

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

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FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11911906	(X3) DATE SURVEY COMPLETED R 07/07/2017
NAME OF PROVIDER OR SUPPLIER BROOKDALE DEER CREEK SARASOTA	STREET ADDRESS, CITY, STATE, ZIP CODE 8450 MCINTOSH ROAD SARASOTA, FL 34238	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments A follow-up by desk review was conducted on 7/7/17 for Brookdale Deer Creek Sarasota, an Assisted Living Facility (license # 8556) located in Sarasota, Florida. The follow-up was in response to the biennial survey with limited nursing services which was completed 5/16/17. Based on the facility's supporting documentation, the deficiencies were corrected as of 7/7/17.		