STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11932401	R **02/15/2017**
NAME OF PROVIDER OR SUPPLIER **VILLA RIO VISTA**	STREET ADDRESS, CITY, STATE, ZIP CODE **1115 SE 6TH TERRACE** **FORT LAUDERDALE, FL 33316**	

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

0000 - Initial Comments

A revisit to a complaint survey for CCR# 2016009240 was conducted by desk review on February 10, 2017 through February 15, 2017. Villa Rio Vista had no uncorrected deficiencies at the time of survey.