

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 07/18/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11953352	(X3) DATE SURVEY COMPLETED R 07/13/2017
NAME OF PROVIDER OR SUPPLIER DIXIE OAK MANOR, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 6410 OLD DIXIE HWY VERO BEACH, FL 32967	

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

0000 - Initial Comments

A desk review revisit to the Change of Ownership survey was conducted on 07/11/2017 and 07/13/2017 for Dixie Oak Manor LLC, FL License #8502. The facility had no deficiencies at the time of the visit.