

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 12/11/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11963962	(X3) DATE SURVEY COMPLETED 11/20/2018
NAME OF PROVIDER OR SUPPLIER ARGO SENIOR LIVING AT HAVERHILL	STREET ADDRESS, CITY, STATE, ZIP CODE 2939 S. HAVERHILL ROAD WEST PALM BEACH, FL 33415	

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

0000 - Initial Comments

An unannounced licensure complaint survey, CCR #2018013735, was conducted on 11/20/2018 at Argo Senior Living at Haverhill, License #8091. The facility had no deficiencies identified at the time of the survey.

(An unannounced licensure Change of Ownership (CHOW) third revisit survey was conducted in conjunction with the above complaint survey. Please see separate report for findings.)