STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING	(X3) DATE SURVEY COMPLETED
•	ALC000669	B. WING	03/27/2023
NAME OF PROVIDER OR SUPPLIER	***************************************	STREET ADDRESS, CITY, STATE, ZIP CODE	
MANOR LAKE ELLIJAY		85 HIGHLAND RIDGE ROAD ELLIJAY, GA 30540	
Barrier Control of the Control of th	W. made.		
(X4) ID PREFIX TAG	, R	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL EGULATORY OR LSC IDENTIFYING INFORMATION)	
{L 0000}			
	>>>>The purpose of this visi GA00232511. No rule violat	t was to investigate intake GA00232342, GA002 ions were cited as a result of this investigation.	32409,

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING	(X3) DATE SURVEY COMPLETED
	ALC000669	B. WING	03/27/2023
NAME OF PROVIDER OR SUPPLIES	\	STREET ADDRESS, CITY, STATE, ZIP CODE	
MANOR LAKE ELLIJAY	`	85 HIGHLAND RIDGE ROAD ELLIJAY, GA 30540	
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	R	(EACH DEFICIENCY MUST BE PRECEDED BY FULL EGULATORY OR LSC IDENTIFYING INFORMATION)	
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING	(X3) DATE SURVEY COMPLETED
	ALC000669	8. WING	10/27/2022
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NAME OF PROVIDER OR SUPPLIER	(STREET ADDRESS, CITY, STATE, ZIP CODE 85 HIGHLAND RIDGE ROAD	
MANOR LAKE ELLIJAY		ELLIJAY, GA 30540	
(X4) ID PREFIX TAG	R	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL EGULATORY OR LSC IDENTIFYING INFORMATION)	
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	>>>>The purpose of this visi violations were cited as a res	t was to investigate intake GA00227586 and GA sult of this investigation.	.00228307. No rule

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING	(X3) DATE SURVEY COMPLETED
	ALC000669	B. WING	10/27/2022
NAME OF PROVIDER OR SUPPLIER		STREET ADDRESS, CITY, STATE, ZIP CODE	
MANOR LAKE ELLIJAY		85 HIGHLAND RIDGE ROAD ELLIJAY, GA 30540	
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING	(X3) DATE SURVEY COMPLETED
	ALC000669	B, WING	03/28/2023
NAME OF PROVIDER OR SUPPLIER	· ·	STREET ADDRESS, CITY, STATE, ZIP CODE 85 HIGHLAND RIDGE ROAD	
MANOR LAKE ELLIJAY		ELLIJAY, GA 30540	
(X4) ID PREFIX TAG		SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL	
	R	EGULATORY OR LSC IDENTIFYING INFORMATION)	
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	>>>The purpose of this visi GA00233615. No rule violat	t was to investigate intake GA00234000, GA002 ions were cited as a result of this investigation.	33619,
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING	(X3) DATE SURVEY COMPLETED
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NAME OF PROVIDER OR SUPPLIER	R	STREET ADDRESS, CITY, STATE, ZIP CODE 85 HIGHLAND RIDGE ROAD	
MANOR LAKE ELLIJAY		ELLIJAY, GA 30540	
(X4) ID PREFIX TAG		SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL	
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION NAME OF PROVIDER OR SUPPLIES MANOR LAKE ELLIJAY	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: ALC000669	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING STREET ADDRESS, CITY, STATE, ZIP CODE 85 HIGHLAND RIDGE ROAD ELLIJAY, GA 30540	(X3) DATE SURVEY COMPLETED 05/07/2024
(X4) ID PREFIX TAG	F	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	
{L 000}	Initial Comments. >>>>The purpose of this vis GA00241890. No rule violati	it was to investigate allegaitons intake GA0 lons were cited as a result of this inspectio	00241752, and n.
		01/03/24, onsite visit was made on 01/03/	
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ALC000669 B. WING STREET ADDRESS, CITY, STATE, ZIP CODE 85 HIGHLAND RIDGE ROAD ELLIJAY, GA 30540 (X4) ID PREFIX TAG SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X2) MULTIPLE CONSTRUCTION A. BUILDING	(X3) DATE SURVEY COMPLETED
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NAME OF PROVIDER OR SUPPLIES MANOR LAKE ELLIJAY	·	STREET ADDRESS, CITY, STATE, ZIP CODE 85 HIGHLAND RIDGE ROAD	
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