

AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 08/15/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966506	(X3) DATE SURVEY COMPLETED 08/14/2017
NAME OF PROVIDER OR SUPPLIER ARBOR AT SHELL POINT (THE)	STREET ADDRESS, CITY, STATE, ZIP CODE 8100 ARBOR COURT FORT MYERS, FL 33908	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An initial Extended Congregate Care survey was completed by desk review on 8/14/17 for Arbor at Shell Point (The) (license #10700), an assisted living facility in Fort Myers, Florida. There was no deficiencies identified on the desk review.		