



**DELAWARE HEALTH
AND SOCIAL SERVICES**

Division of Health Care Quality
Office of Long Term Care Residents Protection

DHSS - DHCQ
263 Chapman Road, Suite 200, Cambridge Bldg
Newark, Delaware 19702
(302) 421-7400

STATE SURVEY REPORT

NAME OF FACILITY: Ingleside Assisted Living, LLC

DATE SURVEY COMPLETED: January 31, 2024

SECTION	STATEMENT OF DEFICIENCIES SPECIFIC DEFICIENCIES	ADMINISTRATOR'S PLAN FOR CORRECTION OF DEFICIENCIES WITH ANTICIPATED DATES TO BE CORRECTED
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3225.0	<p>An unannounced Complaint Survey was conducted at this facility on January 31, 2024. The survey sample totaled two reviewed residents. Based on interview, record review and review of other facility documentation, there were no deficiencies identified.</p> <p>Regulations for Assisted Living Facilities</p> <p>This requirement is met as evidenced by:</p> <p>No deficiencies were identified at the time of the survey.</p>	
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Provider's Signature *Denise Williams*

Title BD

Date 2/12/24