STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11966585	**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 complaint investigation, (CCR# 2017014355), was conducted on 1/16/18, in conjunction with an unannounced, abbreviated Biennial state relicensure survey with Extended Congregate Care (ECC).

The Palm Avenue Baptist Tower ALF, Assisted Living Facility, (License # 10783), had no deficiencies at the time of this visit.