

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 03/29/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964343	(X3) DATE SURVEY COMPLETED R 03/13/2019
NAME OF PROVIDER OR SUPPLIER SOLARIS SENIOR LIVING AT MERRITT ISLAND	STREET ADDRESS, CITY, STATE, ZIP CODE 535 CROCKETT BLVD. MERRITT ISLAND, FL 32953	

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

0000 - Initial Comments

A revisit to a Limited Nursing Services (LNS) monitoring was conducted on 3/13/2019. Solaris Senior at Merritt Island Assisted Living Facility (License #8975) had no deficiencies at the time of the visit.