

AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 02/05/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967710	(X3) DATE SURVEY COMPLETED 01/15/2019
NAME OF PROVIDER OR SUPPLIER WINDSOR AT CAPE CORAL	STREET ADDRESS, CITY, STATE, ZIP CODE 831 SANTA BARBARA RD CAPE CORAL, FL 33991	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An unannounced complaint survey CCR#2018015786 was conducted from 1/14/19 through 1/15/19 at Windsor at Cape Coral, an assisted living facility (license #11678) in Cape Coral, Florida. There were two allegations of which none were substantiated. No deficiencies were found at the time of this survey.		