

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 06/22/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968698	(X3) DATE SURVEY COMPLETED 06/19/2017
NAME OF PROVIDER OR SUPPLIER GRAND VILLA OF ST PETERSBURG	STREET ADDRESS, CITY, STATE, ZIP CODE 3600 34TH STREET SOUTH SAINT PETERSBURG, FL 33711	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments Assisted Living Facility A complaint investigation, (CCR# 2017003472), was conducted at Grand Villa of St. Petersburg (Lic. #12561) on . Grand Villa of St. Petersburg, Assisted Living Facility, had a deficiency at the time of the visit. 0152 - Physical Plant - Safe Living Environ/Other - 58A-5.023(3) FAC Based on observation and interview, the facility had not provided a safe environment with respect to at least one (1) of ten (10) resident inspected. Findings included: At approximately 3:10pm on , # was found to contain at least 15-20 unsecured canisters--some lying on the floor, with others freely standing on the counter top. Interview with the resident living therein revealed that these containers had been in his/her an unsecured fashion for more than a week. Class III		