STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911223	**03/12/2019**
NAME OF PROVIDER OR SUPPLIER **VICK STREET MANOR**	STREET ADDRESS, CITY, STATE, ZIP CODE **22332 VICK STREET** **PORT CHARLOTTE, FL 33980**	

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

0000 - Initial Comments

An unannounced complaint survey for CCR# 2018018045 was conducted on 3/11/19 through 3/12/19 at Vick Street Manor, an assisted living facility (license #5016) in Port Charlotte, Florida.

The complaint contained 2 allegations, both of which were substantiated without deficiency.

No deficiencies were found at the time of the visit.