

**AGENCY FOR HEALTH CARE  
ADMINISTRATION**

PRINTED: 03/08/2019  
FORM APPROVED

|                                                                                                                                                                                                                           |                                                                                                   |                                                                     |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| STATEMENT OF DEFICIENCIES                                                                                                                                                                                                 | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>AL11967498</b>                       | (X3) DATE SURVEY COMPLETED<br><br><b>R</b><br><br><b>02/18/2019</b> |
| NAME OF PROVIDER OR SUPPLIER<br><br><b>SWAN AT LAKE CONWAY ALF</b>                                                                                                                                                        | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>3714 ST MORITZ STREET</b><br><b>ORLANDO, FL 32812</b> |                                                                     |
| SUMMARY STATEMENT OF DEFICIENCIES<br>(FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)                                                                                                                   |                                                                                                   |                                                                     |
| <p><b>0000 - Initial Comments</b></p> <p>A revisit to Complaint Investigation #2018000640 was conducted on February 18, 2019. Swan at Lake Conway, license #11542, did not have a deficiency related to this revisit.</p> |                                                                                                   |                                                                     |