

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 03/05/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11969092	(X3) DATE SURVEY COMPLETED R 02/15/2019
NAME OF PROVIDER OR SUPPLIER SYMPHONY AT THE WATERWAYS	STREET ADDRESS, CITY, STATE, ZIP CODE 3001 E OAKLAND PARK BLVD FORT LAUDERDALE, FL 33306	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An unannounced relicensure revisit was conducted at Symphony at the Waterways (Lic#12940) on 02/15/2019. All outstanding deficiencies were corrected.		