STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968977	R **10/10/2017**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
INSPIRED LIVING AT BONITA SPRINGS	**27221 BAY LANDING DR** **BONITA SPRINGS, FL 34135**

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

0000 - Initial Comments

An unannounced revisit survey was conducted on 10/10/17 at Inspired Living At Bonita Springs, an assisted living facility (license #12802) in Bonita Springs, Florida.

This was a follow-up to the complaint survey for CCR #2017006096 and CCR #201700751 completed on 7/27/17.

The previous deficiencies were found corrected and no new deficiencies were identified.