

AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 11/30/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966519	(X3) DATE SURVEY COMPLETED R 11/08/2017
NAME OF PROVIDER OR SUPPLIER SAVANNAH GRAND OF MAITLAND	STREET ADDRESS, CITY, STATE, ZIP CODE 740 NORTH WYMORE ROAD MAITLAND, FL 32751	

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

0000 - Initial Comments

The revisit to a complaint investigation (#2017007917) was conducted on November 8, 2017. Indigo Palms at Maitland, license #10704, had no deficiencies at the time of the revisit pertaining to complaint #2017007917. Additional surveys were done on this same date with deficiencies cited.