

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 05/15/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966697	(X3) DATE SURVEY COMPLETED 04/18/2017
NAME OF PROVIDER OR SUPPLIER BRENNITY AT VERO BEACH(THE)	STREET ADDRESS, CITY, STATE, ZIP CODE 7975 17 LANE VERO BEACH, FL 32966	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An unannounced licensure complaint survey, CCR #2017000965 and #2017001472, was conducted on 04/18/2017 at The Brennnity at Vero Beach, License #10830. The facility had no deficiencies at the time of the investigation.		