

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 10/30/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968235	(X3) DATE SURVEY COMPLETED 10/19/2017
NAME OF PROVIDER OR SUPPLIER DISCOVERY VILLAGE AT MELBOURNE	STREET ADDRESS, CITY, STATE, ZIP CODE 3260 N HARBOR CITY BLVD MELBOURNE, FL 32935	

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

0000 - Initial Comments

Complaint investigation #2017009486 was conducted on 10/19/2017. Discovery Village license # 12122 had no deficiencies pertaining to this complaint.