STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967635	R **11/27/2017**

NAME OF PROVIDER OR SUPPLIER	STREET ADDRESS, CITY, STATE, ZIP CODE
HILDA'S HOME CARE ALF	**8812 BAYAUD DRIVE** **TAMPA, FL 33626**

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

0000 - Initial Comments

Assisted Living Facility

An unannounced revisit to 08/31/2017 complaint survey, (CCR# 2017009337), survey was conducted on 11/27/2017 at Hilda's Home Care ALF, (License # 11663), an assisted living facility in Tampa, Florida. Previously identified deficiencies corrected. There were no deficiencies identified at the time of visit.

(License # 11663)