



RICK SCOTT
GOVERNOR
ELIZABETH DUDEK
SECRETARY

May 21, 2015

Administrator
Hampton Manor
1500 S.E. 24th Road
Ocala, FL 34471

Dear Administrator:

This letter reports the findings of a state licensure survey that was conducted on May 12, 2015 by a representative of this office. Enclosed is the provider's copy of the State (5000-3547) Form, which indicates there were no discernible deficiencies noted on the date of the survey.

The Quality Assurance Questionnaire has long been employed to obtain your feedback following survey activity. This form has been placed on the Agency's website at <http://ahca.myflorida.com/Publications/Forms.shtml> as a first step in providing a web-based interactive consumer satisfaction survey system. You may access the questionnaire through the link under Health Facilities and Providers on this page. Your feedback is encouraged and valued, as our goal is to ensure the professional and consistent application of the survey process.

Thank you for the assistance provided to the surveyor. Should you have any questions please call this office at (386) 462-6201.

Sincerely,

Kristi J. Mennella
Field Office Manager

KJM/amw
Enclosure



**AGENCY FOR HEALTH CARE
ADMINISTRATION**

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FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER IDENTIFICATION NUMBER: AL11964374	(X3) DATE SURVEY COMPLETED 05/12/2015
NAME OF PROVIDER OR SUPPLIER HAMPTON MANOR	STREET ADDRESS, CITY, STATE, ZIP CODE 1500 S.E. 24TH ROAD OCALA, FL 34471	

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

0000 - Initial Comments

An Extended Congregate Care monitoring visit was completed on May 12, 2015 at Hampton Manor of Ocala, an assisted living facility. There was no deficient practice noted at that time.