STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910997	R **01/22/2018**
NAME OF PROVIDER OR SUPPLIER **NIGHTINGALE MANOR**	STREET ADDRESS, CITY, STATE, ZIP CODE **1753 MICHIGAN AVENUE** **MIAMI BEACH, FL 33139**	

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

0000 - Initial Comments

A Complaint (CCR #2017014134) Survey Revisit was conducted on January 22, 2018. Nightingale Manor (AL#4687) had deficiencies identified at the time of survey cited under the biennial survey.