

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 05/03/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966016	(X3) DATE SURVEY COMPLETED R 04/15/2019
NAME OF PROVIDER OR SUPPLIER ROYAL OAKS MANOR	STREET ADDRESS, CITY, STATE, ZIP CODE 1833 SEMINOLE BLVD LARGO, FL 33778	

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

0000 - Initial Comments

A revisit survey was conducted on 4/15/19 at Royal Oaks Assisted Living Facility in Clearwater, Florida. There were no deficiencies found at the time of the visit.