

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

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FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11943102	(X3) DATE SURVEY COMPLETED 01/02/2019
NAME OF PROVIDER OR SUPPLIER SAVANNAH COURT OF THE PALM BEA	STREET ADDRESS, CITY, STATE, ZIP CODE 2090 N. CONGRESS AVENUE WEST PALM BEACH, FL 33401	

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

0000 - Initial Comments

Unannounced licensure complaint investigations (CCR #2018016656, CCR #2018016968 and CCR #2018017697) were conducted on 12/18/18, 12/20/18, 12/28/18, concluding on 01/02/19. The facility had no deficiencies identified at the time of the survey.

This survey was conducted in conjunction with two Revisit Surveys, at Savannah Court of The Palm Beaches, License #8367. One of the three complaints was substantiated (#2018016656), with deficiencies. The deficiencies were cited on the report for the Revisit survey to complaint #2018014564. Please refer to the separate reports for the findings.