

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 01/08/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966505	(X3) DATE SURVEY COMPLETED 12/10/2018
NAME OF PROVIDER OR SUPPLIER LA PALOMA ALF	STREET ADDRESS, CITY, STATE, ZIP CODE 880 EAST BAFFIN DRIVE VENICE, FL 34293	

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

0000 - Initial Comments

An unannounced emergency power plan monitoring survey was conducted on 12/10/18 at La Paloma ALF, an assisted living facility (license #10727) in Venice, Florida.

No deficiencies were found at the time of the visit.