STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968119	R **07/25/2017**
NAME OF PROVIDER OR SUPPLIER **THE TERRACE AT IVEY ACRES OF JAY**	STREET ADDRESS, CITY, STATE, ZIP CODE **3964 FLORIDA AVE** **JAY, FL 32565**	

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

0000 - Initial Comments

An unannounced revisit survey was conducted at The Terrace at Ivey Acres , license #12076, on 07/25/17. This was a follow-up to the biennial licensure survey completed on 5/23/17. At the time of the revisit, previously cited deficiencies were found to be corrected, and no new deficient practice was identified.