STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966441	C **04/11/2019**
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

An unannounced complaint survey, (CCR#2019000920), was conducted at Hampton Manor at Deerwood on April 11, 2019. No deficient practice was identified on the day of the survey.