

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 07/24/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966284	(X3) DATE SURVEY COMPLETED R 07/18/2018
NAME OF PROVIDER OR SUPPLIER TENDER TOUCH HOME CARE, INC.	STREET ADDRESS, CITY, STATE, ZIP CODE 1801 ALCAZAR DRIVE MIRAMAR, FL 33023	

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

0000 - Initial Comments

A Relicensure revisit survey was conducted on 07/18/2018 at Tender Touch Home Care Inc., License #10494. The facility corrected all outstanding deficiencies at the time of the survey.