STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11942866	**12/20/2017**
NAME OF PROVIDER OR SUPPLIER **COURTYARDS ASSISTED LIVING (THE)**	STREET ADDRESS, CITY, STATE, ZIP CODE **26455 RAMPART BLVD.** **PUNTA GORDA, FL 33983**	

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

0000 - Initial Comments

An unannounced complaint survey for CCR# 2017015120 was conducted on 12/20/17 at The Courtyards Assisted Living, an assisted living facility (license #7326) in Punta Gorda, Florida.

The complaint contained 3 allegations, of which 2 were unsubstantiated and 1 was substantiated without deficiency.

No deficiencies were found at the time of the visit.