

Department of Health & Human Services  
Centers for Medicare & Medicaid Services

Printed: 06/25/2025  
Form Approved OMB  
No. 0938-0391

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:  675479	(X2) MULTIPLE CONSTRUCTION A. Building B. Wing	(X3) DATE SURVEY COMPLETED  12/22/2022
NAME OF PROVIDER OR SUPPLIER  Franklin Heights Nursing & Rehabilitation		STREET ADDRESS, CITY, STATE, ZIP CODE  223 S Resler El Paso, TX 79912	
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 0880  Level of Harm - Minimal harm or potential for actual harm  Residents Affected - Some	<p>Provide and implement an infection prevention and control program.</p> <p>34486</p> <p>Based on interview and record review, the facility failed to maintain an infection prevention and control program designed to help prevent the development and transmission of communicable diseases and infections for four (CMA A, NA B, Housekeeper C, and Admissions Employee D) of five employees reviewed for infection control.</p> <p>The facility failed to have documentation that CMA A, Housekeeper C, and Admissions Employee D had completed annual tuberculosis (TB) screening.</p> <p>The facility failed to have documentation that three employees (CMA A, NA B, and Housekeeper C) were educated about and offered the influenza vaccine.</p> <p>The facility failed to have documentation that one employee (CMA A) was educated about and offered COVID 19 vaccine.</p> <p>These failures could put residents at risk of contracting communicable diseases and infections.</p> <p>Findings include:</p> <p>Record review of CMA A's Resident/Employee Record of TB Tests &amp; Immunization Records, revised 02/08/2003, documented that CMA A was hired on 12/01/2081. Review of CMA A's influenza immunization, revised 02/08/2003, and Influenza Informed Consent forms, revised 2/5/2007, documented that she was last educated and given the option to accept or decline the influenza immunization on 09/11/2020. It documented that CMA A was last screened for TB annually on 8/16/2017. No documentation was provided demonstrating that CMA A was educated and given the option to accept or decline the COVID-19 vaccine.</p> <p>In an interview on 12/21/2022 at 8:55 AM, CMA A stated that the facility had offered the flu (influenza) shot in the past and also offered the COVID-19 vaccine. She said that there was something to read about the risks of getting the vaccines and she was offered the opportunity to accept or decline the shots. She did not recall the dates when this information was provided.</p> <p>Record review on 12/22/2022 at 10:00 AM of NA B's Resident/Employee Record of TB Tests &amp; Immunization Records, revised 02/08/2003, documented that NA B was hired on 12/01/1981. Review of NA B's influenza immunization revised 02/08/2003 documented that she was last educated and given the option to accept or decline the influenza immunization on 09/10/2020.</p> <p>(continued on next page)</p>		

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 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>Record review on 12/22/2022 at 10:10 AM of Housekeeper C's Resident/Employee Record of TB Tests &amp; Immunization Records, revised 02/08/2003, documented that Housekeeper C was hired on 06/20/2007. Review of Housekeeper C's influenza immunization revised 02/08/2003 and Influenza Informed Consent forms revised 2/5/2007 documented that she was educated and given the opportunity to accept or decline the flu vaccine on 12/22/2022. Review of Housekeeper C's Influenza Consent form, revised 2/5/2007, documented that prior to 12/22/2022, she was last educated and given the option to accept or decline the influenza immunization on 11/10/2017. Housekeeper C's Resident/Employee Record of TB Tests &amp; Immunization Records, revised 02/08/2003, documented that she was last screened for TB on 10/02/2017. There was no other documentation indicating that she had been screened for tuberculosis since then.</p> <p>In an interview on 12/21/2022 at 9:11 AM, Housekeeper C said that she had been offered the flu vaccine but that no education about the risks and possible side effects was provided. She was not able to remember when she had been offered the flu vaccine.</p> <p>Record review of Admissions Employee D's Influenza Informed Consent form, revised 2/5/2007, documented that she was educated and given the opportunity to accept or decline flu vaccine on 12/22/2022. Review of Admissions Employee D's Employee Tuberculosis Screening Form indicated that she had been screened for TB, but the form was not dated. No other documentation was provided that indicated that Admissions Employee D had been screened for TB at any point.</p> <p>In an interview on 12/22/2022 at 9:00 AM, the Human Resources Coordinator said that CMA A was hired on 12/01/1981, NA B was hired on 01/14/2020, Housekeeper C was hired on 06/20/2007, and Admissions Employee D was hired on 02/04/2020.</p> <p>In an interview on 12/22/2022 at 1:32 PM, the facility's Infectious Disease Preventionist said that employees were screened for TB upon hire using the PPD (a test for tuberculosis), and thereafter were screened annually using a paper-and-pencil symptom questionnaire. She stated that new employees were educated and offered the Hepatitis B series, once upon employment. She stated that during the annual influenza season, from October to March, all employees were educated about the risks associated with the influenza vaccine and given the opportunity to accept or decline the vaccine. She stated that the facility did offer COVID-19 vaccines to employees and had clinics in the past, so vaccines could be administered in-house. She said that employees were educated about the risks of COVID-19 vaccinations and given the opportunity to accept or decline. She stated that all documentation available regarding TB screenings, and education/opportunities to accept or decline vaccinations for the selected employees had been provided.</p> <p>In an interview on 12/22/2022 at 2:54 PM, the Administrator said that if employees were not screened for TB and if the vaccines were not offered to employees there was a possibility that others, including residents, would get sick.</p> <p>In an interview on 12/22/2022 at 4:02 PM, Human Resources Specialist E said that she did not know what had happened to the employee files that resulted in the absence of documentation of TB screenings, or acceptance or declination of vaccination for influenza or COVID-19. She stated she was conducting an audit to in order to develop a corrective action plan to bring the facility into compliance with regulations. Copies of any documentation pertaining to TB screening, or vaccination acceptance or declination for influenza or COVID-19 for CMA A, NA B, Housekeeper C or Admissions Employee D were requested.</p> <p>(continued on next page)</p>		

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<p>F 0880</p> <p>Level of Harm - Minimal harm or potential for actual harm</p> <p>Residents Affected - Some</p>	<p>In an interview on 12/22/2022 at 4:35 PM, the facility Infectious Disease Preventionist stated any documentation of employee TB screens for CMA A, NA B, Housekeeper C or Admissions Employee D and any documentation related to influenza or COVID-19 vaccinations for CMA A, NA B, Housekeeper C or Admissions Employee D were requested.</p> <p>Record review of the facility Policy on Vaccine-Preventable Diseases (undated) documented in part that the purpose of the policy was to protect facility residents from vaccine preventable diseases. The vaccine preventable diseases covered by the policy would include those on the most current recommendations of the Advisory Committee on Immunization Practices of the Centers for Disease Control and Prevention. Among recommended vaccines were influenza which the facility would provide to employees who provide direct resident care. The facility would maintain documentation on vaccines for facility staff.</p> <p>Record review of the facility Infection Prevention and Control Assessment Tool for Long-Term Care Facilities, dated 11/30/2022, documented in part that the facility conducted baseline TB screening for all new personnel and annual TB screening for all personnel. The facility offered all personnel influenza vaccination annually and maintained written records of personnel influenza vaccination from the most recent influenza season.</p> <p>Record review of the facility policy Mandatory COVID-19 Vaccination Policy dated 05/04/2022 documented in part that the facility would distribute the COVID-19 Intentions of Vaccination Form to HCP who had not provided documentation of COVID-19 vaccination. The facility would secure and maintain documentation of COVID-19 vaccination status for all HCP.</p>		