

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

**PRINTED: 08/31/2018
FORM APPROVED**

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11964026	(X3) DATE SURVEY COMPLETED 08/20/2018
NAME OF PROVIDER OR SUPPLIER TIFFANY ON THE RIVER	STREET ADDRESS, CITY, STATE, ZIP CODE 402 N. RIVERSIDE DRIVE NEW SMYRNA BEACH, FL 32168	

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

0000 - Initial Comments

An unannounced biennial licensure and Emergency Power Plan survey was conducted at Tiffany On The River (License #8788) on August 20, 2018. Tiffany On The River had no deficiencies found as a result of the survey.