STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968935	**11/02/2017**
NAME OF PROVIDER OR SUPPLIER **EAST RIDGE RETIREMENT VILLAGE, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **19225 SW 87TH AVE** **MIAMI, FL 33157**	

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

0000 - Initial Comments

An extended congregate care monitoring survey was conducted on November 1st and 2nd, 2017. East Ridge Retirement Village, Inc. with license number 12771 and extended congregate care component had deficiencies identified at the time of survey and cited under standard biennial survey.