RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

January 20, 2016

Administrator
Sugarmill Manor
8985 South Suncoast Boulevard.
Homosassa, FL 34446

RE: CCR #2015010978

Dear Administrator:

This letter reports the findings of a complaint survey completed on January 12, 2016 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

BJK1

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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911196	01/12/2016
NAME OF PROVIDER OR SUPPLIER **SUGARMILL MANOR**	STREET ADDRESS, CITY, STATE, ZIP CODE **8985 S. SUNCOAST BLVD.** **HOMOSASSA, FL 34446**	

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

0000 Initial Comments

On January 12, 2016, a complaint survey CCR #2015010978 was conducted at Sugarmill Manor, an Assisted Living Facility in Homosassa, Fl. Deficient practice was not identified during the survey.