

AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 03/20/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965405	(X3) DATE SURVEY COMPLETED 03/07/2019
NAME OF PROVIDER OR SUPPLIER BROOKDALE SANTA BARBARA	STREET ADDRESS, CITY, STATE, ZIP CODE 911 SANTA BARBARA BLVD CAPE CORAL, FL 33991	

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 03/07/19 at Brookdale Santa Barbara, an assisted living facility (license #9767) in Cape Coral, Florida.

No deficiencies were found at the time of the visit.