STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911225	R **04/19/2017**
NAME OF PROVIDER OR SUPPLIER **GRAND VILLA OF ENGLEWOOD**	STREET ADDRESS, CITY, STATE, ZIP CODE **925 SOUTH RIVER ROAD** **ENGLEWOOD, FL 34223**	

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

0000 - Initial Comments

An unannounced revisit survey was conducted on 4/19/17 at at Grand Villa of Englewood, an assisted living facility (license #5501) located in Englewood, Florida.

This was a follow-up to the complaint survey for CCR# 2016013534 and CCR #2016014103, completed on 2/15/17.

Previous deficencies were found corrected at the time of the visit.