STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	(X3) DATE SURVEY COMPLETED
	AL11932585	**10/05/2018**
NAME OF PROVIDER OR SUPPLIER **FIVE STAR PREMIER RESIDENCES OF POMPANO**	STREET ADDRESS, CITY, STATE, ZIP CODE **1371 SOUTH OCEAN BLVD** **POMPANO BEACH, FL 33062**	

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

0000 - Initial Comments

An unannounced licensure complaint survey, CCR# 2018010264, was conducted on [redacted] at Five Star Premier Residences of Pompano, License # 7702 . The facility had a deficiency identified at the time of the survey.

0180 - Emergency Management - 58A-5.026(1) FAC

Based on interview and record review, the facility failed to provide an approved and up-to-date copy of the Comprehensive Emergency Management Plan (CEMP).

The findings included:

During an interview with the Administrator at approximately 12 PM on , the facility's current CEMP was request. Upon review of the CEMP and approval letter provided by the facility, it was noted that the letter was dated and valid through . As of the date of the survey, the facility had no further information for review indicating the CEMP was current.

During an interview with the Administrator on at 01:46 PM, she stated she had been calling the local agency, but to no avail.
She acknowledged the findings.

Class III