STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11964664	R **02/19/2018**
NAME OF PROVIDER OR SUPPLIER **ARDEN COURTS OF DELRAY BEACH**	STREET ADDRESS, CITY, STATE, ZIP CODE **16150 JOG RD.** **DELRAY BEACH, FL 33446**	

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

0000 - Initial Comments

A desk review revisit to the Relicensure survey was conducted on 02/19/2018 for Arden Courts of Delray Beach, License #9240. The outstanding deficiency was corrected.