

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 09/29/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11953671	(X3) DATE SURVEY COMPLETED 09/01/2017
NAME OF PROVIDER OR SUPPLIER AM GRAND COURT LAKES, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 280 SIERRA DRIVE NORTH MIAMI BEACH, FL 33179	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments A resident wellness monitoring inspection was conducted on 08/16/17 at AM Grand Court Lakes, LLC with a Standard licence # 8390.		