STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11953279	R **09/22/2017**
NAME OF PROVIDER OR SUPPLIER **PALMS OF PUNTA GORDA (THE)**	STREET ADDRESS, CITY, STATE, ZIP CODE **2295 SHREVE STREET** **PUNTA GORDA, FL 33950**	

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

0000 - Initial Comments

A follow-up by desk review was conducted on 9/22/17 for The Palms of Punta Gorda, an assisted living facility (license number 8469) located in Punta Gorda, Florida. The follow-up was in response to the revisit survey which was conducted on 8/2/17.

Based on the facility's supporting documentation, the deficiency was corrected as of 9/22/17.