



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

June 21, 2016

Administrator
The Meridian At Westwood
1001 Mar Walt Dr
Fort Walton Beach, FL 32547

Dear Administrator:

This letter reports the findings of an initial Licensure survey conducted on June 16, 2016 by a representative of this office. Attached 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 me at 850-412-4540.

Sincerely,

For Donah Heiberg, M.S.W.
Field Office Manager

DH/kc
Enclosure

341J



AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 06/21/2016
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969030	(X3) DATE SURVEY COMPLETED 06/16/2016
NAME OF PROVIDER OR SUPPLIER THE MERIDIAN AT WESTWOOD	STREET ADDRESS, CITY, STATE, ZIP CODE 1001 MAR WALT DR FORT WALTON BEACH, FL 32547	

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

0000 Initial Comments

An announced visit was made to The Meridian at Westwood (#616923) on 6/16/16 for the initial survey for an Assisted Living Facility (ALF). There were no deficient practice noted at the time of the visit.