

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 07/20/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969321	(X3) DATE SURVEY COMPLETED 06/25/2018
NAME OF PROVIDER OR SUPPLIER PRISYCO MANOR LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 8061 GROVELAND AVE PENSACOLA, FL 32534	

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

0000 - Initial Comments

An initial licensure survey was conducted at Prisyco Manor, application # 70931, in Pensacola, FL on 6/25/2018. At the time of the survey, no deficient practice was identified.