RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

, 2016

Administrator
Tender Loving Hospitality
125 NE 9th Avenue
Crystal River, FL 34429

Dear Administrator:

This letter reports the findings of a revisit survey conducted on , 2016 by a representative of this office. Enclosed is the provider's copy of the Statement of Deficiencies (State Form 5000-3547), which references the uncorrected deficiencies identified during the revisit.

You will not receive a copy of this report in the mail; you will only receive this faxed report. **All deficiencies shall be corrected no later than , 2016.**

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 Boyd for

Kriste J. Mennella
Field Office Manager

KJM/amw
Enclosure

BBT7

Alachua Field Office
14101 N W Hwy 441, Suite 800
Alachua, FL 32615-5669
Phone:(386) 462-6201; Fax:(386) 418-5300
AHCA.MyFlorida.com

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11953517	R
NAME OF PROVIDER OR SUPPLIER **TENDER LOVING HOSPITALITY**	STREET ADDRESS, CITY, STATE, ZIP CODE **125 NE 9TH AVENUE** **CRYSTAL RIVER, FL 34429**	

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

0000 Initial Comments

A follow up visit to a biennial survey was conducted at Tender Loving Hospitality on . Tender Loving Hospitality had deficiencies at the time of the visit.

L241 LMH - Records

Based on record review and interview, the facility failed to ensure 1 (Resident #7) of 2 sampled residents reviewed, who received Optional State Supplement, had a Agreement or Community Supportive Living Plan in his resident record as required.

Findings:

Record review of Resident #7's resident record failed to reveal a Agreement and Community Supportive Living Plan in Resident #7's resident record.

During interview on at 9:42 AM, the facility Administrator confirmed a Agreement and Community Supportive Living Plan was not present and included in Resident #7's resident record.

Class III

L243 LMH - Training

Based on record review and interview, the facility failed to ensure 2 (Staff B, Staff C) of 2 staff reviewed for compliance completed limited mental continuing education training biennially as required.

Findings:

Record review of training records for Staff B and Staff C failed to reveal documentation that Staff B and Staff C had completed limited mental continuing education training biennially as required.

During interview on at 10:11 AM, the facility Administrator confirmed that Staff B and Staff C had not completed limited mental continuing education training biennially as required.

Class III