STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966948	R **07/24/2017**
NAME OF PROVIDER OR SUPPLIER **CARINGTON MANOR**	STREET ADDRESS, CITY, STATE, ZIP CODE **3215 EAST JAMES LEE BLVD** **CRESTVIEW, FL 32539**	

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

0000 - Initial Comments

An unannounced second revisit survey was conducted on July 24, 2017 at the Carington Manor (license #11068), an assisted living facility in Crestview, FL. This was a follow-up to the original licensure survey conducted 3/28/17 and first revisit conducted 5/25/17. At the time of the second revisit, all previously cited deficiencies were found to be corrected, and no new deficient practice was identified.