

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 09/20/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967024	(X3) DATE SURVEY COMPLETED 08/20/2018
NAME OF PROVIDER OR SUPPLIER LA GRANDE BELLE	STREET ADDRESS, CITY, STATE, ZIP CODE 5898 ORCHARD POND ROAD TALLAHASSEE, FL 32303	

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

0000 - Initial Comments

On August 20, 2018, an unannounced Limited Nursing Services (LNS) monitoring visit was conducted at 5898 Orchard Pond Road, Tallahassee, Florida.. License #11123. The facility currently had no residents receiving LNS services. There was no deficient practice identified at the time of the survey.