STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11967303	R **08/15/2018**
NAME OF PROVIDER OR SUPPLIER **SRA CARIDAD RETIREMENT HOME I**	STREET ADDRESS, CITY, STATE, ZIP CODE **10840 NW 1 LANE** **MIAMI, FL 33172**	

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

0000 - Initial Comments

A Standard Biennial Revisit Survey was conducted on 08/15/18. Sra Caridad Retirement Home Care, Inc. (license #11385) had no deficiencies found at the time of the survey.