STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11911432	**01/02/2019**
NAME OF PROVIDER OR SUPPLIER **RIVERSIDE PRESBYTERIAN HOUSE, INC**	STREET ADDRESS, CITY, STATE, ZIP CODE **2020 PARK STREET** **JACKSONVILLE, FL 32204**	

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

0000 - Initial Comments

A complaint investigation CCR #2018015503, was conducted at Riverside Presbyterian House on 01/02/2019. Riverside Presbyterian House had no deficiencies at the time of the investigation.