

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 11/01/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969055	(X3) DATE SURVEY COMPLETED 10/25/2017
NAME OF PROVIDER OR SUPPLIER SILVER CREST HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 2151 GRANADA BLVD KISSIMMEE, FL 34746	

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

0000 - Initial Comments

AMENDED 11/1/17 TO CORRECT ADDRESS

Initial licensure survey was conducted on 10/25/2017. Silver Crest Home, had no deficiencies at the time of the visit. The old location was as follows: 1010 Darlington Court, Kissimmee, FL 34758