

# Inspections Report

## **Nursing Facility Emergency Preparedness**

---

Paradigm at Woodwind Lakes



**Inspector  
General**

Texas Health  
and Human Services

October 12, 2022  
OIG Report No. INS-23-008



# Nursing Facility Emergency Preparedness

## Paradigm at Woodwind Lakes

## Results in Brief

### Why OIG Conducted This Inspection

The Texas Health and Human Services (HHS) Office of Inspector General Audit and Inspections Division (OIG Inspections) conducted an inspection of Paradigm at Woodwind Lakes (Paradigm), a skilled nursing facility.

In 2020, the U.S. Department of Health and Human Services Office of Inspector General conducted a review of selected nursing facilities in Texas to evaluate compliance with life safety and emergency preparedness requirements. The report identified noncompliance with emergency preparedness requirements related to emergency preparedness plans, emergency supplies, emergency power, communication plans, and emergency preparedness plan training.

OIG Inspections initiated this inspection because of potential health and safety concerns caused by inadequate emergency preparedness programs at nursing facilities.

### Key Results

Paradigm at Woodwind Lakes' (Paradigm) emergency preparedness plans and processes complied with 20 of 23 (87 percent) state and federal emergency preparedness requirements for nursing facilities reviewed as part of this inspection. Paradigm had an updated emergency preparedness plan and a communication plan. Paradigm also had updated procedures related to alternative power sources and subsistence needs for residents and staff. During a site visit to Paradigm's facility, inspectors saw multiple emergency preparedness elements, including a generator used as an alternate energy source and supplies for resident and staff subsistence. However, Paradigm did not consistently comply with three emergency preparedness requirements. Specifically, Paradigm did not:

- Document initial employee training on emergency preparedness.
- Document all exercises or drills to test the emergency preparedness plan.
- Confirm review and update of the emergency preparedness training and testing program.

## Summary of Review

The inspection objective was to determine whether Paradigm followed select state and federal requirements for emergency preparedness.

The inspection scope included Paradigm's (a) documentation of calendar year 2021 emergency preparedness training and testing and (b) emergency preparedness program in place as of May 2022.

## Recommendations

Paradigm should:

- Ensure all employees complete emergency preparedness plan training within 30 days of assuming applicable job duties and maintain the completion documentation in each employee's file.
- Ensure it maintains documentation of exercises to test its emergency preparedness plan at least twice per year.
- Review and update its training and testing program at least annually and document the date it reviews and updates the program.

For more information, contact: [OIGInspectionsReports@hhs.texas.gov](mailto:OIGInspectionsReports@hhs.texas.gov)

# Table of Contents

|   |           |
|---|-----------|
| <b>Inspection Overview .....</b>  | <b>1</b>  |
| Overall Results   | 1         |
| Objective   | 2         |
| Scope   | 2         |
| Background  | 2         |
| What Prompted This Inspection   | 3         |
| <b>Detailed Results .....</b>   | <b>4</b>  |
| Observation 1: Paradigm Did Not Consistently Document<br>Initial Emergency Preparedness Plan Training<br>Completions Within the Required Time Frame | 4         |
| Observation 2: Paradigm Did Not Consistently Maintain<br>Documentation of Exercises to Test<br>Its Emergency Preparedness Plan as Required          | 5         |
| Observation 3: Paradigm Could Not Confirm When<br>Its Emergency Preparedness Training<br>and Testing Program Was Reviewed and Updated               | 6         |
| <b>Appendix A: Methodology, Standards, and Criteria .....</b>   | <b>7</b>  |
| <b>Appendix B: Summary of Recommendations .....</b>   | <b>9</b>  |
| <b>Appendix C: Related Reports .....</b>  | <b>10</b> |
| <b>Appendix D: Resources for Additional Information .....</b>   | <b>11</b> |
| <b>Appendix E: Report Team and Distribution .....</b>   | <b>12</b> |
| <b>Appendix F: OIG Mission, Leadership, and Contact Information....</b>   | <b>14</b> |

# Inspection Overview

## Overall Results

Paradigm at Woodwind Lakes' (Paradigm) emergency preparedness plans and processes complied with 20 of 23 (87 percent) state and federal emergency preparedness requirements for nursing facilities reviewed as part of this inspection. Paradigm had an updated emergency preparedness plan and a communication plan. Paradigm also had updated procedures related to alternative power sources and subsistence needs for residents and staff. During a site visit to Paradigm's facility, inspectors saw multiple emergency preparedness elements, including a generator used as an alternate energy source and supplies for resident and staff subsistence. However, Paradigm did not consistently comply with three emergency preparedness requirements. Specifically, Paradigm did not:

- Document initial employee training on emergency preparedness.
- Document all exercises or drills to test the emergency preparedness plan.
- Confirm review and update of the emergency preparedness training and testing program.

The Texas Health and Human Services (HHS) Office of Inspector General (OIG) Audit and Inspections Division (OIG Inspections) offered recommendations to Paradigm, which, if implemented, will help ensure that Paradigm follows selected state and federal requirements for emergency preparedness. Inspection findings identified in this report (a) may be referred to the Texas Health and Human Services Commission (HHSC) for potential pursuit of enforcement remedies or (b) may be subject to OIG administrative enforcement measures,<sup>1</sup> including administrative penalties.<sup>2</sup>

OIG Inspections presented preliminary inspection results, issues, and recommendations to Paradigm in a draft report dated October 3, 2022. Paradigm agreed with the inspection recommendations and elected not to provide a management response.

---

<sup>1</sup> 1 Tex. Admin. Code § 371.1603 (May 20, 2020).

<sup>2</sup> Tex. Hum. Res. Code § 32.039 (Apr. 2, 2015).

OIG Inspections thanks the management and staff at Paradigm for their cooperation and assistance during this inspection.

## Objective

The inspection objective was to determine whether Paradigm followed select state and federal requirements for emergency preparedness.

## Scope

The inspection scope included Paradigm's (a) documentation of calendar year 2021 emergency preparedness training and testing and (b) emergency preparedness program in place as of May 2022.

## Background

Paradigm, owned by OakBend Medical Center and managed by Woodwind Lakes Nursing & Rehabilitation, LLC, is a skilled nursing facility located in Houston, Texas.

Nursing facilities are required to establish and maintain an emergency preparedness program,<sup>3,4</sup> which includes, but is not limited to, the following emergency preparedness elements:

- Emergency preparedness plan
- Policies and procedures
- Communication plan
- Training and testing program
- Emergency and standby power systems

Each nursing facility's emergency preparedness plan must address emergency events identified by the facility's risk assessment, such as heating or cooling system failures, fires, power outages, extreme winter conditions, hurricanes, and tornadoes.

HHS Long Term Care Regulation (LTCR) is responsible for ensuring nursing facilities comply with state and federal laws and regulations. LTCR provides training and guidance, conducts annual emergency preparedness surveys, and performs a follow-up review of deficiencies identified to ensure compliance.

---

<sup>3</sup> 42 C.F.R. § 483.73 (Nov. 29, 2019).

<sup>4</sup> 26 Tex. Admin. Code § 554.1914 (Jan. 15, 2021).

## What Prompted This Inspection

In 2020, the U.S. Department of Health and Human Services Office of Inspector General conducted a review of selected nursing facilities in Texas to evaluate compliance with life safety and emergency preparedness requirements.<sup>5</sup> The report identified noncompliance with emergency preparedness requirements related to emergency preparedness plans, emergency supplies, emergency power, communication plans, and emergency preparedness plan training.

OIG Inspections initiated this inspection because of potential health and safety concerns caused by inadequate emergency preparedness programs at nursing facilities.

---

<sup>5</sup> U.S. Department of Health and Human Services Office of Inspector General, *Life Safety and Emergency Preparedness Deficiencies Found at 18 of 20 Texas Nursing Homes*, A-06-19-08001 (Feb. 6, 2020).

# Detailed Results

OIG Inspections conducted a site visit to Paradigm’s facility on May 24, 2022, and reviewed Paradigm’s emergency preparedness plans and processes for compliance with 23 state and federal emergency preparedness requirements for nursing facilities related to:

- Emergency preparedness plans
- Emergency supplies and power
- Emergency communication plans
- Emergency preparedness plan training and testing

Paradigm was compliant with requirements including:

- Processes for ensuring emergency power systems (a) were maintained, inspected, and tested and (b) address the power needs for key systems during an emergency.
- Completing a risk assessment that utilized an all-hazards approach.
- Policies and procedures that addressed (a) the subsistence needs for residents and staff and (b) emerging infectious diseases.

The following sections of this report provide additional detail about the findings of noncompliance observed by OIG Inspections.

## **Observation 1: Paradigm Did Not Consistently Document Initial Emergency Preparedness Plan Training Completions Within the Required Time Frame**

Paradigm did not consistently document that employees completed initial emergency preparedness plan training as applicable for assigned job duties. Texas Administrative Code requires training for staff on emergency preparedness plan responsibilities within 30 days of an employee assuming applicable job duties.<sup>6</sup>

---

<sup>6</sup> 26 Tex. Admin. Code § 554.1914(e)(1) (Jan. 15, 2021).



Nursing facilities must also (a) provide training in emergency preparedness policies and procedures and (b) maintain documentation of the training.<sup>7</sup>

OIG Inspections selected 10 employees to review training records. Paradigm's training logs for one employee hired on May 3, 2021, indicated completion of emergency preparedness plan training on May 5, 2022, which was more than a year after the employee's hire date. For the nine remaining employees reviewed, Paradigm did not maintain initial emergency preparedness plan training documentation.

Paradigm's internal policies and procedures require new employees to complete its orientation program, which includes emergency preparedness plan training for all employees regardless of job duties.

Paradigm asserted that it uses an orientation checklist to document employee completion of emergency preparedness plan training; however, Paradigm lost these checklists due to staff turnover during the past several years.

Employees that do not receive timely emergency preparedness plan training may pose a safety risk to themselves and residents in the event of a fire, hurricane evacuation, or other emergency

### **Recommendation 1**

Paradigm should (a) ensure that all employees complete emergency preparedness plan training within 30 days of assuming applicable job duties and (b) maintain the completion documentation in each employee's file.

### **Observation 2: Paradigm Did Not Consistently Maintain Documentation of Exercises to Test Its Emergency Preparedness Plan as Required**

Paradigm did not consistently maintain documentation of exercises to test its emergency preparedness plan. At least twice per year, each nursing facility must (a) conduct exercises to test its emergency preparedness plan, including unannounced staff drills using the emergency procedures, and (b) maintain documentation of these exercises.<sup>8</sup>

---

<sup>7</sup> 42 C.F.R. § 483.73(d)(1) (Nov. 29, 2019).

<sup>8</sup> 42 C.F.R. § 483.73(d)(2) (Nov. 29, 2019).

OIG Inspections reviewed Paradigm’s calendar year 2021 and 2022 testing records, which documented that Paradigm conducted one exercise to test its emergency preparedness plan in May 2022, which was after the announcement of the inspection in April 2022. Paradigm asserted that a second exercise was conducted in March 2022; however, it did not maintain documentation of this exercise.

Documentation of emergency preparedness plan testing exercises allows each nursing facility to revise its emergency preparedness plan as necessary based on the facility’s response to the test.

## **Recommendation 2**

Paradigm should ensure it maintains documentation of exercises to test its emergency preparedness plan at least twice per year.

### **Observation 3: Paradigm Could Not Confirm When Its Emergency Preparedness Training and Testing Program Was Reviewed and Updated**

Paradigm could not confirm when its training and testing program was last reviewed and updated, as required. Each nursing facility is required to develop and maintain an emergency preparedness training and testing program, which it must review and update at least annually.<sup>9</sup>

Paradigm asserted that, due to an administration change and staff turnover, it could not confirm the date it last reviewed its training and testing program.

Without a current and updated training and testing program, nursing facility staff may not have all the appropriate guidance in the event of an emergency.

## **Recommendation 3**

Paradigm should review and update its training and testing program at least annually and document the date it reviews and updates the program.

---

<sup>9</sup> 42 C.F.R. § 483.73(d) (Nov. 29, 2019).

# Appendix A: Methodology, Standards, and Criteria

## Detailed Methodology

To achieve its inspection objective, OIG Inspections collected information through (a) discussions and interviews with LTCR staff and Paradigm staff, (b) a site visit to Paradigm's facility in Houston, Texas, on May 24, 2022, and (c) a review of:

- Regulations, policies, and procedures that address the objective.
- Paradigm's emergency preparedness plan; emergency supplies and power; communication plan; and training and testing records.

OIG Inspections selected the emergency preparedness requirements to test as part of this inspection after (a) discussions with LTCR and (b) review of prior deficiencies identified in both LTCR reviews and the U.S. Department of Health and Human Services Office of Inspector General's review of selected nursing facilities in Texas to evaluate compliance with life safety and emergency preparedness requirements.

In March 2022, there were 1,154 nursing facilities participating in Texas Medicaid. To choose the nursing facility to inspect, OIG Inspections considered the following criteria:

- Location of the nursing facility.
- Date LTCR last inspected the nursing facility.
- Nursing facility incidents reported to HHS.

## Standards

OIG Inspections conducts inspections of Texas HHS programs, systems, and functions. Inspections are designed to be expeditious, targeted examinations into specific programmatic areas to identify systemic trends of fraud, waste, or abuse. Inspection reports present factual data accurately, fairly, and objectively, and present findings, conclusions, and recommendations in a persuasive manner to strengthen program effectiveness and efficiency. OIG Inspections conducted the inspection in accordance with *Quality Standards for Inspection and Evaluation* issued by the Council of the Inspectors General on Integrity and Efficiency.

## Criteria

OIG Inspections used the following criteria to evaluate the information provided:

- 42 C.F.R. § 483.73 (2019)
- 26 Tex. Admin. Code § 554.1914 (2021)

# Appendix B: Summary of Recommendations

Table B.1: Summary of Recommendations to Paradigm

| No. | Recommendation  |
|-----|---|
| 1   | Paradigm should (a) ensure that all employees complete emergency preparedness plan training within 30 days of assuming applicable job duties and (b) maintain the completion documentation in each employee's file. |
| 2   | Paradigm should ensure it maintains documentation of exercises to test its emergency preparedness plan at least twice per year.   |
| 3   | Paradigm should review and update its training and testing program at least annually and document the date it reviews and updates the program.  |

Source: OIG Inspections

## Appendix C: Related Reports

- Nursing Facility Emergency Preparedness: Arden Place of Houston, [INS-23-006](#), October 10, 2022
- Nursing Facility Emergency Preparedness: Southeast Nursing & Rehabilitation Center, [INS-23-005](#), October 10, 2022
- Nursing Facility Emergency Preparedness: Alamo Heights Health and Rehabilitation Center, [INS-23-004](#), October 4, 2022
- Nursing Facility Emergency Preparedness: Focused Care at Westwood, [INS-23-003](#), October 4, 2022
- Nursing Facility Emergency Preparedness: Villa Toscana at Cypress Woods, [INS-23-002](#), September 28, 2022
- Nursing Facility Emergency Preparedness: Oak Park Nursing & Rehabilitation Center, [INS-23-001](#), September 28, 2022
- Nursing Facility Emergency Preparedness: Mystic Park Nursing and Rehabilitation Center, [INS-22-010](#), August 25, 2022

## Appendix D: Resources for Additional Information

The following resources provide additional information about the topics covered in this report.

**To view the U.S. Department of Health and Human Services Office of Inspector General Report A-06-19-08001, Life Safety and Emergency Preparedness Deficiencies Found at 18 of 20 Texas Nursing Homes:**

“Life Safety and Emergency Preparedness Deficiencies Found at 18 of 20 Texas Nursing Homes,” U.S. Department of Health and Human Services Office of Inspector General,  
<https://oig.hhs.gov/oas/reports/region6/61908001.asp>  
(accessed August 24, 2022)

**For more information on HHS emergency preparedness:**

“Emergency Preparedness,” HHS,  
<https://hhsconnection.hhs.texas.gov/building-services/safety-security/emergency-preparedness> (accessed August 24, 2022)

**For more information on Paradigm at Woodwind Lakes:**

Homepage, Paradigm at Woodwind Lakes,  
<http://paradigmatwoodwindlakes.com/> (accessed August 24, 2022)

# Appendix E: Report Team and Distribution

## Report Team

OIG staff members who contributed to this inspection report include:

- Kacy J. VerColen, CPA, Deputy Inspector General of Audit and Inspections
- Bruce Andrews, CPA, CISA, Director of Inspections
- James Aldridge, Manager of Inspections
- Marco Diaz, Lead Inspector
- Gabriella Berger, Inspector
- Ashley Rains, CFE, Senior Audit Operations Analyst

## Report Distribution

### Health and Human Services

- Cecile Erwin Young, Executive Commissioner
- Kate Hendrix, Chief of Staff
- Maurice McCreary, Jr., Chief Operating Officer
- Jordan Dixon, Chief Policy and Regulatory Officer
- Karen Ray, Chief Counsel
- Michelle Alletto, Chief Program and Services Officer
- Nicole Guerrero, Chief Audit Executive
- Jose Garcia, Deputy Director of Compliance Division
- Stephen Pahl, Deputy Executive Commissioner for Regulatory Services
- Michelle Dionne-Vahalik, Associate Commissioner for Long Term Care Regulation

### Paradigm at Woodwind Lakes

- Matthew Lloyd, Regional Director of Operations
- Jennifer Palacios, Administrator



- Patrick Kuku, Director of Nursing
- Keith Brossette, Manager of Nutritional Services

# Appendix F: OIG Mission, Leadership, and Contact Information

The mission of OIG is to prevent, detect, and deter fraud, waste, and abuse through the audit, investigation, and inspection of federal and state taxpayer dollars used in the provision and delivery of health and human services in Texas. The senior leadership guiding the fulfillment of OIG's mission and statutory responsibility includes:

- Sylvia Hernandez Kauffman, Inspector General
- Audrey O'Neill, Principal Deputy Inspector General, Chief of Audit and Inspections
- Susan Biles, Chief of Staff, Chief of Policy and Performance
- Erik Cary, Chief Counsel
- Christine Maldonado, Chief of Operations and Workforce Leadership
- Steve Johnson, Chief of Investigations and Reviews

## To Obtain Copies of OIG Reports

- OIG website: [ReportTexasFraud.com](http://ReportTexasFraud.com)

## To Report Fraud, Waste, and Abuse in Texas HHS Programs

- Online: <https://oig.hhs.texas.gov/report-fraud-waste-or-abuse>
- Phone: 1-800-436-6184

## To Contact OIG

- Email: [OIGCommunications@hhs.texas.gov](mailto:OIGCommunications@hhs.texas.gov)
- Mail: Texas Health and Human Services  
Office of Inspector General  
P.O. Box 85200  
Austin, Texas 78708-5200
- Phone: 512-491-2000