

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

**PRINTED: 08/02/2017
FORM APPROVED**

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11942705	(X3) DATE SURVEY COMPLETED 07/06/2017
NAME OF PROVIDER OR SUPPLIER BRIGHTON GARDENS OF BOCA RATON	STREET ADDRESS, CITY, STATE, ZIP CODE 6347 VIA DE SONRISA DEL SUR BOCA RATON, FL 33433	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An unannounced licensure complaint survey, CCR #2017003992, was conducted on 07/06/2017 at Brighton Gardens of Boca Raton, License #8172. The facility had no deficiencies at the time of the investigation.		