

AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 03/20/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968432	(X3) DATE SURVEY COMPLETED 03/07/2019
NAME OF PROVIDER OR SUPPLIER THE VILLAGE ALF I CORP	STREET ADDRESS, CITY, STATE, ZIP CODE 301 KAMAL PARKWAY CAPE CORAL, FL 33904	

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 The Village ALF I Corp, an assisted living facility (license #12313) in Cape Coral, Florida.

No deficiencies were identified at time of the visit.