

AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 08/28/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964952	(X3) DATE SURVEY COMPLETED 08/13/2018
NAME OF PROVIDER OR SUPPLIER ARDEN COURTS MANORCARE HEALTH	STREET ADDRESS, CITY, STATE, ZIP CODE 5509 SWIFT ROAD SARASOTA, FL 34231	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An unannounced complaint survey for CCR #2018007925 was conducted 8/13/18 at Arden Courts Manorcare Health, an assisted living facility (license #9414) in Sarasota, Florida. The complaint contained 2 allegations of which both were unsubstantiated. No deficiencies were found at the time of the visit.		