September 18, 2019

Dr. Robert S. Nelsen, President
California State University, Sacramento
6000 J Street
Sacramento, CA 95819

Dear Dr. Nelsen:

Subject: Audit Report 19-50, Emergency Management, California State University, Sacramento

We have completed an audit of Emergency Management as part of our 2019 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 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
EMERGENCY MANAGEMENT

California State University, Sacramento

Audit Report 19-50
August 20, 2019
EXECUTIVE SUMMARY

OBJECTIVE

The objectives of the audit were to ascertain the effectiveness of operational and administrative 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, the operational and administrative controls for emergency management as of July 18, 2019, were unlikely to provide reasonable assurance that risks were being managed and objectives were met.

Overall, we found that the campus was not effectively administering many of the required components of its emergency management program. The emergency management program at California State University, Sacramento (Sacramento State) resides primarily within the University Police Department (UPD). Under UPD, administration of the emergency management program had undergone continuous turnover during the years reviewed, having been managed by multiple UPD employees, including retired annuitants and, currently, one full-time employee. Additionally, administration of the building coordinator program (BCP), a component of emergency management, had recently been moved from UPD to risk management services. However, in part because of the frequent turnover in administration of the program, we found that the program did not meet all systemwide requirements, and many components of the program needed significant improvement to ensure that the campus’ emergency management functions would operate effectively and efficiently in the event of an emergency.

Specifically, we found that the campus emergency operations plan (EOP) had not been reviewed since March 2015; systemwide policy requires that the EOP be reviewed and updated, as needed, annually. In addition, preparation of the emergency operations center (EOC) and emergency resources needed improvement, roles and responsibilities for emergency management had not been clearly defined and communicated, and the campus had not established mutual aid agreements with external entities that it may request assistance from in an emergency. Further, the campus did not conduct simulated emergency exercises to test emergency response procedures as required by systemwide policy and did not have a process to ensure that all employees completed new-hire and specialized emergency preparedness training. Also, the BCP did not encompass all campus buildings and facilities.

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

1. EMERGENCY OPERATIONS PLAN

OBSERVATION

The campus EOP and its supplemental materials, annexes, and appendices had not been reviewed and updated on an annual basis and did not contain all required elements.

We found that the campus EOP was not reviewed and updated annually, as required by systemwide policy. Specifically, we found that the most current version of the plan was dated 2015, and many of the supplemental materials, annexes, and appendices were further aged, including the EOC position checklists, which were dated 2004.

Additionally, we found that the EOP was not comprehensive and did not address all required elements. Although some of these elements were addressed, in part or in whole, in other campus processes, procedures, or programs, they were not documented or referenced in the campus EOP. Key plan elements that were missing included, but were not limited to, provisions for training and assignment of student health center staff in disasters that may require emergency medical services; addressing the unique needs of special populations on campus, including international students and individuals with disabilities or other functional needs; and annexes that detail deny-entry, lockdown, and accounting-for-all-persons procedures.

Further, we found that the campus did not have a collaborative process to allow various campus departments with responsibilities for emergency response procedures to review the EOP and provide feedback regarding potential issues, opportunities for improvement, and comments for consideration.

A current and comprehensive EOP provides assurance that the campus will be able to effectively respond to emergencies, decreases the risk of loss and injury to the campus community, and helps to ensure that roles and responsibilities are clearly outlined.

RECOMMENDATION

We recommend that the campus:

a. Update the EOP to address all required elements.

b. Distribute the updated EOP, including all supporting materials, to the campus EOC team and other key emergency personnel.

c. Distribute the updated EOP to the campus community.

d. Establish a process for the annual review and update of the EOP that includes collaboration with campus personnel across the various departments with responsibilities for emergency response procedures and those who have specialized knowledge of the needs of special populations.
MANAGEMENT RESPONSE

We concur. The campus will take the following actions by February 20, 2020:

a. Update the EOP to address all required elements.

b. Distribute the updated EOP, including all supporting materials, to the campus EOC team and other key emergency personnel.

c. Distribute the updated EOP to the campus community.

d. Establish a process for the annual review and update of the EOP that includes collaboration with campus personnel across the various departments with responsibilities for emergency response procedures and those who have specialized knowledge of the needs of special populations.

2. ROLES AND RESPONSIBILITIES

OBSERVATION

Communication regarding roles and responsibilities for emergency management functions needed improvement.

Specifically, we found that:

- The assignment of the emergency manager position and its roles and responsibilities had not been clearly communicated and defined.

- The campus did not have designated secondary and tertiary emergency managers.

- The campus did not have procedures or practices to notify newly appointed EOC team members of their assignment to the EOC team, provide them a description of their roles and responsibilities, and assign them to required emergency training.

- Not all EOC roster positions were clearly assigned, including primary and alternate safety and public information officers, the finance/administration section chief, and alternates for the finance/administration, logistics, and planning/intelligence section chiefs.

Clearly defined and communicated roles and responsibilities help ensure that emergency management duties are understood and performed in compliance with campus and systemwide requirements.

RECOMMENDATION

We recommend that the campus:

a. Formally designate and communicate roles and responsibilities for the emergency manager position.
b. Develop an onboarding process for EOC team members, including communication of the employee’s appointment to their position in the EOC team, roles and responsibilities, and training requirements pertaining to the employee’s designated position.

c. Clearly identify and designate EOC team members to all required positions, including the positions noted above.

**MANAGEMENT RESPONSE**

We concur. The campus will take the following actions by February 20, 2020:

a. Formally designate and communicate roles and responsibilities for the emergency manager position.

b. Develop an onboarding process for EOC team members, including communication of the employee’s appointment to their position in the EOC team, roles and responsibilities, and training requirements pertaining to the employee’s designated position.

c. Clearly identify and designate EOC team members to all required positions, including the positions noted above.

3. **EMPLOYEE EMERGENCY TRAINING**

**OBSERVATION**

The campus did not ensure that employees completed required emergency preparedness training.

Systemwide policy requires that new employees complete an emergency preparedness overview training within one year of employment and that specialized training be provided to employees designated as building coordinators, floor marshals, and EOC team members. We noted that new-hire emergency preparedness training is provided both through online and in-person courses administered by the emergency manager and that the emergency manager also provides in-person specialized training sessions for building coordinators and floor marshals. However, we found that EOC team training was limited to training provided before tabletop exercises, which included an overview of the EOC’s operational structure and its compliance with the National Incident Management System, Standardized Emergency Management System, and Incident Command System. The campus did not have a process to provide EOC team members with initial role-specific training.

Additionally, we reviewed the training records from the years 2017 and 2018 and found that:

- Six of the 15 new hires we reviewed did not complete emergency preparedness training within the first year of their employment.

- There was no documentation showing that six of the 17 EOC team members we reviewed attended specialized training annually.
• None of the ten building coordinators and floor marshals we reviewed completed specialized refresher training annually.

Further, we found that the campus did not have a process to monitor employee completion of required emergency training and to follow up when training was not completed.

Monitoring emergency preparedness training helps to ensure that the emergency program is in compliance with systemwide requirements and that employees and emergency personnel are prepared to respond in emergencies.

RECOMMENDATION

We recommend that the campus:

a. Provide role-specific training to existing EOC team members and develop a process to provide such training to future team members when they are appointed to their roles.

b. Develop a process to monitor the completion of new-hire emergency preparedness training and specialized training provided to building coordinators, floor marshals, and EOC team members in order to ensure timely completion, and to follow up with employees when training is not completed.

c. Communicate the training requirements and monitoring processes to key campus personnel.

MANAGEMENT RESPONSE

We concur. The campus will take the following actions by June 20, 2020:

a. Provide role-specific training to existing EOC team members and develop a process to provide such training to future team members when they are appointed to their roles.

b. Develop a process to monitor the completion of new-hire emergency preparedness training and specialized training provided to building coordinators, floor marshals, and EOC team members in order to ensure timely completion, and to follow up with employees when training is not completed.

c. Communicate the training requirements and monitoring processes to key campus personnel.

4. EMERGENCY EXERCISES

OBSERVATION

The campus did not conduct, complete, and document required emergency exercises, simulations, and evacuation drills in accordance with systemwide policy.

We reviewed emergency exercise records for the years 2017 and 2018 and found that:
- Emergency response drills and functional exercises were not conducted on an annual and biennial basis, respectively, as required by Executive Order (EO) 1056, *California State University Emergency Management Program*.

- For 17 buildings, documentation showing that fire evacuation drills were conducted annually did not exist.

- For seven buildings, after-action reports for fire evacuation drills did not include lessons learned and identification of opportunities for improvement.

- Fire evacuation drills did not incorporate individuals with special needs unless such an individual was in the building at the time of the drill.

- Fire evacuation drills were not conducted outside of standard business hours to test evacuation procedures for buildings with extended hours of access.

Completing and documenting emergency drills and simulations ensure that emergency team members, students, faculty, and staff 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. Conduct emergency drills and functional exercises on an annual and biennial basis, respectively.

b. Establish a process to ensure that all campus buildings conduct fire evacuation drills on an annual basis, that the drill results and lessons learned are documented with an after-action report, and that the after-action reports are provided to and reviewed by the emergency management team.

c. Incorporate testing of the evacuation of individuals with special needs into fire evacuation drills, where applicable.

d. Review building access hours and incorporate after-hours evacuation drills for buildings with extended hours of access.

**MANAGEMENT RESPONSE**

We concur. The campus will take the following actions by February 20, 2020:

a. Conduct emergency drills and functional exercises on an annual and biennial basis, respectively.

b. Establish a process to ensure that all campus buildings conduct fire evacuation drills on an annual basis, that the drill results and lessons learned are documented with an
after-action report, and that the after-action reports are provided to and reviewed by the emergency management team.

c. Incorporate testing of the evacuation of individuals with special needs into fire evacuation drills, where applicable.

d. Review building access hours and incorporate after-hours evacuation drills for buildings with extended hours of access.

5. EMERGENCY OPERATIONS CENTER AND EMERGENCY RESOURCES

OBSERVATION

The EOC was not adequately equipped to ensure that it would be functional in the event of an emergency, and the campus roster of emergency resources needed improvement.

We reviewed the campus’ primary EOC location, including the equipment and resources available at the location, and we found that:

• Standard operating procedures had not been developed for operation of the EOC, including an initial assessment of the EOC location’s operability and procedures to relocate the EOC to a secondary location when deemed appropriate, information processing systems, communication to outside entities, management of resource requests, and use of action plans.

• The EOC was not equipped with current versions of the EOP and all supplemental materials, annexes, and appendices.

• Back-up power options had not been clearly identified to ensure that the EOC would remain operable in the event of a loss of power.

We also reviewed the campus’ roster of emergency resources and found that it did not provide sufficient detail to adequately identify the resources that may be needed to operate the EOC for at least 72 hours. Specifically, we found that:

• The emergency roster was not dated to document its most recent review and revision. As a result, we were unable to verify that the roster had been reviewed and updated at least annually, as required by systemwide policy.

• The emergency roster did not include the quantity and location of resources or who was responsible for maintaining the resources.

• Items on the emergency roster were not always available. We reviewed ten emergency resources on the list, including items that were designated as available at the EOC, and could not find four of them.
• The campus had not developed a roster of contractors to identify vendors or contractors that would be used to provide resources, equipment, or services that may be needed during emergency operations.

Maintaining a well-equipped EOC and having adequate emergency resources provides assurance that the campus emergency team will have all necessary resources available to respond to and manage emergency situations.

RECOMMENDATION

We recommend that the campus:

a. Develop standard operating procedures for EOC operations, including the items noted above.

b. Equip the EOC with a hard copy of the EOP and its supplemental materials, annexes, and appendices, and save soft copies of the documents to each of the EOC’s laptops.

c. Identify back-up power solutions for the EOC and/or establish procedures for the relocation of the EOC to a secondary location in the event of a loss of power.

d. Inventory existing campus resources to identify the those that are immediately available, and update the roster of emergency resources to ensure it is complete, accurate, and in compliance with systemwide requirements.

e. Develop a roster of vendors/contractors that could be used for emergency resource purchases.

f. Develop a process to review and update the roster of emergency resources and vendors/contractors annually.

MANAGEMENT RESPONSE

We concur. The campus will take the following actions by February 20, 2020:

a. Develop standard operating procedures for EOC operations, including the items noted above.

b. Equip the EOC with a hard copy of the EOP and its supplemental materials, annexes, and appendices, and save soft copies of the documents to each of the EOC’s laptops.

c. Identify back-up power solutions for the EOC and/or establish procedures for the relocation of the EOC to a secondary location in the event of a loss of power.

d. Inventory existing campus resources to identify those that are immediately available, and update the roster of emergency resources to ensure it is complete, accurate, and in compliance with systemwide requirements.
e. Develop a roster of vendors/contractors that could be used for emergency resource purchases.

f. Develop a process to review and update the roster of emergency resources and vendors/contractors annually.

6. BUILDING COORDINATOR PROGRAM

OBSERVATION

The campus had not clearly defined the BCP, the listing of building coordinators and floor marshals was out of date, and building-specific emergency action plans (EAP) were not always developed and maintained as required.

We noted that the campus had developed EAPs for most campus buildings and assigned building coordinators and floor marshals, who were responsible for the building’s emergency procedures. However, we found that the campus had not developed a written program or policy that clearly outlined the BCP, including roles and responsibilities for the program and its components, training requirements for building coordinators and floor marshals, the frequency with which the EAPs must be updated, and the program’s integration with the campus’ emergency preparedness team. As a result, the guidance that existed for the program was limited to the information provided in training offered to building coordinators and floor marshals.

Additionally, we reviewed the building-specific EAPs and the listing of building coordinators and floor marshals, and we found that:

- EAPs for 39 campus buildings had not been reviewed and updated annually.

- Two buildings did not have an EAP or assigned building coordinators and floor marshals.

- EAPs did not always contain all required information, including procedures for reporting emergencies, accounting for all employees, performing rescue/medical duties, making accommodations for people with disabilities, and listing contact information for employees who may have questions regarding the EAP. We noted that the campus had developed a template EAP in 2018 that included these items; however, only a handful of EAPs had been updated with this template.

- The listing of building coordinators and floor marshals was out of date. Specifically, two employees included on the listing were surveyed during the audit and responded stating that they were no longer with the university or were no longer a building coordinator.

- Four campus employees had been assigned as the building coordinator for multiple buildings.

Further, we found that the campus did not have a process to ensure that auxiliaries with buildings or facilities off-campus had developed and maintained EAPs for these locations. In
addition, we found that two off-campus locations operated by auxiliary organizations had not
developed EAPs.

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. Develop a written BCP that outlines roles and responsibilities, training requirements,
built EAP requirements, and the program’s integration with the campus’ emergency
preparedness team.

b. Update all building EAPs to include the procedures noted above, and assign building
coordinators and floor marshals to all buildings.

c. Reiterate responsibilities for maintaining building EAPs to the appropriate campus
personnel.

d. Develop a process to ensure that EAPs are reviewed, updated, and submitted to the
emergency management team and the building coordinator listing is updated accordingly
on an annual basis.

e. Develop a process to ensure that campus auxiliary organizations develop and maintain
EAPs for off-campus buildings or facilities.

MANAGEMENT RESPONSE

We concur. The campus will take the following actions by February 20, 2020:

a. Develop a written BCP that outlines roles and responsibilities, training requirements,
built EAP requirements, and the program’s integration with the campus’ emergency
preparedness team.

b. Update all building EAPs to include the procedures noted above, and assign building
coordinators and floor marshals to all buildings.

c. Reiterate responsibilities for maintaining building EAPs to the appropriate campus
personnel.

d. Develop a process to ensure that EAPs are reviewed, updated, and submitted to the
emergency management team and the building coordinator listing is updated accordingly
on an annual basis.

e. Develop a process to ensure that campus auxiliary organizations develop and maintain
EAPs for off-campus buildings or facilities.
7. MUTUAL AID AGREEMENTS

OBSERVATION

The campus had not entered into mutual aid agreements with external stakeholders whose assistance may be requested in the event of an emergency.

In the event of an emergency in which the campus’ resources are insufficient to adequately respond to the incident, the campus may request assistance of local city and/or county entities. However, we found that the campus had not entered into mutual aid agreements or memorandums of understanding with the local government, local law enforcement agency, or local fire department/emergency medical services to formally document these relationships and detail the assistance that would be provided.

Formal mutual aid agreements document the resources, services, and support external entities will provide during an incident and can lead to improved assistance and resources in the event of an emergency.

RECOMMENDATION

We recommend that the campus enter into mutual aid agreements with appropriate jurisdictions from which assistance is expected to be received and/or for which such assistance may be provided in the event of an emergency.

MANAGEMENT RESPONSE

We concur. The campus will enter into mutual aid agreements with appropriate jurisdictions from which assistance is expected to be received and/or for which such assistance may be provided in the event of an emergency by June 20, 2020.
GENERAL INFORMATION

BACKGROUND

The CSU consists of 23 campuses, with approximately 479,000 students and more than 50,000 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.

The Federal Emergency Management Agency (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. EO 1056, California State University Emergency Management Program, guides campuses on developing and maintaining an emergency management program on each campus. At the systemwide level, Systemwide Risk Management (SRM) 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 2018, SRM issued coded memorandum Risk Management 2018-1, Emergency Management, to replace out-of-date sections in EO 1056 and further define the responsibilities and needs of an effective...
At Sacramento State, the vice president for administration and business affairs has been designated by the president as the emergency executive. The emergency management program has been further delegated to the chief of police, who assigned the emergency manager position to a police corporal and is responsible for the day-to-day administration of the program, including planning, implementation, and maintenance of the program. The emergency management program includes maintaining the campus EOP, training the emergency management team, stocking and maintaining an adequate EOC, and scheduling and providing emergency training and exercises. The emergency manager was also responsible for the BCP until early 2019, when the BCP was moved to risk management services.

SCOPE

We visited the Sacramento State campus from June 10, 2019, through July 18, 2019. Our audit and evaluation included the audit tests we considered necessary in determining whether operational and administrative controls are in place and operative. The audit focused on procedures in effect from January 1, 2017, through July 18, 2019.

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:

- 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
- NFPA 1600, Standard on Disaster/Emergency Management and Business Continuity/Continuity of Operations Programs
- Government Code §8607
- Government Code §13402 and §13403
- EO 943, University Health Services
- EO 1056, California State University Emergency Management Program
- Coded memorandum Human Resources 2004-10, Mutual Aid
- Coded memorandum Risk Management 2018-01, Emergency Management
- Technical memorandum Risk Management, CSU Campus Emergency Plan Topics
- Technical memorandum Risk Management, CSU Building Coordinator Program
- Sacramento State Emergency Operations Plan
- Sacramento State Emergency Response Manual

AUDIT TEAM

Audit Manager: Jennifer Rethwisch
Internal Auditor: Elston Wyatt