STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11963906	**12/18/2018**
NAME OF PROVIDER OR SUPPLIER **BROOKDALE SOUTHSIDE**	STREET ADDRESS, CITY, STATE, ZIP CODE **9601 SOUTHBROOK DRIVE** **JACKSONVILLE, FL 32256**	

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

0000 - Initial Comments

An unannounced complaint survey, (CCR #2018014241) was conducted on 12/17-18/18 at Brookdale Southside. No deficient practice was found on the date of the survey.