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January 18, 2017

Dr. Mary A. Papazian, President
San José State University
One Washington Square
San José, CA 95192-0002

Dear Dr. Papazian:

Subject: Audit Report 16-45, *Emergency Management*, San José State University

We have completed an audit of *Emergency Management* as part of our 2016 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

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The California State University
Office of Audit and Advisory Services

EMERGENCY MANAGEMENT

San Jose State University

Audit Report 16-45
December 9, 2016

EXECUTIVE SUMMARY

OBJECTIVE

The objectives of the audit were to ascertain the effectiveness of administrative and operational controls for emergency management and to ensure compliance with relevant governmental regulations; Trustee policy; Office of the Chancellor directives; campus procedures; and where appropriate, federal guidance and industry-accepted standards.

CONCLUSION

Based upon the results of the work performed within the scope of the audit, numerous specific control weaknesses were noted. Controls evaluated were unlikely to provide reasonable assurance that risks were being managed and objectives were met.

We found that due to vacancies and turnover in the emergency services coordinator position, components of the existing campus emergency management program needed to be improved, and emergency training needed to be strengthened. Specifically, we found that the performance and documentation of evacuation drills needed improvement; emergency training for emergency operations center (EOC) team members, student health center staff, new hires, and building coordinators was not always performed as required; emergency exercises were not always performed in accordance with California State University (CSU) requirements; and the emergency operations plan (EOP) was outdated.

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

OBSERVATIONS, RECOMMENDATIONS, AND RESPONSES

1. BUILDING COORDINATOR PROGRAM

OBSERVATION

The campus building coordinator program needed improvement.

Specifically, we found that:

- Building coordinators did not always complete annual training, as required by systemwide policy. We reviewed training records and found that five of ten building coordinators had not completed training at least once per year from 2014 to 2016.
- Before 2016, the campus did not always hold campuswide evacuation drills each semester, as required by the campus EOP. Additionally, some buildings in the off-campus satellite location did not perform annual evacuation drills.
- The campus did not always retain documentation pertaining to housing evacuation drills. As a result, we were unable to confirm that evacuation drills were performed every semester for each of the seven student residence halls and the international house, an off-campus student residence.
- The results of evacuation drills were not always documented in after-action reports or discussed with emergency management team members.
- The listing of building coordinators on the emergency preparedness website was outdated and did not reflect current team members.

Maintaining an effective building coordinator program helps to ensure the safety of employees, students, and visitors in the event of an emergency.

RECOMMENDATION

We recommend that the campus:

- a. Provide annual training to building coordinators, and maintain documentation showing who received the training.
- b. Perform campuswide evacuation drills in accordance with the schedule outlined in the EOP, and perform and document annual evacuation drills for all buildings at the off-campus satellite location.
- c. Perform on-campus and off-campus housing evacuation drills each semester, and maintain documentation showing that these drills occurred.
- d. Document the results of evacuation drills in after-action reports and share the results with emergency management team members.

- e. Update the listing of building coordinators on the emergency preparedness website to reflect current team members.

MANAGEMENT RESPONSE

We concur. We will implement compliance action to:

- a. Provide annual training to building coordinators and maintain documentation showing who received the training. Management procedure to ensure this annual training will be completed by February 28, 2017.
- b. Perform campuswide evacuation drills in accordance with the schedule outlined in the EOP and perform and document annual evacuation drills for all buildings at the off-campus satellite location. The next campuswide evacuation drill is scheduled for February 2017, and we will submit documentation of completed compliance by February 28, 2017.
- c. Perform on-campus and off-campus housing evacuation drills each semester and maintain documentation showing that these drills occurred. In addition, campus emergency management service will strengthen record-keeping for this with an additional after-action report procedure. We will submit documentation of completed compliance by March 31, 2017.
- d. Document the results of evacuation drills in after-action reports and share the results with emergency management team members. Campus emergency management service will strengthen record-keeping with an additional after-action report procedure. We will submit documentation of completed compliance by March 31, 2017.
- e. Update the listing of building coordinators on the emergency preparedness website to reflect current team members. We will submit documentation of completed compliance by January 31, 2017.

2. SPECIALIZED EMERGENCY PREPAREDNESS TRAINING

OBSERVATION

EOC team members and student health center staff did not always complete specialized emergency preparedness training annually.

We reviewed training records for ten EOC team members and found that none had completed specialized emergency training at least once a year from 2014 to 2016, as required by systemwide policy. In addition, six team members had not completed specific Federal Emergency Management Agency (FEMA) training courses, as required by campus policy.

We also found that the campus was unable to locate documentation showing that student health center staff had completed specialized emergency training at least once per year from 2014 to 2016. Student health center staff had recently moved to a new building on campus, and training documentation could not be easily located.

Completing and documenting specialized emergency preparedness training ensures that emergency team members and student health center staff are properly prepared to respond to an emergency situation, increases safety, and reduces the risk of non-compliance with campus and CSU requirements.

RECOMMENDATION

We recommend that the campus:

- a. Provide specialized emergency training to EOC team members and student health center staff on an annual basis and retain documentation of this training.
- b. Review EOC team training records to determine which individuals need to complete FEMA training required by campus policy, and ensure that these individuals complete this training.

MANAGEMENT RESPONSE

We concur. We will implement compliance action to:

- a. Provide specialized emergency training to EOC team members and student health center staff on an annual basis and retain documentation of this training. We will submit documentation of completed compliance by April 28, 2017.
- b. Review EOC team training records to determine which individuals need to complete FEMA training required by campus policy, and ensure that these individuals complete this training. We will submit documentation of completed compliance by April 28, 2017.

3. EMERGENCY EXERCISES

OBSERVATION

The campus did not perform simulated emergency incidents and exercises in accordance with systemwide policy.

Specifically, systemwide policy requires that tabletop exercises be performed annually, functional exercises be performed every other year, and full-scale exercises be performed at least every five years. We reviewed simulated incidents and exercises from 2014 to 2016 and found that the campus had conducted one tabletop exercise and no functional exercises during that time period. Additionally, we found that the EOC team did not participate in or review the after-action reports for these exercises or the full-scale exercise that was performed in 2014.

Completing simulated emergency incidents and exercises in accordance with CSU requirements strengthens the campus emergency management team's ability to effectively respond in the event of an emergency and provides assurance that lessons learned and deficiencies noted while conducting emergency exercises are recognized and corrected.

RECOMMENDATION

We recommend that the campus perform simulated emergency incidents and exercises according to the schedules in systemwide policy and include participation and/or review by the EOC team.

MANAGEMENT RESPONSE

We concur. We have implemented compliance action to perform simulated emergency incidents and exercises according to the schedules in systemwide policy and include participation and/or review by the EOC team. We will submit documentation of completed compliance by January 31, 2017.

4. EMERGENCY OPERATIONS PLAN**OBSERVATION**

The campus EOP was outdated and needed improvement.

We found that the plan was not updated on an annual basis, and the most current completed version of the plan was dated 2014. The campus did have a 2016 version of the EOP, but it was still in draft form. We reviewed this 2016 draft EOP and found that:

- The plan referenced an outdated campus presidential directive, and as a result, the order of succession to make decisions on behalf of the president in case of an emergency did not reflect the current structure.
- The plan did not address the needs of international students on campus.
- The plan did not include checklists for specific functions (branches/unit roles) within each section of the EOC to define emergency assignments, roles, and responsibilities.

We also noted that the campus emergency preparedness website was outdated, as it contained an EOP from 2012 and an organizational chart that did not reflect all of the current EOC positions.

A current and comprehensive EOP provides assurance that the campus can effectively respond to emergencies and decreases the risk of loss and injury to the campus community.

RECOMMENDATION

We recommend that the campus:

- a. Review the 2016 draft EOP, update it to address the areas discussed above, and distribute the finalized version to the EOC team.
- b. Update the campus emergency preparedness website to reflect the updated EOP and the current EOC positions.

MANAGEMENT RESPONSE

We concur. We will implement compliance action to:

- a. Review the 2016 draft EOP, update it to address the areas discussed above, and distribute the finalized version to the EOC team. We will submit documentation of completed compliance by April 28, 2017.
- b. Update the campus emergency preparedness website to reflect the updated EOP and the current EOC positions. We will submit documentation of completed compliance by April 28, 2017.

5. NEW-HIRE TRAINING

OBSERVATION

Documentation showing evidence that new faculty members had received emergency preparedness training was not always available.

We reviewed documentation files for 12 faculty new hires, and we found that nine did not include evidence showing that the employees had attended a new-hire orientation that covered emergency preparedness.

Provision of emergency preparedness training to new employees ensures that employees are aware of emergency and evacuation procedures, increases safety, and allows for an adequate response in the event of an emergency.

RECOMMENDATION

We recommend that the campus provide overview training on emergency preparedness to all new faculty members within one year of employment and retain documentation that this training was completed.

MANAGEMENT RESPONSE

We concur. We will implement compliance action to provide overview training on emergency preparedness to all new faculty members within one year of employment and retain documentation that this training was completed. Campus emergency management service will coordinate with human resources to strengthen the training procedure and to track training attendance. We will submit documentation of completed compliance by April 28, 2017.

6. EMERGENCY RESOURCES

OBSERVATION

The listing of emergency resources was outdated, and emergency generators were not always timely tested or inspected.

Specifically, we found that:

- Items on the emergency resources listing were not always available. We reviewed ten emergency resources on the list and could not locate four of them. These items had been removed because they were perishable, but the listing had not been updated to reflect this.
- The campus list of vendors/contractors to be used for emergency purchases was not updated annually.
- Portable emergency generators located in the emergency storage units were not always tested or inspected on a regular basis to ensure that they were properly operating. We reviewed three portable generators and found that the responsibility for the periodic testing or inspection of these items was unclear.
- Fixed emergency generators attached to buildings were not always tested on a monthly basis. We reviewed five generators and noted that none had been tested and maintained on a monthly basis from September 1, 2015, through August 31, 2016. The longest period between maintenance checks was approximately five months.

Maintaining a current listing of emergency resources and contractors and performing timely inspections of emergency generators provides assurance that critical resources will be readily available and functioning in the event of an emergency.

RECOMMENDATION

We recommend that the campus:

- a. Update the listing of emergency resources to reflect the current items available.
- b. Update the campus list of vendors/contractors to be used for emergency purchases on an annual basis.
- c. Determine who is responsible for the periodic testing or inspection of portable emergency generators, establish a testing/inspection schedule for these items, and test or inspect them accordingly.
- d. Test fixed emergency generators monthly in accordance with campus maintenance schedules.

MANAGEMENT RESPONSE

We concur. We will implement compliance action to:

- a. Update the listing of emergency resources to reflect the current items available. We will submit documentation of completed compliance by January 31, 2017.
- b. Update the campus list of vendors/contractors to be used for emergency purchases on an annual basis. Campus acquisition management will implement the procedure of compliance. We will submit documentation of completed compliance by March 31, 2017.
- c. Determine who is responsible for the periodic testing or inspection of portable emergency generators, establish a testing/inspection schedule for these items, and test or inspect them accordingly. We will submit documentation of completed compliance by February 28, 2017.
- d. Test fixed emergency generators monthly in accordance with campus maintenance schedules. We will submit documentation of completed compliance by February 28, 2017.

GENERAL INFORMATION

BACKGROUND

The CSU consists of 23 campuses, with approximately 474,600 students and more than 49,000 faculty and staff. Each campus is responsible for the safety and general welfare of all members of the campus community. Because emergencies and disasters can occur with little to no warning and encompass a wide range of events, including earthquakes, fires, active-shooter situations, pandemics, protests or riots, and other natural and manmade disasters, it is critical that campuses plan ahead so that when emergencies happen, an appropriate response can be coordinated. The president of each CSU campus has been delegated responsibility for the implementation and maintenance of the campus emergency management program.

FEMA is the federal agency that leads the country in preparing for, preventing, responding to, and recovering from disasters. FEMA emphasizes the use of hazard mitigation planning to reduce the loss of life and property due to natural and other hazard risks and publishes a number of emergency planning guides, including *Building a Disaster Resistant University* and the *Guide for Developing High-Quality Emergency Operations Plans for Institutions of Higher Education*. The Department of Education (DOE) and the National Fire Protection Agency (NFPA) have also developed relevant federal guidance for emergency management programs.

On February 28, 2003, the president of the United States issued Homeland Security Presidential Directive 5, *Management of Domestic Incidents*, which directed that the National Incident Management System (NIMS) be developed. NIMS provides a common approach to managing incidents that allows government departments and agencies, nongovernmental organizations, and the private sector to work together. NIMS requires the use of a standard organizational framework, the Incident Command System (ICS), for incident response. Federal departments and agencies, as well as state, local, and tribal governments, are required to fully comply with NIMS and adopt ICS to receive federal preparedness funding and grants.

The cornerstone of California's emergency response system is the Standardized Emergency Management System (SEMS), which state agencies are required by law to use when responding to emergencies involving multiple jurisdictions or agencies. Key components of SEMS, codified in Government Code §8607, include the use of ICS, multiagency coordination, mutual aid, and defined operational areas. SEMS was developed as a result of the 1991 East Bay Hills fire in Oakland, which drew attention to the need for better coordination among emergency services responders.

As a result of federal and state regulations, all CSU campuses are required to incorporate NIMS, SEMS, and ICS into their emergency management program. Executive Order (EO) 1056, *California State University Emergency Management Program*, defines the key components of an effective campus emergency management program. At the systemwide level, the Office of Risk Management (ORM) has administrative oversight and programmatic responsibility for the emergency management function and coordinates the Emergency Coordinators working group, an advisory body for CSU systemwide emergency management. In 2014, ORM commissioned an outside consultant to review campus emergency management plans.

At San Jose State University (SJSU), the emergency preparedness unit supports the campus community by implementing programs and projects in emergency planning, training, response, mitigation, and recovery. The mission of the emergency preparedness unit is to respond to an emergency situation in a safe, effective, and timely manner. The emergency services coordinator is responsible for overseeing the emergency preparedness program and advising university administrators and executives on disaster preparedness and response. The emergency preparedness unit operates under the direction of the operations bureau commander within the university police department. The chief of police has overall oversight of the emergency unit and reports up to the vice president of administration and finance. The emergency unit is responsible for several activities, including reviewing and updating the emergency operations plan, training the emergency management team, and coordinating the annual campuswide evacuation drills.

SCOPE

We visited the SJSU campus from August 22, 2016, through October 7, 2016. Our audit and evaluation included the audit tests we considered necessary in determining whether administrative and operational controls are in place and operative. The audit focused on procedures in effect from January 1, 2014, through October 7, 2016.

Specifically, we reviewed and tested:

- Emergency management administration and organization, including clear lines of organizational authority and responsibility, and current and comprehensive policies and procedures.
- The emergency operations plan and event-specific annexes, including integration of SEMS, NIMS, and ICS components, and considerations for special populations on campus such as international students, students and personnel with limited English proficiency, and people with access and functional needs.
- The emergency operations center, emergency equipment, and related emergency supplies and resources.
- Coordination with other agencies, including mutual aid and assistance.
- The effectiveness of the building marshal or similar program and evacuation procedures and drills.
- Emergency management training for new hires and emergency management team members.
- Testing and drills for emergency communication systems and emergency incidents, and the preparation of appropriate after-action reports.

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, which was designed to provide a review of key administrative and operational controls, included interviews, walkthroughs, and detailed testing on certain aspects of the campus emergency operations program. Our review was limited to gaining reasonable assurance that essential elements of the campus emergency management program were in place and did not examine all aspects of the program.

CRITERIA

Our audit was based upon standards as set forth in federal and state regulations and guidance; CSU Board of Trustee 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:

- EO 943, *University Health Services*
- EO 1056, *California State University Emergency Management Program*
- Coded memorandum Human Resources 2004-10, *Mutual Aid*
- 20 United States Code §1092(f), *Higher Education Opportunity Act*
- Code of Federal Regulations Title 28, Part 36, *American Disabilities Act*
- Code of Federal Regulations Title 29, Part 1910, *Occupational Safety and Health Standards*
- DOE, *Action Guide for Emergency Management at Institutions of Higher Education*
- FEMA, *Guide for Developing High-Quality Emergency Operations Plans for Institutions of Higher Education*
- NFPA 1600, *Standard on Disaster/Emergency Management and Business Continuity/Continuity of Operations Programs*
- Government Code §8607
- Government Code §13402 and §13403
- SJSU *Emergency Operations Plan*
- SJSU *Student Health Center Operations Manual*
- SJSU *Accessing Emergency Supplier List*

AUDIT TEAM

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