STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911596	**05/09/2017**
NAME OF PROVIDER OR SUPPLIER **BROOKDALE WILLOW WOOD**	STREET ADDRESS, CITY, STATE, ZIP CODE **2855 WEST COMMERCIAL BLVD** **FORT LAUDERDALE, FL 33309**	

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

0000 - Initial Comments

An unannounced complaint (#2017001717) survey was conducted on 05/09/2017 at Brookdale Willow Wood (License #7288). The facility had no deficiencies identified at the time of the visit.