September 6, 2017

Dr. Soraya M. Coley, President  
California State Polytechnic University, Pomona  
3801 West Temple Avenue  
Pomona, CA 91768

Dear Dr. Coley:

Subject: Audit Report 17-03, Student Disability Support,  
California State Polytechnic University, Pomona

We have completed an audit of Student Disability Support as part of our 2017 Audit Plan, and the final report is attached for your reference. The audit was conducted in accordance with the Institute of Internal Auditors’ International Standards for the Professional Practice of Internal Auditing.

I have reviewed the management response and have concluded that it appropriately addresses our recommendations. The management response has been incorporated into the final audit report, which has been posted to the Office of Audit and Advisory Services’ website. We will follow-up on the implementation of corrective actions outlined in the response and determine whether additional action is required.

Any observations not included in this report were discussed with your staff at the informal exit conference and may be subject to follow-up.

I wish to express my appreciation for the cooperation extended by the campus personnel over the course of this review.

Sincerely,

Larry Mandel  
Vice Chancellor and Chief Audit Officer

c: Timothy P. White, Chancellor
EXECUTIVE SUMMARY

OBJECTIVE

The objectives of the audit were to review operational and administrative controls related to support for students with disabilities, as well as to review compliance with relevant federal and state laws and regulations, Trustee policy, systemwide directives, and campus policies and procedures.

CONCLUSION

We found the control environment for the areas reviewed to be in need of major improvement.

Based on the results of the work performed within the scope of the audit, the operational and administrative controls for student disability support as of June 9, 2017, were unlikely to provide reasonable assurance that risks were being managed and objectives were met.

Our review indicated that campus administration of disabled student services could be improved with regard to overall governance and oversight. We noted that the campus had not clearly defined the roles and responsibilities of the Americans with Disabilities Act (ADA) coordinator and the committees with designated oversight of disabled student affairs. We also noted that the Disabled Resource Center (DRC) was not adequately tracking critical information, such as the number and nature of informal complaints, or the frequency of and justification for denying accommodations in some cases. Our review also noted that the campus was not keeping its ADA transition plan current and that emergency procedures for disabled individuals needed improvement. Further, we noted inconsistencies in the application of disability verification procedures.

Specific observations, recommendations, and management responses are detailed in the remainder of this report.
OBSERVATIONS, RECOMMENDATIONS, AND RESPONSES

1. ADA COORDINATOR RESPONSIBILITIES

OBSERVATION

The campus did not have a comprehensive written description of the role and responsibilities of the campus ADA coordinator.

The ADA requires that every public entity that employs 50 or more people designate at least one employee to coordinate efforts to comply with and carry out its responsibilities under the ADA. It further mandates that the name, office address, and telephone number of the ADA coordinator be readily available to all interested individuals.

Although the campus had named an ADA coordinator and written a brief summary of her responsibilities, it did not have a comprehensive description addressing the following elements, as described by the California Department of Rehabilitation:

- Coordination and development of ongoing efforts for full ADA compliance, including communication of ADA requirements and consultation with managers who have functional responsibility for certain ADA requirements.

- Investigations of complaints alleging noncompliance with the ADA or any action prohibited under the ADA.

- Provision of training to all stakeholders.

- Participation in the campus disability advisory committee to facilitate policy formation and review existing policies, such as those that address reasonable accommodation.

- Coordination of updates to the transition plan and other programs meant to identify and remove access barriers.

- Development of processes for prompt fulfillment of requests for alternative formats, interpretation services, and other communication access needs.

A clear and comprehensive description of the role and responsibilities of the ADA coordinator provides greater assurance of compliance and decreases the risk of discriminatory practices.

RECOMMENDATION

We recommend that the campus develop a written description of the role and responsibilities of the ADA coordinator, incorporating the California Department of Rehabilitation description of the position.
MANAGEMENT RESPONSE

We concur. The campus will develop a written description of the role and responsibilities of the ADA coordinator, incorporating the California Department of Rehabilitation description of the position.

Expected completion date: November 1, 2017

2. ACCESS AND COMPLIANCE TEAM COMMITTEE

OBSERVATION

Administration of the Access and Compliance Team (ACT) and other oversight committees needed improvement.

Systemwide policies addressing the rights of students with disabilities require campuses to develop two committees, as follows:

- Executive Order (EO) 926, *The California State University Policy on Disability Support and Accommodations*, requires campuses to establish a committee to discuss, monitor, and evaluate campus-specific issues relating to compliance with the ADA. The policy specifically outlines membership composition requirements.

- Coded memorandum Academic Affairs (AA) 2014-08, *Policy for the Provision of Accommodations and Support Services to Students with Disabilities*, requires that each campus establish an advisory committee on services to students with disabilities to assist in the evaluation of current campus policies and procedures relating to students with disabilities and to develop plans and recommend priorities relating to programs and services for students with disabilities. The memo also states that this committee may be a stand-alone committee or may be the same as, or an ad hoc committee of, the committee mandated by EO 926.

Regarding the committee requirements, we found that:

- The ACT governing document, created in 2009, had not been formally adopted and approved and needed updating to reflect current roles and responsibilities.

- The ACT governing document indicated that the campus intended to combine the two committees, as allowed in AA-2014-08, but did not address the requirement to evaluate policies, as outlined in EO 926 and AA-2014-08.

- The ACT did not include students or representatives from human resources, procurement, and business and finance, as required by EO 926.

Following systemwide policy with regard to ADA oversight committees provides greater assurance that campus practices will be in compliance with ADA requirements to provide equal access to individuals with disabilities.
RECOMMENDATION

We recommend that the campus:

a. Formally adopt a charter or other governing document that outlines the roles and responsibilities of the ACT, ensuring that it includes all requirements outlined in systemwide policies.

b. Ensure that the charter clearly states whether the campus intends to combine the two required committees into one.

c. Identify and appoint ACT members in accordance with EO 926.

MANAGEMENT RESPONSE

We concur. The campus will:

a. Formally adopt a charter or other governing document that outlines the roles and responsibilities of the ACT, ensuring that it includes all requirements outlined in systemwide policies.

b. Ensure that the charter clearly states whether the campus intends to combine the two required committees into one.

c. Identify and appoint ACT members in accordance with EO 926.

Expected completion date: January 31, 2018

3. GRIEVANCE PROCESS

OBSERVATION

The campus was not adequately tracking informal grievances from students using DRC services.

We found that the DRC had an informal grievance process for minor issues that could be resolved without following the formal grievance process managed by the Office of Equity, Inclusion, and Compliance. However, the process was not formally documented, and the campus did not have an efficient mechanism to track the nature and resolution of these informal complaints.

AA-2014-08 states that students denied a requested accommodation may appeal the decision through on-campus informal and formal dispute resolution processes and mandates that campuses adopt and publish grievance procedures regarding appropriate due-process procedures and prompt and equitable dispute resolution. EO 1097, Systemwide Policy Prohibiting Discrimination, Harassment and Retaliation, Sexual Misconduct, Dating and Domestic Violence, and Stalking against Students and Systemwide Procedure for Addressing Such Complaints by Students, states that the university will respond to all complaints and will
take appropriate action to prevent, correct, and discipline conduct that violates this policy. It further states that the campus will respond to all reports of alleged violations of this policy, whether or not the report is submitted as a written complaint.

Processes to define and track grievances provide the campus with greater assurance of compliance with the ADA and other nondiscrimination regulations and allow the campus to self-assess its service levels.

**RECOMMENDATION**

We recommend that the campus formally document the DRC informal complaint process and adopt a mechanism to compile and track these complaints.

**MANAGEMENT RESPONSE**

We concur. The campus will develop a process to document and track the informal complaints.

Expected completion date: October 1, 2017

4. **DENIAL OF ACCOMMODATIONS**

**OBSERVATION**

The DRC did not effectively track instances of and reasons for denial of service and/or accommodations.

We found that although denial of accommodation requests was rare, the campus did not consistently tag or log these instances so that management could compile and analyze the reasons for the denials. Campus procedures to document denial of services only addressed instances in which a request for additional accommodations from a student already receiving benefits was denied and did not address instances in which a student was initially determined ineligible for services.

A standard process to identify, tag, and compile information regarding instances in which students are denied accommodations provides the campus with greater assurance of compliance with the ADA and other nondiscrimination regulations and allows the campus to self-assess its service levels.

**RECOMMENDATION**

We recommend that the campus develop an effective mechanism to track instances of and reasons for denial of service and/or accommodations.

**MANAGEMENT RESPONSE**

We concur. The campus will develop an effective mechanism to track instances of and reasons for denial of service and/or accommodations.
5. EMERGENCY PROCEDURES

OBSERVATION

Emergency procedures for people with disabilities needed improvement.

We found that although the campus had basic emergency procedures in place, it did not fully address the following elements listed in guidelines from the U.S. Department of Justice (DOJ), Civil Rights Division:

- Specialized notification and communication mechanisms for individuals with limited ability to see, hear, or understand standard emergency alerts.
- Procedures to ensure that people with disabilities can evacuate the area in a variety of conditions and with or without assistance.
- Identification of instances in which specialized resources may be necessary for transportation and/or temporary sheltering of disabled individuals, including assurances that emergency shelters accommodate mobility devices and service animals.

The DOJ publication *Making Community Emergency Preparedness and Response Programs Accessible to People with Disabilities* states that the planning of emergency services should include specialized considerations for disabled persons in the areas of notification, evacuation, information access, and emergency sheltering.

Emergency procedures with considerations for the special needs of disabled persons provide greater assurance of campus community safety and an effective response to adverse situations affecting the campus.

RECOMMENDATION

We recommend that the campus revise emergency procedures to ensure that they include considerations for disabled persons in the areas of notification, evacuation, information access, and emergency sheltering.

MANAGEMENT RESPONSE

We concur. The campus will revise emergency procedures to ensure that they include considerations for disabled persons in the areas of notification, evacuation, information access, and emergency sheltering.

Expected completion date: January 26, 2018
6. ADA TRANSITION PLAN

 OBSERVATION

The campus had not updated its ADA transition plan since 2011.

EO 926 states that California State University campus transition plans, which were required by the ADA for all existing facilities at the time the law was enacted, should be updated to reflect current campus conditions and be used as a planning tool to evaluate and confirm program compliance and the priority of outstanding needs. It further states that listed barriers should be reviewed to assess whether they have been removed or corrected, continue to deny program access, or have no effect on program access. In addition, it states that the transition plan should be readily available for review and use.

Periodic review and update of the transition plan helps to ensure that campus facilities are accessible to people with disabilities and that the campus is in compliance with the ADA accessibility requirements.

RECOMMENDATION

We recommend that the campus:

a. Continuously update its ADA transition plan to reflect current campus conditions.

b. Use its ADA transition plan as a planning tool to evaluate and confirm program compliance and the priority of outstanding needs.

MANAGEMENT RESPONSE

We concur.

a. The campus will bring the ADA transition plan to current campus conditions and seek to develop a continuous update process.

b. The campus will utilize the updated ADA Transition Plan as a planning tool to confirm program compliance and priority of outstanding needs.

Expected completion date: January 31, 2018

7. REQUIRED DISCLOSURES

 OBSERVATION

The university housing website did not reference the systemwide policy prohibiting discrimination, harassment, and retaliation.

EO 1097 requires that the systemwide policy on discrimination, harassment, and retaliation be made readily available and distributed on an annual basis to all students and employees via
multiple methods of communication, including email, student orientations and catalogs, new employee orientations, campus websites and publications, and webpages for the offices of equity and diversity, student affairs, student judicial affairs, disabled student services, auxiliary organizations, academic affairs, extended education, athletics, residential life, and human resources.

Communicating the systemwide policy on discrimination, harassment and retaliation through multiple methods increases the overall campus awareness of the policy.

RECOMMENDATION

We recommend that the campus communicate the systemwide policy on discrimination, harassment, and retaliation through multiple methods.

MANAGEMENT RESPONSE

We concur. University Housing Service has updated the website to reflect the systemwide policy on discrimination, harassment, and retaliation. Corrective action on this item is complete.

8. STUDENT ACCOMMODATION VERIFICATION TESTING

OBSERVATION

The campus student disability verification and accommodation process needed improvement.

We reviewed 30 student requests for accommodations and found that:

- Eight requests were accommodated even though the documentation provided by the student did not meet the verification standards for the disability listed by the student.

- Nine requests were supported by medical diagnoses that were outdated.

- Seven students received accommodations that did not have a clear relationship between the disability and the accommodation provided.

- Three diagnoses were accepted from medical evaluators who did not have the required qualifications to diagnose the condition, in accordance with campus standards.

Inconsistent application of disability verification requirements exposes the campus to the risk that their practices will be perceived as discriminatory.

RECOMMENDATION

We recommend that the campus:
a. Review campus policies and standards regarding disability verification to determine whether they are consistent and reflective of the campus position on the level of verification necessary.

b. Provide training on verification policies to staff reviewing accommodation requests.

MANAGEMENT RESPONSE

We concur. The campus will:

a. Review and update, if needed, the campus policies and standards regarding disability verification to ensure that they are consistent and reflective of the campus position on the level of verification necessary.

b. Provide training on verification policies and standards to staff reviewing accommodation requests.

Expected completion date: January 1, 2018
GENERAL INFORMATION

BACKGROUND

In 1973, Congress adopted the Rehabilitation Act, prohibiting discrimination on the basis of disability and ensuring equal opportunity for people with disabilities at any federal agency, including any program or institution that receives federal funds. Section 504 of the Rehabilitation Act ensures certain civil rights for people with disabilities, including access to federally funded programs or activities, and the federal government issued regulations to govern compliance in June 1977.

In 1990, the federal government enacted the Americans with Disabilities Act (ADA), which reaffirmed Section 504 of the Rehabilitation Act of 1973 and extended the discrimination prohibition to businesses and organizations that do not receive federal funds. The ADA also detailed additional criteria in the areas of employment, new construction or renovation, transportation, and telecommunications; and for public entities that employ 50 or more people, it required the appointment of an ADA coordinator, a self-evaluation, and a transition plan to itemize compliance steps.

The California State University (CSU) system initiated changes and implemented policies and programs concurrent with the adoption of this legislation and subsequent updates. After Section 504 regulations were put in place in 1977, CSU campuses prepared self-evaluations identifying the steps that would ensure that students with disabilities would have equal access to educational opportunities. In March 1980, the CSU developed a policy statement, Policy for the Provision of Services to Students with Disabilities, which formalized the objectives of programs supporting disabled students: to increase the enrollment of students with disabilities in the total student population and to facilitate their access to all educational programs. In this same year, the CSU Systemwide Advisory Committee on Services to Students with Disabilities was established. The Policy for the Provision of Services to Students with Disabilities was revised in 1989, in part to incorporate disability services identified in Assembly Bill 746, State Funded Disabled Student Programs and Services, enacted in 1987.

In 2004, the CSU implemented Executive Order (EO) 926, Policy on Disability Support and Accommodations, to document and make explicit systemwide policies for the disability support and accommodation program and to outline responsibilities for monitoring compliance with the policy. Concurrently, the CSU developed the Center for Accessible Media to help expedite the delivery of electronic instructional texts to eligible CSU students with disabilities. In January 2006, the CSU launched its Accessible Technology Initiative (ATI) to develop the work plan, guidance, and resources to assist campuses in carrying out the accessible technology provisions of its revised Policy on Disability Support and Accommodations.
The ADA Amendments Act (ADAAA) of 2008 became effective on January 1, 2009, and the most recent rule implementing the new requirements, published in the Federal Register in August 2016, took effect in October 2016. These amendments clarified and reiterated who is covered by the law’s civil rights protections and revises the definition of “disability” to more broadly encompass impairments that substantially limit a major life activity. The amended language also states that mitigating measures, including assistive devices, auxiliary aids, accommodations, medical therapies, and supplies, have no bearing in determining whether a disability qualifies under the law.

The DRC at California State Polytechnic University, Pomona (CPP) is responsible for providing services to students with disabilities as required under section 504 of the Rehabilitation Act of 1973. Under the division of student affairs, the DRC verifies, authorizes, and facilitates services and accommodations for more than 700 students with temporary and permanent disabilities. The DRC has recently experienced staff turnover and is currently being reorganized.

SCOPE

We visited the CPP campus from May 8, 2017, through June 9, 2017. Our audit and evaluation included the audit tests we considered necessary in determining whether operational, administrative, and financial controls are in place and operative at the CPP campus. The audit focused on procedures in effect from July 1, 2015, through June 9, 2017.

Specifically, we reviewed and tested:

- Organizational roles and responsibilities for ensuring compliance with Section 504 of the Rehabilitation Act, ADA, and other regulations related to the provision of support to disabled students.
- Policies and procedures for the administration of departments and programs supporting disabled students, including those that describe and enforce grievance procedures when discrimination is alleged.
- The adequacy of required notice and outreach programs to ensure that eligible students are aware of their rights and the available accommodation benefits.
- The breadth of the accommodations provided, to ensure they are in accordance with at least the minimum required by CSU policy and reflective of the campus disabled student community.
- Processes to compile information and verify disabilities and to provide reasonable and appropriate accommodation based on verified need.
- The grievance and complaint process, to ensure that concerns are captured, recorded, and addressed in accordance with campus and system policy.
- Fiscal accountability, including controls over disbursements and capture of cost allocation opportunities.

As a result of changing conditions and the degree of compliance with procedures, the effectiveness of controls changes over time. Specific limitations that may hinder the effectiveness of an otherwise adequate system of controls include, but are not limited to,
resource constraints, faulty judgments, unintentional errors, circumvention by collusion, and management overrides. Establishing controls that would prevent all these limitations would not be cost-effective; moreover, an audit may not always detect these limitations.

Our testing and methodology was designed to provide a review of key operational and administrative controls, which included detailed testing on a limited number of disabled student accommodation requests to ensure that each complied with regulatory, campus, and systemwide policies. The audit did not address provision of support services or accommodations to employees self-identifying as disabled or the ATI.

CRITERIA

Our audit was based upon standards set forth in federal and state regulations; Board of Trustees policies; Office of the Chancellor policies, letters, and directives; campus procedures; and other sound administrative practices. This audit was conducted in conformance with the Institute of Internal Auditors’ *International Standards for the Professional Practice of Internal Auditing*.

This review emphasized, but was not limited to, compliance with:

- 34 CFR Part 104, *Nondiscrimination on the Basis of Handicap in Programs or Activities Receiving Federal Financial Assistance*
- ADA of 1990
- ADAAA of 2008
- California Education Code §67300, *Disabled Student Services*
- California Government Code (GC) §11135-11139.8, *Discrimination*
- GC §13403, *The State Leadership Accountability Act*
- Coded memorandum Academic Affairs 2014-08, *Policy for the Provision of Accommodations and Support Services to Students with Disabilities*
- EO 926, *The CSU Policy on Disability Support and Accommodations*
- EO 1097, *Systemwide Policy Prohibiting Discrimination, Harassment and Retaliation, Sexual Misconduct, Dating and Domestic Violence, and Stalking against Students and Systemwide Procedure for Addressing Such Complaints by Students*
- Rehabilitation Act of 1973
- CPP DRC Policies and Guidelines, *Disability Documentation Guidelines*
- CPP DRC Policies and Guidelines, *Informal Grievance Procedures*
- CPP Disabilities Advisory Committee Founding Document

AUDIT TEAM

- Assistant Vice Chancellor and Deputy Chief Audit Officer: Janice Mirza
- Audit Manager: Ann Hough
- Senior Auditor: Krittika Hursey