

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 02/27/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11963853	(X3) DATE SURVEY COMPLETED 02/13/2018
NAME OF PROVIDER OR SUPPLIER EVERGREEN MANOR RETIREMENT HOME	STREET ADDRESS, CITY, STATE, ZIP CODE 3297 S.R. 580 SAFETY HARBOR, FL 34695	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments Assisted Living Facility An unannounced Monitoring Visit (for Staffing/Background Screening) was conducted on 2/13/18. The Evergreen Manor Retirement Home, (License # 8760), had no deficient practice at the time of this visit.		