STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11969073	**12/05/2017**
NAME OF PROVIDER OR SUPPLIER **THE RANCH ALF**	STREET ADDRESS, CITY, STATE, ZIP CODE **4919 LORRAINE RD** **BRADENTON, FL 34211**	

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

0000 - Initial Comments

Assisted Living Facility

A capacity increase survey for 2 additional beds was conducted on 12/5/17 at The Ranch ALF, an assisted living facility. There was no deficient practice identified at the time of the visit. A recommendation for a capacity increase is being made at this time.

(License # 12936)