

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

**PRINTED: 02/22/2019
FORM APPROVED**

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968537	(X3) DATE SURVEY COMPLETED 12/18/2018
NAME OF PROVIDER OR SUPPLIER ELITE MANOR-KISSIMMEE	STREET ADDRESS, CITY, STATE, ZIP CODE 4034 SUNNY DAY WAY KISSIMMEE, FL 34744	

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

0000 - Initial Comments

An unannounced monitoring visit related to emergency environmental control planning was conducted on 12/18/18. Elite Manor-Kissimmee (license #12424) had no deficiencies at the time of the visit.