

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 02/16/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11911449	(X3) DATE SURVEY COMPLETED 01/29/2018
NAME OF PROVIDER OR SUPPLIER PLAZA OF HALLANDALE BEACH	STREET ADDRESS, CITY, STATE, ZIP CODE 3535 SW 52ND AVENUE PEMBROKE PARK, FL 33023	

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

0000 - Initial Comments

An unannounced licensure complaint survey, CCR# 2017011508 CCR#2017011505, was conducted on 1/29/18 at Plaza of Hallandale Beach ALF, License #5120. The facility had no deficiencies at the time of the investigation.