STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11953232	**03/22/2018**
NAME OF PROVIDER OR SUPPLIER **EBENEZER FAMILY HOME**	STREET ADDRESS, CITY, STATE, ZIP CODE **6690 WEST 14 AVENUE** **HIALEAH, FL 33012**	

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

0000 - Initial Comments

A Standard Biennial Survey was conducted on March 22, 2018. Ebenezer Family Home (license #8519) had no deficiencies identified at the time of survey.