

**AGENCY FOR HEALTH CARE
ADMINISTRATION**

PRINTED: 04/17/2019
FORM APPROVED

STATEMENT OF DEFICIENCIES	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: AL11966931	(X3) DATE SURVEY COMPLETED 04/01/2019
NAME OF PROVIDER OR SUPPLIER HAMPTON COURT ALF	STREET ADDRESS, CITY, STATE, ZIP CODE 7801 NW 45TH COURT LAUDERHILL, FL 33351	
SUMMARY STATEMENT OF DEFICIENCIES (FINDINGS PRECEDED BY TAGS AND REGULATORY IDENTIFYING INFORMATION)		
0000 - Initial Comments An unannounced abbreviated Relicensure survey was conducted on at Hampton Court ALF, License #11043. The facility had deficiencies identified at the time of the survey. 0083 - Training - First Aid and - 58A-5.0191(5) FAC Based on record review and interview, the facility failed to ensure 1 out of 1 staff members has a completed course in First Aid and holds a currently valid CPB card (Staff B). The findings include: Review of Staff B's file (hire date) revealed no documentation contained within the file indicating the staff member had taken a course in First Aid and currently holds a certification card . Review of the facility's staffing schedule for Staff B revealed she works by herself (works 8am -8pm). Staff B is not a licensed nurse or an Emergency Medical Technician/Paramedic. The Designee was given an opportunity to present a valid / First Aid card and was unable to do so. During interview conducted with the Designee on at 12:48 PM, she acknowledge the absence of documentation confirming completion of the First Aid and training. Class III		