

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 08/08/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969082	(X3) DATE SURVEY COMPLETED R 08/01/2018
NAME OF PROVIDER OR SUPPLIER BEEHIVE HOMES OF GULF BREEZE	STREET ADDRESS, CITY, STATE, ZIP CODE 4702 GULF BREEZE PKWY GULF BREEZE, FL 32563	

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

0000 - Initial Comments

On August 1, 2018, a desk review revisit was conducted for Beehive Homes of Gulf Breeze, state license #12891. This was a follow-up to a biennial standard survey originally completed on 6/28/2018. Based on an acceptable plan of correction and supporting evidence of compliance, the previously cited deficiencies were found corrected at the time of the desk review.