

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 01/31/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966585	(X3) DATE SURVEY COMPLETED 01/16/2018
NAME OF PROVIDER OR SUPPLIER PALM AVENUE BAPTIST TOWER ALF	STREET ADDRESS, CITY, STATE, ZIP CODE 215 EAST PALM AVENUE TAMPA, FL 33602	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments Assisted Living Facility An unannounced, abbreviated Biennial state relicensure survey with Extended Congregate Care (ECC) was conducted on 1/16/18, in conjunction with an unannounced complaint investigation, (CCR# 2017014355). The Palm Avenue Baptist Tower ALF, Assisted Living Facility, (License # 10783), had no deficiencies at the time of this visit.		