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March 12, 2020

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

Dear Dr. Coley:

**Subject: Audit Report 19-07, Health and Safety, California State Polytechnic University, Pomona**

We have completed an audit of *Health and Safety* 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

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## **HEALTH AND SAFETY**

**California State Polytechnic University, Pomona**

Audit Report 19-07  
February 12, 2020

## EXECUTIVE SUMMARY

### OBJECTIVE

The objectives of the audit were to ascertain the effectiveness of operational and administrative controls related to health and safety (HS) and to ensure compliance with relevant federal and state regulations; Trustee policy; Office of the Chancellor (CO) directives; and campus procedures.

### CONCLUSION

Based upon the results of the work performed within the scope of the audit, except for the weaknesses described below, the operational and administrative controls for HS as of December 12, 2019, taken as a whole, provided reasonable assurance that risks were being managed and objectives were met.

Overall, the campus had a framework for HS in which the environmental health and safety (EHS) department provided guidance to the colleges and departments. However, we found that the campus did not always provide HS training to students working with hazardous materials (HAZMAT) or other hazards and did not always retain proper records demonstrating completion. Additionally, the campus did not consistently identify, assign, and monitor HS training for employees working with hazards and did not maintain all records of training. Furthermore, the campus did not always label HAZMAT and hazardous waste (HAZWASTE) containers, including those for universal waste, in accordance with regulatory requirements. Also, the campus did not always conduct regular maintenance and inspections of the working conditions of safety equipment and did not consistently perform and monitor inspections of laboratories and other instructional workshops, such as art studios. In addition, the campus did not have a formal Unit 6 Joint Safety Committee (JSC) as required by the Unit 6 Collective Bargaining Agreement, Article 28.10. Further, the campus *Exposure Control Plan* (ECP) was missing an element required by 8 California Code of Regulations (CCR) §5193, *Bloodborne Pathogens*, regarding proper maintenance of sharps logs.

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

## **OBSERVATIONS, RECOMMENDATIONS, AND RESPONSES**

### **1. STUDENT HEALTH AND SAFETY TRAINING**

#### **OBSERVATION**

The campus did not always provide HS training to students working with HAZMAT or other hazards and did not always retain proper records demonstrating completion.

We reviewed training procedures and records for six courses and a campus-sponsored extracurricular activity in which students worked with HAZMAT or other laboratory hazards, and we found that:

- The department responsible for one course did not consistently retain student HS training records for more than a semester.
- The campus-sponsored extracurricular activity did not consistently record HS training for student participants.
- One course did not have HS training documented for all of its enrolled students.

An effective and well-documented student HS training program increases awareness of HAZMAT and HAZWASTE and reduces potential injuries, accidents, and liabilities to the campus.

#### **RECOMMENDATION**

We recommend that the campus:

- a. Remind all appropriate college administrators, staff, and faculty of the importance of performing and documenting student HS training.
- b. Develop and implement procedures to identify extracurricular activities in which students work with HAZMAT or other hazards, including steps to identify parties responsible for assigning and monitoring appropriate HS training.

#### **MANAGEMENT RESPONSE**

We concur. The campus will:

- a. Remind all appropriate college administrators, staff, and faculty of the importance of performing and documenting student HS training.
- b. Develop and implement procedures to identify extracurricular activities in which students work with HAZMAT or other hazards, including steps to identify parties responsible for assigning and monitoring appropriate HS training.

Expected completion date: July 31, 2020

## 2. EMPLOYEE HEALTH AND SAFETY TRAINING

### OBSERVATION

The campus did not consistently identify, assign, and monitor HS training for employees working with hazards and did not maintain all records of training.

We reviewed training records for 24 employees and found that:

- Four employees did not have new-hire HS training on record.
- Eight employees did not complete annual HAZWASTE training.

Effective administration of employee HS training helps to ensure compliance and increase safety awareness, and reduces potential injuries, accidents, and liabilities to the campus.

### RECOMMENDATION

We recommend that the campus

- a. Develop and implement an appropriate process that establishes the responsibilities for identifying and providing HS training to all employees who require it, including annual HAZWASTE training.
- b. Ensure that all completed HS training is properly documented and accessible.

### MANAGEMENT RESPONSE

We concur. The campus will:

- a. Develop and implement an appropriate process that establishes the responsibilities for identifying and providing HS training to all employees who require it, including annual HAZWASTE training.
- b. Ensure that all completed HS training is properly documented and accessible.

Expected completion date: June 30, 2020

## 3. HAZARDOUS WASTE AND MATERIALS

### OBSERVATION

The campus did not always label HAZMAT and HAZWASTE containers, including those for universal waste, in accordance with regulatory requirements.

We reviewed 18 locations identified as conducting activities that involve HAZMAT, HAZWASTE, or universal waste, and we found that:

- At two locations, HAZMAT containers did not have labels identifying the contents of the container or labels providing a written or graphic hazard warning.
- At three locations, HAZWASTE containers did not have a label indicating the date the waste was generated or indicating the hazardous properties of the waste.
- At two locations, HAZWASTE had been accumulated past the appropriate time period.
- At four locations, universal waste was stored without date labels.

Additionally, at one research laboratory, we found that food and drink for human consumption was stored in a laboratory refrigerator alongside HAZMAT. There was a notice posted on the refrigerator prohibiting storage of food or drink in the appliance. The laboratory supervisor for the location was on sabbatical.

Proper labeling of HAZMAT and HAZWASTE communicates potential danger and reduces the risk of accidents, injuries, and potential liability to the campus.

#### **RECOMMENDATION**

We recommend that the campus remind all personnel involved in handling HAZMAT, HAZWASTE, or universal waste of regulatory requirements regarding proper labeling of containers and requirements for timely disposal, and provide training as needed.

#### **MANAGEMENT RESPONSE**

We concur. The campus will remind all personnel involved in handling HAZMAT, HAZWASTE, or universal waste of regulatory requirements regarding proper labeling of containers and requirements for timely disposal, and provide training as needed.

Expected completion date: May 31, 2020

## **4. SAFETY EQUIPMENT AND INSPECTIONS**

#### **OBSERVATION**

The campus did not always conduct regular maintenance and inspections of the working conditions of safety equipment.

We reviewed 18 locations identified as conducting activities that involved HAZMAT, HAZWASTE, or universal waste, as well as campus procedures and maintenance records, and we found that:

- Fire extinguishers throughout campus were not consistently inspected on a monthly basis.
- Emergency eyewash and shower stations throughout campus were not consistently inspected on a monthly basis.

- In one location, the emergency eyewash and shower station was obstructed.
- In two locations, spill kits or other comparable equipment was not available on site.
- Records of annual air handler unit inspections were unavailable for nine locations.

Regular inspection of safety equipment helps to ensure that equipment is in good working condition and helps to ensure a healthy and safe environment for employees and students.

#### **RECOMMENDATION**

We recommend that the campus:

- a. Develop and implement a written process to ensure that all safety equipment is subject to routine and comprehensive maintenance and inspections.
- b. Remind faculty and staff of the importance of ensuring clear access to safety equipment.
- c. Provide areas storing HAZMAT and HAZWASTE with spill response equipment.
- d. Develop a process to ensure that annual air handler unit inspections are documented and easily accessible.

#### **MANAGEMENT RESPONSE**

We concur. The campus will:

- a. Develop and implement a written process to ensure that all safety equipment is subject to routine and comprehensive maintenance and inspections.
- b. Remind faculty and staff of the importance of ensuring clear access to safety equipment.
- c. Provide areas storing HAZMAT and HAZWASTE with spill response equipment.
- d. Develop a process to ensure that annual air handler unit inspections are documented and easily accessible.

Expected completion date: July 31, 2020

## **5. LABORATORY AND WORKSHOP INSPECTIONS**

#### **OBSERVATION**

The campus did not consistently perform and monitor inspections of laboratories and other instructional workshops, such as art studios, that use HAZMAT.

We found that the campus *Injury and Illness Prevention Program* (IIPP) assigned the responsibility of regular and systematic inspections of departmental areas to each respective

department. The campus *Chemical Hygiene Plan* required the chemical hygiene officer, a member of EHS, to conduct periodic inspections. Additionally, the IIPP stated that EHS is to conduct verification audits of moderate- and high-risk areas and gives EHS the authority to conduct periodic unscheduled inspections.

We reviewed five locations with HAZMAT and found that in three locations, regular and systematic inspections were not completed by either the department or EHS.

Performing regular and systematic inspections helps to ensure compliance with the campus IIPP; increases the likelihood of identifying unsafe conditions; and reduces potential accidents, injuries, and liabilities to the campus.

#### **RECOMMENDATION**

We recommend that the campus strengthen and enforce requirements for the monitoring and documentation of workplace inspections and remind all appropriate department administrators, staff, and faculty of the importance of regular and systematic inspections.

#### **MANAGEMENT RESPONSE**

We concur. The campus will strengthen and enforce requirements for the monitoring and documentation of workplace inspections and remind all appropriate department administrators, staff, and faculty of the importance of regular and systematic inspections.

Expected completion date: June 30, 2020

## **6. SAFETY COMMITTEE**

#### **OBSERVATION**

The campus did not have a formal Unit 6 JSC as required by the Unit 6 Collective Bargaining Agreement, Article 28.10.

We were unable to find evidence that the Unit 6 JSC met on a monthly or mutually-agreed-upon basis, and we were unable to locate formal documentation of the committee's membership.

A safety committee helps to facilitate communication of health and safety issues and requirements across campus and recommends safety regulations, guidelines, training programs, and necessary corrective actions related to maintaining safe working conditions.

#### **RECOMMENDATION**

We recommend that the campus formally establish the Unit 6 JSC and retain documentation of its membership and meeting schedule.

**MANAGEMENT RESPONSE**

We concur. The campus will formally establish the Unit 6 JSC and retain documentation of its membership and meeting schedule.

Expected completion date: May 31, 2020

**7. EXPOSURE CONTROL PLAN**

**OBSERVATION**

The campus ECP was missing an element required by 8 CCR §5193, *Bloodborne Pathogens*.

Specifically, we found that the campus plan did not include procedures for gathering information required by the sharps injury log.

A current and complete ECP with all required elements improves compliance with regulatory requirements and promotes a healthy and safe environment for employees and students.

**RECOMMENDATION**

We recommend that the campus review and update the ECP to include procedures for gathering information required by the sharps injury log.

**MANAGEMENT RESPONSE**

We concur. The campus will review and update the ECP to include procedures for gathering information required by the sharps injury log.

Expected completion date: April 30, 2020

## GENERAL INFORMATION

### BACKGROUND

California state regulations require all employers, including the California State University (CSU), to provide a safe and healthy work environment. Each campus has a designated EHS program administrator that is responsible for developing and maintaining a campus HS program.

All CSU campuses purchase hazardous materials for both instructional and research purposes, most prominently in colleges that focus on the sciences, fine arts, and liberal arts. In addition, campus maintenance departments such as custodial services, facilities, and auto shops may use materials that are known to have properties that are harmful to humans and the environment. Nearly all of the areas that use hazardous materials generate hazardous waste that is subject to strict regulations for safe and proper storage, transport, and disposal.

California regulations relating to HS are primarily codified in the California *Health and Safety Code* (HSC) and in Titles 8 and 22 of CCR. California's Division of Occupational Safety and Health (Cal/OSHA) is primarily responsible for the enforcement of the state's occupational HS laws and regulations. Title 8 of the CCR addresses HAZMAT safety, including, but not limited to, training, communication, storage, and safety. Specific to laboratory environments, the *Occupational Exposure to Hazardous Chemicals in Laboratories* standard (8 CCR 5191) requires that the employer designate a chemical hygiene officer and have a written chemical hygiene plan that includes, among other things, provisions for worker training, criteria for the use of personal protective equipment and engineering controls, and standard operating procedures for handling HAZMAT. Title 22 of the CCR addresses HAZWASTE management.

The primary CSU HS policy is Executive Order (EO) 1039, *Occupational Health and Safety*. This policy requires campuses to develop, implement, and maintain a HS program and also addresses student HS training. EO 1069, *Risk Management and Public Safety*, delegates systemwide administration oversight and programmatic responsibility for environmental HS to Systemwide Risk Management.

At California State Polytechnic University, Pomona (CPP), the responsibility and authority to develop and maintain the campus IIPP and environmental compliance programs are delegated to the manager of EHS. EHS is under a newly created organizational unit, strategic enterprise risk management, which also encompasses risk management and reports to an interim associate vice president in the division of Administrative Affairs. The staff of five includes the manager, a chemical hygiene officer, a chemical hygiene/biosafety officer, a lab safety coordinator, and an environmental specialist. CPP EHS collaborates with all university programs, departments, and organizations, providing consultation regarding legal requirements for the protection of individuals and the environment, safety training, inspections to improve the level of compliance, and the abatement of hazardous or unsafe conditions on campus.

In 2017, due to HS concerns at two CSU campuses, the Joint Legislative Audit Committee directed the California State Auditor (CSA) to review HS compliance at four campuses (Channel Islands, Sacramento, San Diego, and Sonoma), as well as oversight by the CO. The review noted several issues, including observations relating to the annual evaluation of chemical

plans; monitoring and documenting of student and employee HS training; and consistent and timely inspections of safety equipment. Based on the nature and trends of the observations noted in the CSA review, Audit and Advisory Services informed the Board of Trustees that it would perform reviews at all CSU campuses in 2019.

## SCOPE

We visited the CPP campus from November 4, 2019, through December 12, 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, 2016 to December 12, 2019.

Specifically, we reviewed and tested:

- Oversight and administration of the campus HS program, including clearly defined roles and responsibilities; appropriate safety and chemical committees; departmental self-audits and monitoring practices; and current policies and procedures.
- The adequacy and availability of safety equipment, including evaluation of the chemical hygiene plan; provision of personal protective equipment; and regular inspections and monitoring of key safeguards and engineering controls.
- Proper storage and safety of HAZMAT, including procurement; maintenance of accurate inventories; appropriate labeling and storage practices; and access controls.
- Communications and training processes, including evaluation of the hazard communication plan; availability of material safety data sheets; asbestos notifications and signage; and documentation and monitoring of student and employee training.
- Whether appropriate safety programs were in place, when applicable, for radiation sources; laser safety; bloodborne pathogens; respiratory protection; and spill containment.
- Appropriate identification, storage, and monitoring of accumulated hazardous waste.

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 operational and administrative controls, included interviews, walkthroughs, and detailed testing on certain aspects of the HS program. The review was limited to gaining reasonable assurance that essential elements of the HS 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; Trustee policy; Office of the Chancellor directives; and campus procedures; as well as sound administrative practices and consideration of the potential impact of significant risks. 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:

- 10 Code of Federal Regulations (CFR) Part 20, *Standards for Protection Against Radiation*
- 29 CFR Part 1910, *Occupational Safety and Health Standards*
- California HSC Division 20, *Miscellaneous Health and Safety Provisions*
- CCR Title 8, *Industrial Relations*
- CCR Title 17, *Public Health*
- CCR Title 19, *Public Safety*
- CCR Title 22, Division 4.5, *Environmental Health Standards for the Management of Hazardous Waste*
- EO 1031, *Systemwide Records/Information Retention and Disposition Schedules Implementation*
- EO 1039, *California State University - Occupational Health & Safety Policy*
- EO 1069, *Risk Management and Public Safety*
- Collective Bargaining Agreement, Unit 6, Article 28, *Health and Safety*
- CPP *Chemical Hygiene Plan*
- CPP *Exposure Control Plan*
- CPP *Guidebook for the Use of Personal Protective Equipment*
- CPP *Hazard Communication Manual*
- CPP *Injury and Illness Prevention Program*
- CPP *Laser Safety Manual*
- CPP *Procurement Credit Card User's Handbook*
- CPP *Radiation Safety Manual*
- CPP *Respiratory Protection Plan*
- CPP *Universal Safe Work Practices*

**AUDIT TEAM**

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