

**AGENCY FOR HEALTH CARE  
ADMINISTRATION**

PRINTED: 11/14/2018  
FORM APPROVED

|                                                                                |                                                                                                          |                                                                     |
|--------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------|
| STATEMENT OF DEFICIENCIES                                                      | (X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:<br><br><b>AL11969052</b>                              | (X3) DATE SURVEY COMPLETED<br><br><b>R</b><br><br><b>10/30/2018</b> |
| NAME OF PROVIDER OR SUPPLIER<br><b>DISCOVERY VILLAGE AT PALM BEACH GARDENS</b> | STREET ADDRESS, CITY, STATE, ZIP CODE<br><b>100 DISCOVERY WAY</b><br><b>PALM BEACH GARDENS, FL 33418</b> |                                                                     |

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

**0000 - Initial Comments**

A 2nd Revisit to the relicensure survey was conducted as a desk review on October 30, 2018 at Discovery Village At Palm Beach Gardens, License #12883. A previously cited deficiency was found corrected.