pay day under the old owner was . The Executive Director stated the first pay day for the new owners was .
In a record review on from the AHCA Central Office, the record review stated AHCA had not received any application for a change of ownership under the old facility name or the new facility name.
In a record review on of the new owner's web site, the web site indicates the facility under the new name with the old name referenced as "formerly known as".
In a record review on of the federal government web site, the web site shows the settlement agreement from the old owner to the new owner on .
In a record review on of the local property appraiser's web site, the web site revealed the property deed was filed on .
Unclassified

RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2016

Administrator
Cornerstone At Longwood (the)
480 East Church Avenue
Longwood, FL 32750

RE: CCR #2015009644

Dear Administrator:

This letter reports the findings of a state licensure complaint survey that was conducted on , 2015 by representative(s) of this office.

Attached is the provider's copy of the State (5000-3547) Form, which indicates the deficiencies that were identified on the day of the visit. Section 408.811(4), Florida Statutes, requires that you correct these deficiencies within thirty days of the date of this letter unless the Agency has approved another timeframe. **Please attach a summary of your corrective action for each deficiency, including completion dates, on your letterhead. Also include any additional documentation to support correction of identified deficiencies. Submit summary and documents to the Field Office no later than , 2016.** Staff from this office will conduct a review of the provided corrective action and supporting documentation to verify that the necessary corrections are in place to correct the deficiencies identified on your survey, which may include a desk review or onsite revisit.

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(s). Should you have any questions please call Lorraine Henry at -2502.

Sincerely,

Theresa DeCanio, RN
Field Office Manager

LH/be
Enclosure

XG90

Orlando Field Office
400 W. Robinson St., Suite S-309
Orlando, FL 32801
Phone:(407) 420-2502; Fax:(407) 245-0998
AHCA.MyFlorida.com

Facebook.com/ACHAFlorida
Youtube.com/AHCAFlorida
Twitter.com/AHCA_FL
SlideShare.net/AHCAFlorida