STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11910053	R **02/19/2018**
NAME OF PROVIDER OR SUPPLIER **GRACE MANOR AT LAKE MORTON, LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **610 EAST LIME STREET** **LAKELAND, FL 33801**	

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

0000 - Initial Comments

ASSISTED LIVING FACILITY

An unannounced revisit survey was conducted on 2/19/18 at Grace Manor at Lake Morton, an Assisted Living Facility (license # 5217) in Lakeland, Florida.
This was a follow-up to the revisit survey completed on 1/2/18.

There were no deficiencies.