STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968807	**06/21/2018**
NAME OF PROVIDER OR SUPPLIER **JOSEPH'S VILLAGE OF WEST PALM**	STREET ADDRESS, CITY, STATE, ZIP CODE **2220 N AUSTRALIAN AVE 6TH FLOOR** **WEST PALM BEACH, FL 33407**	

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

0000 - Initial Comments

An unannounced Complaint Survey, CCR#2018007602, CCR#2018006659 and CCR#2018006592, was conducted on June 20-21, 2018 at Joseph's Village of West Palm Beach, a 75 bed Assisted Living Facility, License #12676. The facility had no deficiencies at the time of the visit.