STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966104	R **12/13/2017**
NAME OF PROVIDER OR SUPPLIER **GARDENS AT HIDDEN HAMMOCKS (THE)**	STREET ADDRESS, CITY, STATE, ZIP CODE **5182 NW 58TH TERRACE** **CORAL SPRINGS, FL 33067**	

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

0000 - Initial Comments

A relicensure revisit was conducted as a desk review on 12/13/2017 for Gardens at Hidden Hammock (Lic#10352). All outstanding deficiencies were corrected.