STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966948	R **08/14/2018**
NAME OF PROVIDER OR SUPPLIER **CARINGTON MANOR**	STREET ADDRESS, CITY, STATE, ZIP CODE **3215 EAST JAMES LEE BLVD** **CRESTVIEW, FL 32539**	

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

0000 - Initial Comments

On August 14, 2018, a desk review revisit was conducted for Carington Manor, state license # 11068. This was a follow-up to a monitoring visit for conduction of a generator assessment orginally completed on July 20, 2018. Based on an acceptable plan of correction and supporting documentation, the previously cited deficiencies were found corrected at the time of the desk review.