STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11969398	**04/17/2019**
NAME OF PROVIDER OR SUPPLIER **CARING MANOR LLC**	STREET ADDRESS, CITY, STATE, ZIP CODE **1863 EDITH ST NE** **PALM BAY, FL 32907**	

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 at Caring Manor ALF (11969398) on April 17, 2019. No deficient practices were found at the time of the visit.