



RICK SCOTT
GOVERNOR
ELIZABETH DUDEK
SECRETARY

May 20, 2016

Administrator
Elders of Mount Dora LLC
6767 Round Lake Road
Mount Dora, FL 32757

Dear Administrator:

This letter reports the findings of an initial Licensure survey conducted on May 11, 2016 by a representative of this office. Enclosed is the provider's copy of the State (5000-3547) Form, which indicates there were no discernible deficiencies noted on the date of the survey. **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,

A handwritten signature in dark ink, appearing to read "Kriste J. Mennella".

Kriste J. Mennella
Field Office Manager

KJM/amw
Enclosure

341J



**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 05/19/2016
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969025	(X3) DATE SURVEY COMPLETED 05/11/2016
NAME OF PROVIDER OR SUPPLIER ELDERS OF MOUNT DORA LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 6767 ROUND LAKE RD MOUNT DORA, FL 32757	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 Initial Comments An initial licensure survey was conducted on 5/11/2016 at Elders of Mount Dora, LLC. The facility was in compliance at the time of the survey.		