

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

**PRINTED: 05/09/2018
FORM APPROVED**

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11967587	(X3) DATE SURVEY COMPLETED 05/03/2018
NAME OF PROVIDER OR SUPPLIER BRENNITY AT MELBOURNE	STREET ADDRESS, CITY, STATE, ZIP CODE 7365 ORCHESTRA LN MELBOURNE, FL 32940	

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

0000 - Initial Comments

A Monitoring visit for Extended Congregate Care was conducted on 5/03/18. The Brenntity at Melbourne, License # 11595, did not have any deficiencies found at the time of the visit.