STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968621	**01/23/2018**
NAME OF PROVIDER OR SUPPLIER **EL OASIS ALF II**	STREET ADDRESS, CITY, STATE, ZIP CODE **2806 W. KIRBY ST** **EGYPT LAKE, FL 33614**	

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

0000 - Initial Comments

Assisted Living Facility

An unannounced complaint, (CCR# 2017013391) survey, in conjunction with a biennial re-licensure survey, was conducted on 01/23/2018 at El Oasis ALF II, an assisted living facility, located in Tampa, Florida. There were no deficiencies identified during the survey.

(License # 12483)