

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 12/22/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11953263	(X3) DATE SURVEY COMPLETED 12/05/2017
NAME OF PROVIDER OR SUPPLIER YOUNG AT HEART ADULT CARE INC	STREET ADDRESS, CITY, STATE, ZIP CODE 26563 SANDHILL BLVD. PUNTA GORDA, FL 33983	

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

0000 - Initial Comments

An unannounced Limited Nursing Services survey was conducted on 12/5/17 at Young At Heart Adult Care Inc, an assisted living facility (license #8481) in Punta Gorda, Florida.

No deficiency were identified at the time of the visit.