RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

February 5, 2016

Administrator
Oakridge Assisted Living Facility
297 SW County Road 300
Mayo, FL 32066

Dear Administrator:

This letter reports the findings of a state licensure survey revisit conducted on January 26, 2016 by a representative of this office.

Enclosed is the provider's copy of the State Form (5000-3547), which indicates the previously cited deficiencies were found corrected on the day of the revisit. **You will not receive a copy of this report in the mail; you will only receive this faxed report.**

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 (386) 462-6201.

Sincerely,

Charles Barry for

Kriste J. Mennella
Field Office Manager

KJM/amw
Enclosure

DT9D

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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965486	R **01/26/2016**
NAME OF PROVIDER OR SUPPLIER **OAKRIDGE ASSISTED LIVING FACILITY**	STREET ADDRESS, CITY, STATE, ZIP CODE **297 SW COUNTY ROAD 300** **MAYO, FL 32066**	

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

0000 Initial Comments

On 01/25/2016 an unannounced Extended Congregate Care, (ECC) follow up Monitoring survey was conducted at Oakridge Assisted Living Facility in Mayo FL. Deficiencies that were found in the original survey were found to be corrected.