

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 06/13/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11910115	(X3) DATE SURVEY COMPLETED R 06/08/2017
NAME OF PROVIDER OR SUPPLIER BROOKDALE ISLAND LAKE	STREET ADDRESS, CITY, STATE, ZIP CODE 160 ISLANDER COURT LONGWOOD, FL 32750	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments A revisit to the re-licensure survey was conducted on 06/08/2017. Brookdale Island Lake, license #5753, had no deficiencies at the time of the visit.		