

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 06/25/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969255	(X3) DATE SURVEY COMPLETED 05/31/2018
NAME OF PROVIDER OR SUPPLIER HERITAGE OAKS ASSISTED LIVING AND MEMORY CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 7374 SAN CASA DR ENGLEWOOD, FL 34224	

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

0000 - Initial Comments

An unannounced complaint survey for CCR# 2018004067 was conducted 5/31/18 at Heritage Oaks, an assisted living facility (License # 13053) in Englewood Florida.

No deficiencies were found at the time of the visit.