

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 01/24/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11963790	(X3) DATE SURVEY COMPLETED R 01/03/2019
NAME OF PROVIDER OR SUPPLIER GRAND VILLA OF DEERFIELD BEACH	STREET ADDRESS, CITY, STATE, ZIP CODE 1050 SOUTHWEST 24TH AVENUE DEERFIELD BEACH, FL 33442	

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

0000 - Initial Comments

An unannounced licensure Complaint, CCR #2018013518, revisit survey was conducted by desk review on 01/03/2019 for Grand Villa of Deerfield Beach, License #8697. The previously cited deficiency was found corrected at the time of the survey.