STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966441	**07/03/2018**
NAME OF PROVIDER OR SUPPLIER **HAMPTON MANOR AT DEERWOOD LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **1810 SE 16TH AVENUE** **OCALA, FL 34471**	

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

0000 - Initial Comments

On July 2, 2018 through July 3, 2018, an unannounced biennial relicensure survey was conducted at Hampton Manor at Deerwood Assisted Living Facility (License #10647) in Ocala. No deficient practice was identified during the survey.