

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 05/03/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11910121	(X3) DATE SURVEY COMPLETED R 04/12/2018
NAME OF PROVIDER OR SUPPLIER ROCKY CREEK VILLAGE	STREET ADDRESS, CITY, STATE, ZIP CODE 8606 BOULDER COURT TAMPA, FL 33615	

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

0000 - Initial Comments

Assisted Living Facility

A 3rd unannounced Revisit to 10/5/17 & 12/27/17 & 2/19/18 Complaint (CCR #2017007859) was conducted on 4/12/18.

The Rocky Creek Village, Assisted Living Facility (License #5227), had corrected the deficiencies identified on 10/5/17 & 12/27/17 & 2/19/18, and no deficiencies were found at the time of this visit.