

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 165455	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED 12/23/2025
NAME OF PROVIDER OR SUPPLIER Accura Healthcare of Carroll		STREET ADDRESS, CITY, STATE, ZIP CODE 2241 North West Street Carroll, IA 51401	

For information on the nursing home's plan to correct this deficiency, please contact the nursing home or the state survey agency.

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (Each deficiency must be preceded by full regulatory or LSC identifying information)
F 0725 Level of Harm - Minimal harm or potential for actual harm Residents Affected - Few	Provide enough nursing staff every day to meet the needs of every resident; and have a licensed nurse in charge on each shift. (continued on next page)

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 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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<p>F 0725</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Few</p>	<p>**NOTE- TERMS IN BRACKETS HAVE BEEN EDITED TO PROTECT CONFIDENTIALITY** Based on clinical record review, facility document review, staff interviews and resident interviews, the facility failed to answer call lights in a timely manner for 4 of 4 residents reviewed (Resident #3, #4, #5 and #6). The facility reported a census of 52 residents. Findings include: 1) According to the Minimum Data Set (MDS) assessment dated [DATE], Resident #3 scored 15 on the Brief Interview for Mental Status (BIMS) indicating no cognitive impairment. The MDS documented the resident was dependent on staff for toileting hygiene, showering, dressing, rolling left and right, transfers and mobility in the wheelchair. The resident's diagnoses included diabetes, a fracture (ankle), and chronic obstructive lung disease. On 12/22/25 at 3:11 p.m. Resident #3 stated she didn't keep time for call lights, but had to wait a long time on weekends to get the light answered. A review of Resident #3's call light logs for the previous 2 weekends revealed: On 12/14/25 at 8:31 a.m. a call light of 31 minutes. On 12/14/25 at 10:32 a.m. a call light of 22 minutes. On 12/14/25 at 11:27 a.m. a call light of 24 minutes. On 12/14/25 at 12:42 p.m. a call light of 23 minutes. On 12/20/25 at 9:24 a.m. a call light of 24 minutes. On 12/20/25 at 10:11 a.m. a call light of 30 minutes. On 12/20/25 at 12:31 p.m. a call light of 30 minutes. On 12/20/25 at 3:24 p.m. a call light of 24 minutes. On 12/21/25 at 9:44 a.m. a call light of 38 minutes. On 12/21/25 at 11:29 a.m. a call light of 29 minutes. On 12/21/25 at 1:24 p.m. a call light of 39 minutes. On 12/21/25 at 4:18 p.m. a call light of 27 minutes. On 12/21/25 at 5:44 p.m. a call light of 39 minutes. 2) According to the MDS assessment dated 12/10/25, Resident #4 scored 15 on the BIMS indicating no cognitive impairment. The MDS documented the resident was dependent on staff for toileting hygiene. The resident's diagnoses included diabetes, a stroke, emphysema, anxiety and depression. On 12/23/25 at 8:43 a.m. Resident #4 stated call lights were bad on the weekends. It could take a long time to get help. She said she could do some things herself, but she needed help with others. A review of Resident #4's call light logs for the previous 2 weekends revealed: On 12/13/25 at 6:48 a.m. a call light time of 39 minutes. On 12/20/25 at 6:38 a.m. a call light time of 32 minutes. On 12/21/25 at 12:35 a.m. a call light time of 17 minutes. On 12/21/25 at 6:56 a.m. a call light time of 20 minutes. 3) According to the MDS assessment dated [DATE], Resident #5 scored 9 on the BIMS indicating moderate cognitive impairment. The MDS documented the resident was dependent on staff for toileting hygiene, lower body dressing, personal hygiene, and bed to chair and chair to bed transfers. The resident's diagnoses included heart failure, diabetes, non-Alzheimer's dementia, and presence of an automatic cardiac defibrillator. On 12/23/25 at 8:55 a.m. Resident #5 stated it took too long to get help on weekends. They didn't answer the call light right away, then say they had to get help and it took longer. A review of Resident #5's call light logs for the previous 2 weekends revealed: On 12/20/25 at 8:53 a.m. a call light time of 37 minutes. On 12/20/25 at 12:28 p.m. a call light time of 39 minutes. On 12/20/25 at 7:32 p.m. a call light time of 26 minutes. 4) According to the MDS assessment dated [DATE], Resident #6 scored 15 on the BIMS indicating no cognitive impairment. The MDS documented the resident was dependent on staff for toileting hygiene, and lower body dressing, and required substantial/maximal assist with rolling left to right, and bed to chair and chair to bed transfers. The resident's diagnoses included heart failure, diabetes, non-Alzheimer's dementia, and presence of an automatic cardiac defibrillator. On 12/23/25 at 9:10 a.m. Resident #6 stated call light response is slower on weekends. She said she waited 40 minutes this past weekend. A review of Resident #6's call light logs for the previous 2 weekends revealed: On 12/13/25 at 1:24 p.m. a call light time of 20 minutes. On 12/14/25 at 4:53 a.m. a call light time of 19 minutes. On 12/14/25 at 6:43 p.m. a call light time of 19 minutes. On 12/20/25 at 12 p.m. a call light time of 39 minutes. On 12/20/25 at 12:37 p.m. a call light time of 36 minutes. On 12/23/25 at 11:33 a.m. the Administrator indicated staff knew who/what call light was on when she pointed out monitors that showed the call lights on, as well as how long the light had been on. On 12/23/25 at 1:15 p.m. the Administrator stated they did not have a call light policy. They followed the state standard, and call lights were expected to be answered within 15 minutes.</p>		