RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

May 18, 2016

Administrator
Brookdale Hermitage Boulevard
1780 Hermitage Blvd.
Tallahassee, FL 32308

RE: CCR # 2016004773

Dear Administrator:

This letter reports the findings of a complaint survey completed on May 3, 2016 by a representative of this office. Attached 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 me at 850-412-4540.

Sincerely,

Dorian Heiberg
Field Office Manager

DH/dh
Enclosure

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Tallahassee Field Office
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Tallahassee, FL 32308
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STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964708	05/03/2016
NAME OF PROVIDER OR SUPPLIER **BROOKDALE HERMITAGE BOULEVARD**	STREET ADDRESS, CITY, STATE, ZIP CODE **1780 HERMITAGE BLVD.** **TALLAHASSEE, FL 32308**	

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

0000 Initial Comments

An unannounced complaint (2016004773) investigation was conducted on 5/3/2016 at Brookdale Hermitage Boulevard in Tallahassee on 5/3/2016. Investigation was substantiated without deficient practice.