

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 04/03/2017
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11942892	(X3) DATE SURVEY COMPLETED R 03/20/2017
NAME OF PROVIDER OR SUPPLIER TAMPA LIVING CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 11722 NORTH 17TH STREET TAMPA, FL 33612	

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

0000 - Initial Comments

Assisted Living Facility

A 2nd Revisit to 11/28/16 Complaint (CCR#2016013165) was conducted on 3/20/17 at Tampa Living Care, formerly The Sunrise Senior Village (Assisted Living Facility License #5898). The deficient practice previously cited on 11/28/16 & 1/25/17 was corrected.