

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 03/27/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969264	(X3) DATE SURVEY COMPLETED R 02/23/2018
NAME OF PROVIDER OR SUPPLIER PARKSIDE ASSISTED LIVING AND MEMORY COTTAGE LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 2595 HARBOR BLVD PORT CHARLOTTE, FL 33952	

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

0000 - Initial Comments

A follow-up by desk review was conducted on 2/23/18 for Parkside Assisted Living and Memory Cottage LLC., an assisted living facility (license #13075) in Port Charlotte, Florida. The follow-up was in response to the off-site survey completed on 11/13/17.

Based on the facility's plan of correction and supporting documentation, the deficiency was corrected as of 2/23/18.