

AGENCY FOR HEALTH CARE
ADMINISTRATION

PRINTED: 11/29/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11912088	(X3) DATE SURVEY COMPLETED 10/26/2017
NAME OF PROVIDER OR SUPPLIER BENTLEY VILLAGE	STREET ADDRESS, CITY, STATE, ZIP CODE 870 CLASSIC COURT NAPLES, FL 34110	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments A post-hurricane reoccupation monitoring visit was conducted 10/23/17 through 10/26/17 at Bentley Village, an assisted living facility (license # 5598) in Naples, Florida. The facility appeared safe for reoccupation.		