STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11969319	**04/02/2018**
NAME OF PROVIDER OR SUPPLIER **THE RESIDENCE**	STREET ADDRESS, CITY, STATE, ZIP CODE **10075 HILLVIEW RD** **PENSACOLA, FL 32514**	

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

0000 - Initial Comments

An initial survey for Extended Congreate Care (ECC) services was conducted on 4/2/18 at The Residence, an assisted living facility in Pensacola, FL. The facility met requirements at the time of the survey.