

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 04/17/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968651	(X3) DATE SURVEY COMPLETED C 04/08/2019
NAME OF PROVIDER OR SUPPLIER CRANES VIEW LODGE	STREET ADDRESS, CITY, STATE, ZIP CODE 1601 HOOKS ST CLERMONT, FL 34711	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An unannounced complaint investigation (CCR# 2019004887 and 2019005076) was conducted at Cranes View Lodge, Assisted Living Facility, on , , . No deficiencies were identified at the time of the investigation. CCR # 2019004887 was Substantiated without Deficiency and 2019005076 was Not Substantiated. Lic#12546		