STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11943141	R **02/23/2018**
NAME OF PROVIDER OR SUPPLIER **ELZAIDA'S TENDER CARE**	STREET ADDRESS, CITY, STATE, ZIP CODE **804 SOUTH BELCHER ROAD** **CLEARWATER, FL 33764**	

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

0000 - Initial Comments

Assisted Living Facility

On February 23, 2108 a Revisit to a 1/10/18 complaint (CCR#2017015639) was conducted in conjunction with a Revisit to 1/10/18 Biennial and a monitoring for resident well-being and staffing survey at Elzaida's Tender Care. Previously cited deficiencies were corrected at the time of the visit.

(license# 7280)