STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11953321	**08/09/2017**
NAME OF PROVIDER OR SUPPLIER **BARRINGTON TERRACE AT BOYNTON BEACH**	STREET ADDRESS, CITY, STATE, ZIP CODE **1425 S. CONGRESS** **BOYNTON BEACH, FL 33426**	

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

0000 - Initial Comments

An unannounced licensure Complaint survey, CCR #2017004921, was conducted on August 9, 2017 at Barrington Terrace At Boynton Beach (License #8186). The facility had no deficiencies identified at the time of the survey.