

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 08/22/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968817	(X3) DATE SURVEY COMPLETED 08/10/2017
NAME OF PROVIDER OR SUPPLIER VILLA AT TERRACINA GRAND	STREET ADDRESS, CITY, STATE, ZIP CODE 6855 DAVIS BLVD NAPLES, FL 34104	

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

0000 - Initial Comments

An unannounced extended congregate care survey was conducted on 8/10/17 at Villa at Terracina Grand, an assisted living facility (license # 12658) in Naples, Florida.

No deficiencies were found at the time of the visit.