STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968273	R **08/23/2018**
NAME OF PROVIDER OR SUPPLIER **VILLA LINDA INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **670 W 72ND PL** **HIALEAH, FL 33014**	

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

0000 - Initial Comments

A Standard Biennial Second Revisit Survey was conducted on August 23, 2018. Villa Linda Inc. (License #12258) had a deficiency identified under the Emergency Power Plan Complaint Survey conducted on the same day.