STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11968807	R **10/05/2018**
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 capacity increase revisit survey was conducted on 10/5/18 for Joseph's Village of West Palm Beach, (License # 12676). The previously cited deficiency was found corrected.

A generator assessment was conducted during this survey on the same date.