

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

**PRINTED: 05/22/2018
FORM APPROVED**

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11910337	(X3) DATE SURVEY COMPLETED 05/16/2018
NAME OF PROVIDER OR SUPPLIER INDIGO PALMS AT THE MANOR	STREET ADDRESS, CITY, STATE, ZIP CODE 595 WILLIAMSON BLVD. DAYTONA BEACH, FL 32114	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		

0000 - Initial Comments

A complaint investigation (CCR #2017015282) was conducted at Indigo Palms at the Manor in Daytona Beach on 5/16/18. Indigo Palms did not have a deficiency at the time of the visit.