

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 04/28/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11910337	(X3) DATE SURVEY COMPLETED R 04/19/2017
NAME OF PROVIDER OR SUPPLIER INDIGO PALMS AT THE MANOR	STREET ADDRESS, CITY, STATE, ZIP CODE 595 WILLIAMSON BLVD. DAYTONA BEACH, FL 32114	

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

0000 Initial Comments

A second follow-up visit to the biennial survey was conducted at Indigo Palms at the Manor (Lic. #5400) on April 19, 2017. Indigo Palms at the Manor had no deficiencies at the time of the visit.