STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11932543	R **05/20/2019**
NAME OF PROVIDER OR SUPPLIER **WESTMINSTER PALMS**	STREET ADDRESS, CITY, STATE, ZIP CODE **830 N. SHORE DRIVE, N.E.** **SAINT PETERSBURG, FL 33701**	

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

0000 - Initial Comments

A follow-up to a 04/04/2019 biennial survey was conducted on 05/20/2019 for Westminster Palms. The previously cited deficient practice was found corrected via desk review.