

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 05/15/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11968935	(X3) DATE SURVEY COMPLETED R 04/25/2018
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

A standard biennial second revisit survey was conducted on April 25th, 2018. 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 extended congregate care monitoring survey.