

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

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FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11943141	(X3) DATE SURVEY COMPLETED 04/06/2017
NAME OF PROVIDER OR SUPPLIER ELZAIDA'S TENDER CARE	STREET ADDRESS, CITY, STATE, ZIP CODE 804 SOUTH BELCHER ROAD CLEARWATER, FL 33764	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments Assisted Living Facility Two complaint investigations, (CCR# 2017000501 and CCR# 2017000344) were conducted at Elzaida's Tender Care, (Lic# 7280), on 4/6/17. Elzaida's Tender Care, Assisted Living Facility, had no deficiencies at the time of the visit.		