

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 09/18/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966445	(X3) DATE SURVEY COMPLETED R 09/06/2018
NAME OF PROVIDER OR SUPPLIER CRYSTAL GEM MANOR ALF	STREET ADDRESS, CITY, STATE, ZIP CODE 10845 WEST GEM STREET CRYSTAL RIVER, FL 34428	

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

0000 - Initial Comments

On September 6, 2018, an unannounced follow-up to complaint investigation (CCR #2018005166 and CCR #2018005411) survey was conducted by desk review for Crystal Gem Manor Assisted Living Facility (License #10687), Crystal River, FL. Deficient practices were cleared at the time of the survey.