STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968416	**06/06/2018**
NAME OF PROVIDER OR SUPPLIER **JOYFUL LIFE ASSISTED LIVING INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **3302 SW 1ST AVE** **CAPE CORAL, FL 33914**	

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

0000 - Initial Comments

An unannounced abbreviated relicensure and limited mental health survey was conducted 6/6/18 at Joyful Life Assisted Living, an assisted living facility (license number #12297) in Cape Coral, Florida.

No deficiencies were found at the time of the visit.