STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11965718	**08/23/2017**
NAME OF PROVIDER OR SUPPLIER **TERRACINA GRAND**	STREET ADDRESS, CITY, STATE, ZIP CODE **6825 DAVIS BLVD** **NAPLES, FL 34104**	

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

0000 - Initial Comments

An unannounced complaint survey for CCR# 2017005828 was conducted on 8/23/17 at Terracina Grand, an assisted living facility (license # 10071) located in Naples, Florida.

The complaint contained 3 allegations, of which 2 were not substantiated and 1 allegation was substantiated with no citations.

No deficiencies were found at the time of the visit.