

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 04/10/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966546	(X3) DATE SURVEY COMPLETED R 03/20/2019
NAME OF PROVIDER OR SUPPLIER ST DB&Y HOME FOR THE ELDERLY,	STREET ADDRESS, CITY, STATE, ZIP CODE 8715 NW 153RD TERRACE HIALEAH, FL 33018	

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

0000 - Initial Comments

A complaint (CCR# 2018018382) revisit survey was conducted on 3/20/19. Peace and Care of Miami Lakes had no deficiencies identified at time of the survey.