

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 07/26/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968822	(X3) DATE SURVEY COMPLETED 07/11/2018
NAME OF PROVIDER OR SUPPLIER INSPIRED LIVING AT TAMPA	STREET ADDRESS, CITY, STATE, ZIP CODE 5130 KELLY RD TAMPA, FL 33634	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments ASSISTED LIVING FACILITY A complaint investigation, (CCR#2018009957) was conducted at Inspired Living at Tampa assisted living facility on 7/11/18. Inspired Living at Tampa had no deficient practice identified during the investigation . (License # 12689)		