

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 12/12/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968024	(X3) DATE SURVEY COMPLETED R 11/27/2017
NAME OF PROVIDER OR SUPPLIER BRISTOL COURT ASSISTED LIVING	STREET ADDRESS, CITY, STATE, ZIP CODE 3479 54TH AVE N SAINT PETERSBURG, FL 33714	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments Assisted Living Facility A revisit to 9/25/17 complaint (CCR 2017010662) was conducted at Bristol Court Assisted Living on 11/27/17 in conjunction with a complaint investigation (CCR 2017010813 and 201701364). The deficient practice previously cited on 9/25/17 was corrected during the revisit. (License # 11970)		