STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11953263	R **02/22/2017**
NAME OF PROVIDER OR SUPPLIER **YOUNG AT HEART ADULT CARE CENTER**	STREET ADDRESS, CITY, STATE, ZIP CODE **26563 SANDHILL BLVD.** **PUNTA GORDA, FL 33983**	

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

0000 - Initial Comments

An unannounced revisit survey was completed on 2/22/17 at Young at Heart, an assisted living facility (license #8481) in Punta Gorda, Florida. This is a follow-up to the Biennial and Limited Nursing Services survey completed on 12/8/16.

The previous deficiencies were found corrected and no new deficiencies were identified.