

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTIONS		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 345325		(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING		(X3) DATE SURVEY COMPLETED 07/08/2025	
NAME OF PROVIDER OR SUPPLIER THE CARROLTON OF DUNN				STREET ADDRESS, CITY, STATE, ZIP CODE 711 SUSAN TART ROAD , DUNN, North Carolina, 28335			
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)		ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)		(X5) COMPLETION DATE	
F0000	INITIAL COMMENTS A complaint investigation survey was conducted from 07/07/25 through 07/08/25. Event ID# 192Q11. The following intakes were investigated: NC00231022, NC00231041, and NC00229882. 3 of the 31 complaint allegations resulted in deficiency.		F0000				
F0550 SS = D	Resident Rights/Exercise of Rights CFR(s): 483.10(a)(1)(2)(b)(1)(2) §483.10(a) Resident Rights. The resident has a right to a dignified existence, self-determination, and communication with and access to persons and services inside and outside the facility, including those specified in this section. §483.10(a)(1) A facility must treat each resident with respect and dignity and care for each resident in a manner and in an environment that promotes maintenance or enhancement of his or her quality of life, recognizing each resident's individuality. The facility must protect and promote the rights of the resident. §483.10(a)(2) The facility must provide equal access to quality care regardless of diagnosis, severity of condition, or payment source. A facility must establish and maintain identical policies and practices regarding transfer, discharge, and the provision of services under the State plan for all residents regardless of payment source. §483.10(b) Exercise of Rights. The resident has the right to exercise his or her rights as a resident of the facility and as a citizen or resident of the United States.		F0550	[No data entered]		07/09/2025	

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. (See reverse for further instructions.) Except for nursing homes, the findings stated above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation.

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE	TITLE	(X6) DATE
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F0550 SS = D	<p>Continued from page 1</p> <p>§483.10(b)(1) The facility must ensure that the resident can exercise his or her rights without interference, coercion, discrimination, or reprisal from the facility.</p> <p>§483.10(b)(2) The resident has the right to be free of interference, coercion, discrimination, and reprisal from the facility in exercising his or her rights and to be supported by the facility in the exercise of his or her rights as required under this subpart.</p> <p>This REQUIREMENT is NOT MET as evidenced by:</p> <p>Based on observation, record review, and staff and resident interviews, the facility failed to treat residents in a dignified manner by failing to knock on doors or ask permission to enter resident rooms for 3 of 8 residents (Resident #2, Resident #10 and Resident #13) reviewed for dignity. The reasonable person concept was applied to this deficiency as individuals have the expectation of a person knocking and identifying themselves before entering their room.</p> <p>Findings included:</p> <p>1. Resident #2 was admitted to the facility on 8/23/24.</p> <p>Resident #2's most recent Minimum Data Set (MDS) assessment dated 6/4/25, a significant change assessment, revealed he was severely cognitively impaired. He was assessed as usually able to understand others and having some distinct words.</p> <p>During an observation on 7/7/25 at 12:01 PM Nurse Aide (NA) #1 entered Resident #2's room without knocking to deliver his lunch tray.</p> <p>During an interview on 7/7/25 at 12:05 PM NA #1 indicated she did not knock or ask permission to enter Resident #2's room. The NA stated she was aware she should do so and could not articulate why she did not.</p> <p>On 7/8/25 at 12:05 PM NA #1 was observed to enter Resident #2's room without knocking to deliver his lunch tray.</p>		F0550				

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F0550 SS = D	<p>Continued from page 2</p> <p>Attempts to interview Resident #2 were unsuccessful.</p> <p>An interview was conducted with the facility's Wound Nurse on 7/8/25 at 12:10 PM and she stated staff should always knock and introduce themselves when entering a resident's room.</p> <p>During an interview with the Administrator on 7/7/25 at 5:38 PM he stated staff had been trained in resident rights and dignity and stated NA #1 should have knocked and announced herself prior to entering a resident's room.</p> <p>An additional interview was conducted with the Administrator on 7/8/25 at 12:45 PM who stated he personally in-serviced staff on treating residents with dignity and respect since 7/7/25 and was aware NA #1 attended in-services on 7/7/24 and 7/8/25. The Administrator stated the NA should have knocked prior to entering Resident #2's room.</p> <p>2. Resident #10 was admitted to the facility on 2/23/21.</p> <p>Resident #10's most recent Minimum Data Set (MDS) assessment dated 6/20/25, a quarterly assessment, revealed she was assessed as cognitively intact.</p> <p>During an observation on 7/7/25 at 12:02 PM Nurse Aide (NA) #1 entered Resident #10's room without knocking to deliver her lunch tray.</p> <p>During an interview on 7/7/25 at 12:05 PM NA #1 indicated she did not knock or ask permission to enter Resident #10's room. The NA stated she was aware she should do so and could not articulate why she did not.</p> <p>During an observation on 7/8/25 at 12:06 PM NA #1 entered Resident #10's room without knocking to deliver her lunch tray.</p> <p>On 7/8/25 at 12:09 PM Resident #10 was interviewed and could not state how she felt about staff not knocking</p>		F0550				

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F0550 SS = D	<p>Continued from page 3 on her door prior to entrance and instead wanted to talk about her doll.</p> <p>An interview was conducted with the facility's Wound Nurse on 7/8/25 at 12:10 PM and she stated staff should always knock and introduce themselves when entering a resident's room.</p> <p>During an interview with the Administrator on 7/7/25 at 5:38 PM he stated staff had been trained in resident rights and dignity and stated NA #1 should have knocked and announced herself prior to entering a resident's room.</p> <p>An additional interview was conducted with the Administrator on 7/8/25 at 12:45 PM who stated he personally in-serviced staff on treating residents with dignity and respect since 7/7/25 and was aware NA #1 attended in-services on 7/7/24 and 7/8/25. The Administrator stated NA #1 should have knocked prior to entering Resident #10's room.</p> <p>3. Resident #13 was admitted to the facility on 5/26/23.</p> <p>Resident #13's most recent Minimum Data Set (MDS) assessment dated 6/9/25, a quarterly assessment, revealed she was assessed as having moderate cognitive impairment. She was assessed as being understood and being able to understand others.</p> <p>During an observation on 7/8/25 at 12:05 PM Nurse Aide (NA) #1 entered Resident #13's room without knocking to deliver her lunch tray.</p> <p>An attempted interview was conducted with Resident #13 on 7/8/25 at 12:15 PM, The resident did not respond to any questions asked.</p> <p>During a previous interview on 7/7/25 at 12:05 PM NA #1 indicated she did not knock or ask permission to enter resident rooms. The NA stated she was aware she should do so and could not articulate why she did not.</p> <p>An interview was conducted with the facility's Wound</p>			F0550			

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F0550 SS = D	<p>Continued from page 4</p> <p>Nurse on 7/8/25 at 12:10 PM and she stated staff should always knock and introduce themselves when entering a resident's room.</p> <p>An interview was conducted with the Administrator on 7/8/25 at 12:45 PM who stated he personally in-serviced staff on treating residents with dignity and respect since 7/7/25 and was aware NA #1 attended in-services on 7/7/24 and 7/8/25. The Administrator stated the NA should have knocked prior to entering Resident #13's room.</p>		F0550				