STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965335	R **07/30/2018**
NAME OF PROVIDER OR SUPPLIER **BROOKDALE PALMER RANCH**	STREET ADDRESS, CITY, STATE, ZIP CODE **5111 PALMER RANCH PARKWAY** **SARASOTA, FL 34238**	

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

0000 - Initial Comments

An unannounced off-hours revisit and emergency power plan monitoring survey were conducted on 7/30/18 at 5:00 a.m., at Brookdale Palmer Ranch, an assisted living facility (license #9737) in Sarasota, Florida.

This was a follow-up to the biennial survey completed on 4/5/18.

The previous deficiencies were found corrected and no new deficiencies were identified.