



RICK SCOTT
GOVERNOR

ELIZABETH DUDEK
SECRETARY

November 21, 2013

Administrator
Sterling House of Spring Hill
10440 Palmgren Lane
Spring Hill, FL 34606

Re: CCR #2013011965

Dear Administrator:

This letter reports the findings of a complaint survey completed on November 14, 2013 by a representative of this office. Enclosed 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 this office at (386) 462-6201.

Sincerely,

Kriste J. Mennella
Field Office Manager

KJM/amw

Enclosure



AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 11/21/2013
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11964750	(X3) DATE SURVEY COMPLETED 11/14/2013
NAME OF PROVIDER OR SUPPLIER Sterling House Of Spring Hill	STREET ADDRESS, CITY, STATE, ZIP CODE 10440 Palmgren Ln Spring Hill, FL 34606	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAG AND REGULATORY IDENTIFYING INFORMATION)		

0000-Initial Comments

An unannounced visit to conduct a Complaint investigation for CCR # 2013011965 was conducted on 11/14/13. No deficiencies were identified at this time.