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March 3, 2017

Dr. Mildred Garcia, President
California State University, Fullerton
800 North State College Boulevard
Fullerton, CA 92834-9480

Dear Dr. Garcia:

Subject: Audit Report 16-48, Emergency Management, California State University, Fullerton

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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EMERGENCY MANAGEMENT

**California State University,
Fullerton**

Audit Report 16-48
February 1, 2017

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, a few specific control weaknesses were noted; generally, however, controls were adequate, appropriate, and effective to provide reasonable assurance that risks were being managed and objectives were met.

Overall, we found that the campus had an appropriate framework for emergency management, ample emergency resources, and regularly scheduled emergency exercises. However, we did find that components of the existing campus emergency management programs needed to be updated. Specifically, we found that the campus building marshal and evacuation chair programs needed improvement, one building on campus could not receive audible alarms and announcements relating to emergency situations, and emergency training for new hires and emergency operations center (EOC) team members was not always completed. We also identified opportunities for improvement relating to off-site locations and the campus emergency operations plan (EOP), as well as the documentation and follow-up of emergency exercises.

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

OBSERVATIONS, RECOMMENDATIONS, AND RESPONSES

1. BUILDING MARSHAL PROGRAM

OBSERVATION

The campus building marshal program needed improvement.

We found that:

- The building marshal program was not operating as intended. Per the campus emergency operations plan (EOP), there were three tiers of building marshals that were supposed to be assigned for each building. However, the campus did not have enough building marshals to fill all of these positions. In addition, we noted that one building did not have a building marshal, two multi-story buildings did not have at least one building marshal for each occupied floor, and four building complexes did not have at least one building marshal for each occupied building.
- The building marshal listing was incomplete. For two buildings, the individuals who performed the building marshal function were not included on the listing. In addition, with one exception, building marshals for student housing were not included on the listing.
- Building marshals did not always attend annual training. We reviewed training records for ten building marshals, and we found only three individuals attended at least one training session between 2014 and 2016, and none of the ten individuals completed training in all three years.

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

RECOMMENDATION

We recommend that the campus:

- a. Review and update the building marshal program to align with campus practices, and assign building marshals for all regularly occupied buildings on campus and all floors of multi-story buildings as appropriate.
- b. Update the building marshal listing to include all individuals acting as building marshals.
- c. Require all building marshals to attend annual training, and document their attendance.

MANAGEMENT RESPONSE

We concur.

- a. The campus will review and update the building marshal program, of which a draft is already completed, and will assign building marshals as appropriate. Estimated completion date is July 28, 2017.
- b. The building marshal list has been updated as recommended. Action was completed on February 14, 2017.
- c. All building marshals will be required by their division vice president to attend annual training, which will be documented, and documentation will be retained by the emergency management coordinator. Estimated completion date is July 28, 2017.

2. EMERGENCY NOTIFICATION SYSTEMS

OBSERVATION

One building on campus was not connected to the campus alarm system, and thus could not receive audible alarms and announcements related to emergency situations.

Including all campus buildings in the campus alarm system increases safety and provides assurance that everyone in the campus community will be timely notified in the event of an emergency.

RECOMMENDATION

We recommend that the campus evaluate the building discussed above to determine whether it should be connected to the campus alarm system or whether other methods of immediate communication should be implemented for the location.

MANAGEMENT RESPONSE

We concur. The campus will evaluate the Golleher House alarm system and determine the best means of immediate communication. Estimated completion date is July 28, 2017.

3. EVACUATION CHAIR PROGRAM

OBSERVATION

The campus evacuation chair program needed to be reevaluated.

We reviewed campus evacuation chairs that had been purchased for multi-story buildings to facilitate the evacuation of people needing assistance during an emergency and found that:

- Since the evacuation chairs had been purchased more than ten years ago, certain campus buildings had been built or renovated. As a result, there were some multi-story campus buildings that did not have an evacuation chair.

- Evacuation chairs were not inspected on a regular basis to verify that they were at the specified location and operational.
- Building marshals and other campus emergency responders were not trained on the proper use of evacuation chairs.

An effective evacuation chair program increases safety and provides assurance that people needing assistance during an emergency will be able to safely exit the building.

RECOMMENDATION

We recommend that the campus:

- a. Reevaluate the evacuation chair program to consider the proper number and placement of evacuation chairs throughout the campus and account for the periodic inspection of evacuation chairs, and document this reevaluation of the program.
- b. Provide training on the proper use of evacuation chairs to building marshals and other campus emergency responders.

MANAGEMENT RESPONSE

We concur. The campus will evaluate the evacuation chair program, which will include a review of, among other things, the use and placement of the evacuation chairs, as well as their inspection, and provide training to campus emergency responders, including building marshals and others, on the appropriate use of the evacuation chairs. Estimated completion date is July 28, 2017.

4. SPECIALIZED EMERGENCY TRAINING

OBSERVATION

Emergency operations center (EOC) team members did not always complete specialized training as required by systemwide and campus policy.

We reviewed training records for ten EOC team members and found that:

- Specialized training was not provided to EOC team members in 2014. In addition, none of the ten team members we reviewed attended training in both 2015 and 2016, and only three attended training in at least one of those years. Systemwide policy requires EOC team members to complete specialized training annually.
- The campus EOP required EOC team members to take certain Federal Emergency Management Agency (FEMA) courses online or in the classroom. However, the campus did not track completion of these courses; therefore, we were unable to determine whether the ten team members we reviewed had completed the required courses.

Completing and documenting specialized emergency preparedness training ensures that emergency team members will be properly prepared to respond to an emergency situation, increases safety, and reduces the risk of noncompliance with campus and California State University (CSU) requirements.

RECOMMENDATION

We recommend that the campus:

- a. Provide specialized emergency training to EOC team members annually, and retain documentation of this training.
- b. Track completion of FEMA training by EOC team members, and maintain documentation of completion of courses required by the campus EOP.

MANAGEMENT RESPONSE

We concur.

- a. The campus will provide specialized training to EOC team members annually, and our emergency management coordinator will retain documentation and report members who fail to attend to their division head in order to schedule make-up training.
- b. Our emergency management coordinator will track completion of FEMA training by EOC team members and maintain the completion documentation required by the campus EOP.

Estimated completion date is July 28, 2017.

5. NEW-HIRE TRAINING

OBSERVATION

New employees at the campus and the Auxiliary Services Corporation (ASC) did not always complete emergency-preparedness training.

We found that although the campus required new employees to complete online health and safety training, which included information on emergency preparedness, not all employees completed the training. We reviewed training records for 20 employees hired between January 1, 2014, and June 30, 2015, and found that nine had not completed the training. Although some automated email reminders were sent to the employees from the online system, training completion was not monitored and there was no other follow-up to ensure compliance with training requirements.

We also found that new ASC employees were not provided with emergency-preparedness training, which could include information on topics such as emergency notifications and evacuation and other emergency procedures. However, they did participate in campuswide evacuation and earthquake drills.

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 and the ASC:

- a. Create a process to monitor campus employee compliance with required training and to follow-up on non-completion of training, including escalation of non-compliance to appropriate campus management as necessary.
- b. Provide emergency-preparedness training to new ASC employees.

MANAGEMENT RESPONSE

We concur.

- a. The campus will create a process to monitor campus employee compliance with required training and to follow-up on the non-completion of the training, including the escalation of non-compliance to appropriate campus management as necessary. Estimated completion date is July 28, 2017.
- b. *Emergency Preparedness Online Training* will be assigned to all current ASC employees effective February 27, 2017, and to all new employees after that date. Timely completion of training will be monitored regularly and escalated to appropriate management for any assignments that are more than 30 days overdue. ASC will revise the current emergency-preparedness information that is a part of the new-hire orientation. Human resources will reiterate to all new hires that they must complete the *Emergency Preparedness Online Training* that will be assigned to them by information technology/human resources immediately after their hire date, indicating that this is required training. Action was completed February 1, 2017.

6. EMERGENCY EXERCISES

OBSERVATION

Documentation and review of emergency exercises needed improvement.

We reviewed nine emergency exercises that took place from 2014 to 2016 and found that after-action reports or similar documentation of lessons learned were not prepared for three exercises involving non-emergency response personnel. In addition, we noted that corrective actions identified in after-action reports for emergency exercises were not always communicated to emergency management team members for review and follow-up.

Preparing after-action reports and following up on identified corrective actions provides assurance that lessons learned and deficiencies noted while conducting emergency exercises

are recognized and corrected and strengthens the campus' ability to effectively respond in the event of an emergency.

RECOMMENDATION

We recommend that the campus:

- a. Prepare after-action reports or similar documentation of lessons learned for all emergency exercises, including those involving non-emergency personnel.
- b. Communicate after-action reports with the emergency management team and develop a process to follow up on identified corrective actions.

MANAGEMENT RESPONSE

We concur.

- a. All future emergency exercises that include non-emergency personnel will have an after-action report completed.
- b. All after-action reports will be reviewed by the emergency management team, and a process will be developed for the follow-up of corrective actions needed.

Action was completed February 14, 2017.

7. OFF-SITE LOCATIONS

OBSERVATION

Roles and responsibilities for emergency preparedness at off-site campus locations were unclear.

We reviewed five off-site locations whose operations were not covered under the main campus EOP, and we found that four did not have written emergency procedures in place, although two were working with the emergency management coordinator to draft emergency procedures. We also noted that the one location that had written procedures in place had not shared those procedures with the campus emergency manager.

Addressing emergency response protocols and processes for off-site locations increases safety and provides assurance that the campus would be able to effectively respond in the event of an emergency occurring when employees or students are participating in campus activities in buildings or areas outside of the main campus.

RECOMMENDATION

We recommend that the campus:

- a. Determine who is responsible for ensuring that off-site locations have appropriate emergency procedures in place, and create or finalize written emergency procedures for these locations.
- b. Maintain emergency procedures for these locations centrally or incorporate them in the campus EOP so they can be easily referenced in the event of an emergency.

MANAGEMENT RESPONSE

We concur.

- a. The emergency management coordinator will collaborate with our off-site personnel to ensure emergency procedures are in place. Codified written emergency procedures will be completed for each location. Estimated completion date is July 28, 2017.
- b. A central location for completed off-site emergency procedures has been created on a shared drive that is accessible by university police personnel. Action was completed February 14, 2017.

8. EMERGENCY OPERATIONS PLAN

OBSERVATION

The campus EOP needed to be updated.

We found that:

- The plan referred to an Emergency Operations Planning Committee responsible for reviewing and providing advice on the plan. However, this committee did not exist, and there was no cross-campus review of the plan.
- The plan did not fully address the needs of international students or incorporate the international students office in emergency planning processes.

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

RECOMMENDATION

We recommend that the campus review and update the EOP to address the areas discussed above and distribute the updated EOP to the campus EOC team.

MANAGEMENT RESPONSE

We concur. The campus EOP committee will review and update the EOP, then distribute the EOP to the campus EOC team.

Estimated completion date is July 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 California State University, Fullerton (CSUF), the emergency management coordinator is responsible for overseeing the campus emergency preparedness program, including maintaining the campus EOP, managing the campus building marshal program, stocking and maintaining an adequate EOC, and scheduling and providing emergency training and exercises for the EOC team. The chief of police facilitates emergency exercises for the president's cabinet. The emergency management coordinator is part of the university police department, which is part of the division of administration and finance.

SCOPE

We visited the CSUF campus from November 14, 2016, through December 9, 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 December 9, 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
- CSUF *Emergency Operations Plan*

AUDIT TEAM

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