STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968708	**09/25/2018**
NAME OF PROVIDER OR SUPPLIER **EL OASIS ALF III INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **8250 MALVERN CIR** **TAMPA, FL 33634**	

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

0000 - Initial Comments

Assisted Living Facility

A biennial re-licensure survey was conducted on 09/25/2018 at El Oasis Assisted Living Facility (ALF) III (License #12584), an assisted living facility in Tampa, Florida. There were no deficiencies identified at the time of visit.