STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966112	R **05/30/2017**
NAME OF PROVIDER OR SUPPLIER **ORANGE BLOSSOMS VILLA**	STREET ADDRESS, CITY, STATE, ZIP CODE **10331 PIPPIN LANE** **ROYAL PALM BEACH, FL 33411**	

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

0000 - Initial Comments

A desk review revisit survey to the Abbreviated Re-Licensure survey was conducted on 5/30/17 at Orange Blossoms Villa (License #10383). The facility had no uncorrected deficiencies identified at the time of the survey.