

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 10/11/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968845	(X3) DATE SURVEY COMPLETED 10/03/2017
NAME OF PROVIDER OR SUPPLIER DISCOVERY VILLAGE AT NAPLES, LLC	STREET ADDRESS, CITY, STATE, ZIP CODE 8417 SIERRA MEADOWS BLVD NAPLES, FL 34113	

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

0000 - Initial Comments

An unannounced complaint survey for CCR# 2017011356 was conducted on 10/2/17 through 10/3/17 at Discovery Village At Naples, an assisted living facility (license #12700) located in Naples, Florida.

The complaint contained 1 allegation, which was substantiated with 2 deficiencies which were cited under the follow-up surveys (ASPEN Event ID # NXIL13 and U9I514) that were conducted at the same time as this complaint.