

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 11/05/2018
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11965021	(X3) DATE SURVEY COMPLETED R 10/18/2018
NAME OF PROVIDER OR SUPPLIER GARDENS AT MAPLEWOOD (THE)	STREET ADDRESS, CITY, STATE, ZIP CODE 1342 NW 104TH DRIVE CORAL SPRINGS, FL 33071	

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

0000 - Initial Comments

An unannounced Relicensure revisit survey was commenced as a desk review on 10/15/2018 and concluded on 10/18/2018 for Gardens at Maplewood (The) (Lic#9451). The outstanding deficiency was corrected.