



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

January 6, 2016

Administrator
Kiva of Palatka
201 Zeagler Drive
Palatka, FL 32177

RE: CCR #2015011444

Dear Administrator:

This letter reports the findings of a complaint survey completed on December 22, 2015 by a representative of this office.

Enclosed is the provider's copy of the Statement of Deficiencies, State (5000-3547) Form, indicating no deficiencies were identified during this survey. **You will not receive a copy of this report in the mail; you will only receive this faxed copy.**

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 contact this office at (386) 462-6201.

Sincerely,

Kriste J. Mennella
Field Office Manager

KJM/amw
Enclosure

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**AGENCY FOR HEALTH CARE
ADMINISTRATION**

**PRINTED: 01/06/2016
FORM APPROVED**

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11911095	(X3) DATE SURVEY COMPLETED 12/22/2015
NAME OF PROVIDER OR SUPPLIER KIVA OF PALATKA	STREET ADDRESS, CITY, STATE, ZIP CODE 201 ZEAGLER DRIVE PALATKA, FL 32177	

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

0000 Initial Comments

On December 22, 2015 a complaint survey (CCR#2015011444) was conducted at Kiva of Palatka, an assisted living facility at 201 Zeagler Drive, Palatka, Florida. No deficient practice was identified at the time of the survey.