STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968015	**01/22/2019**
NAME OF PROVIDER OR SUPPLIER **VISTA ALEGRE**	STREET ADDRESS, CITY, STATE, ZIP CODE **6800 SW 130 AVE** **MIAMI, FL 33183**	

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

0000 - Initial Comments

A Generator monitoring survey was conducted on 01/22/19. Vista Alegre. with standard license had no deficiencies found at the time of the survey: