

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 06/19/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964817	(X3) DATE SURVEY COMPLETED R 04/08/2019
NAME OF PROVIDER OR SUPPLIER ARDEN COURTS OF LELY PALMS	STREET ADDRESS, CITY, STATE, ZIP CODE 6125 RATTLESNAKE HAMMOCK ROAD NAPLES, FL 34113	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments A follow-up by desk review was conducted on 4/8/19 for Arden Courts of Lely Palms, an assisted living facility in Naples, Florida. The follow-up was in response to the emergency power plan monitoring survey which was conducted on 1/9/19. Based on the facility's supporting documentation, the deficiency was corrected as of 1/31/19.		