

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 02/27/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965421	(X3) DATE SURVEY COMPLETED 02/06/2018
NAME OF PROVIDER OR SUPPLIER SHP IV HERITAGE OAKS LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 4501 SHANNON LAKES DRIVE WEST TALLAHASSEE, FL 32308	

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

0000 - Initial Comments

An unannounced Biennial Survey was conducted at SHP IV Heritage Oaks (Allegro) Assisted Living Facility, license number 9746 on February 5 and February 6, 2018. At the time of survey there were no deficiencies identified.