

**DISABILITY SUPPORT AND ACCOMMODATIONS**

**CALIFORNIA STATE UNIVERSITY,  
SAN BERNARDINO**

**Report Number 02-34  
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## **ABBREVIATIONS**

AAES	Academic Affairs Educational Support
AB	Assembly Bill
ACRC	Assistive Computing Resource Center
ADA	Americans with Disabilities Act
ASI	Associated Students, Inc.
AT/AP	Assistive Technology/Assistance Program
BA	Business Affairs
BP	Business Policy
CEL	College of Extended Learning
CFR	Code of Federal Regulations
CO	Chancellor's Office
CSU	California State University
CSU	California State University, San Bernardino
DSA	Disability Support and Accommodations
EO	Executive Order
Foundation	CSU San Bernardino Foundation
MOU	Memorandum of Understanding
NES	National Evaluation Systems
NSE	National Student Exchange
SAM	State Administrative Manual
SIS+	Student Information Systems Plus
SSD	Services to Students with Disabilities
UC	University of California

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## INTRODUCTION

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### PURPOSE

Our overall audit objective was to ascertain the effectiveness of existing policies and procedures related to the administration of the disability support and accommodations (DSA) program and to determine the adequacy of controls over the related processes to ensure compliance with relevant governmental regulations, Trustee policy, Office of the Chancellor directives, and campus procedures.

Within the overall audit, specific goals included making a determination as to whether:

- ▶ Administration and management of the DSA program provide effective internal control; clear lines of organizational authority; delegations of authority; formation of an Advisory Committee on Services to Students with Disabilities; and documented policies and procedures.
- ▶ The adequacy of and satisfaction with the DSA program are consistently monitored and assessed.
- ▶ Campus notification and grievance processes ensure appropriate compliance with regulatory requirements and timely and adequate resolution of noted disability-related issues.
- ▶ Persons and campus areas providing disabled student services possess the necessary qualifications and are appropriately trained and aware of their roles and responsibilities.
- ▶ Reasonable access and accommodations are provided to applicants and employees in compliance with Title I of the Americans with Disabilities Act (ADA), and student disability services comply with state law and California State University (CSU) and campus policies.
- ▶ Verification of disability is timely and adequately performed, and appropriate documentation is provided in compliance with CSU and campus policies.
- ▶ Disability records and information are properly maintained, safeguarded, and retained in accordance with state and federal regulations and CSU policy.
- ▶ Campus programs, services, and activities are readily accessible to all persons, and adaptive aids and other equipment are properly maintained and safeguarded.
- ▶ Campus disaster plans include evacuation procedures for disabled persons.
- ▶ Budgeting procedures adequately address program funding and ensure effective accounting and management control, and grant funds are administered in compliance with sponsor agreements.
- ▶ Chargebacks for disability support services are complete, accurate, valued properly, and processed timely, and credit is received.

## SCOPE AND METHODOLOGY

This review emphasized, but was not limited to, compliance with state and federal laws, Board of Trustee policies, and Office of the Chancellor and campus policies, letters, and directives. July 2000 to March 2002 was the primary period of review.

We focused primarily upon internal, administrative, compliance, and operational controls over the management of the DSA program. Specifically, we reviewed and tested policies, procedures, and processes for:

- ▶ Monitoring the quality and effectiveness of campus DSA services.
- ▶ Soliciting and resolving student complaints and grievances relating to programmatic, physical, and other accessibility issues.
- ▶ Hiring DSA program staff and campus-wide training practices.
- ▶ Providing reasonable access and accommodations to applicants and employees.
- ▶ Verifying disabilities and providing (or declining) student disability support services.
- ▶ Maintaining and protecting disability information, including data in automated systems.
- ▶ Providing programs, services, and activities that are readily accessible to disabled individuals.
- ▶ Administering program and grant funds for disability support and other related services.
- ▶ Authorizing and processing expenditures of program funds that include, but are not limited to, grant awards, miscellaneous revenues, and petty cash.
- ▶ Valuing, processing, and collecting chargebacks for DSA services provided to self-supporting operations.
- ▶ Recording, safeguarding, and maintaining inventory for adaptive aids and equipment.

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## BACKGROUND

As a result of a systemwide risk assessment conducted by the Office of the University Auditor during the last quarter of 1999, the Board of Trustees, at its January 2002 meeting, directed that *Disability Support and Accommodations* be reviewed.

The proposed scope of the audit as presented in Attachment B, Audit Item 2 of the January 29-30, 2002, meeting of the Committee on Audit stated that the review would include all CSU programs for disabled employees, students, and visitors including accessibility of facilities, provision of enabling supportive services and use of adaptive technologies. Potential impacts include excessive costs, adverse publicity,

inadequate accommodations and services, legal liabilities, and regulatory fines and sanctions. A related audit, *Handicapped Access*, was performed in 1988.

Beginning in the early 1970s, both the federal government and the state of California adopted laws that had far-reaching effects on improving services to students with disabilities and on the availability of these services at the postsecondary level. In 1973, Congress adopted the Federal Rehabilitation Act ensuring equal opportunity for persons with disabilities in the fields of employment and education and prohibiting discrimination on the basis of disability by any agency, including educational institutions that receive federal funds. In June 1977, the federal government issued regulations implementing Section 504 of the Rehabilitation Act of 1973. In response to Section 504 regulations, CSU campuses prepared self-evaluations that identified steps needed to ensure that students with disabilities had equal access to educational opportunities. In March 1980 and in response to the 1979 Budget Act, CSU also developed a policy statement that formalized the objectives of the Disabled Students Program to increase the enrollment of students with disabilities in the total student population and to facilitate their access to all educational programs. The *Policy for the Provision of Services to Students with Disabilities* detailed program goals and objectives, definitions of disabilities, and support services to be offered. The policy became the basis from which campus programs were developed and justified enrollment and funding requests. In 1980, the CSU Systemwide Advisory Committee on Services to Students with Disabilities was also established.

In 1989, the CSU revised the 1980 policy statement and incorporated disability services identified in Assembly Bill (AB) 746 into the new *Policy for the Provision of Services to Students with Disabilities*. In 1990, the federal government reinforced its commitment to individuals with disabilities by enacting the ADA. The ADA reaffirmed Section 504 of the Rehabilitation Act of 1973 regulations and extended the discrimination prohibition beyond the campus to businesses and organizations that did not receive federal funds. Additionally, the ADA detailed additional criteria in the areas of employment, new construction or renovation, transportation, and telecommunications. The ADA also required the appointment of an ADA coordinator and the development of a self-evaluation and transition plan to itemize compliance steps.

In November 1995, the Bureau of State Audits issued a report, *CSU and UC: Campuses Generally Provide Access for Students with Disabilities*, including four CSU and two University of California (UC) campuses. The report noted that overall, the chancellor's office (CO) of the CSU had developed adequate policies requiring respective campuses to comply with provisions of the ADA; all four campuses had developed adequate guidelines to meet the needs of, and provide access to, their students with disabilities; and students at all four campuses indicated a high level of satisfaction with services provided by their respective campuses. Based on the audit results, the Bureau of State Audits recommended that the CO increase campus awareness of ADA requirements by instructing its campuses to provide training classes or seminars for faculty and staff, and address conditions and remove barriers that may deny access to its students. The CO concurred with the findings and most of the recommendations in the report.

Disabled student enrollment at the CSU has grown from 3,760 to 9,699 students (a 158% increase) from fall 1980 to fall 2001. Additionally, the number of students by disability category (visual limitation, communication disability, deafness, mobility limitation, learning disability, and other functional limitations) changed dramatically reflecting a growth of students with certain disabilities seeking services from campus disability support services programs. Most notably, the number of students with specific learning disabilities increased from 124 in fall 1980 (3.3% of students served) to 4,078 (42% of students served) in fall 2001.

Throughout this report, we will refer to the program as disability support and accommodations (DSA). At California State University, San Bernardino (CSU San Bernardino), the services to students with disabilities department, the ADA compliance officer, programmatic managers, and other responsible individuals administer the DSA program.

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## **OPINION**

We visited the CSU San Bernardino campus from March 4, 2002, through March 29, 2002, and audited the procedures in effect at that time.

In our opinion, the administration and management of the DSA program provided reasonable assurance that CSU San Bernardino was in compliance with applicable regulations, CSU policies, and other directives. Through coordinated efforts, the campus demonstrated commitment to disabled employees, students, and visitors by providing signage, parking, telephones, and maps in strategic and accessible locations on the campus; sponsoring an annual disability awareness conference featuring notable disabled individuals; and most recently, establishing the new Assistive Computing Resource Center (ACRC) to accommodate the technological needs of disabled individuals. However, our review disclosed that certain components of the DSA program needed improvement. Specifically, program management responsibilities were not formally defined and documented; and campus programs, services, and activities were not periodically reviewed for accessibility. We also noted that important policies and procedures were not written, computer labs and websites were not fully accessible by all persons, and adequate controls were not in place over the SSD Advisory Committee. Areas in need of improvement are referenced in the executive summary.

## **EXECUTIVE SUMMARY**

The purpose of this section is to provide management with an overview of conditions requiring their attention. Areas of review not mentioned in this section were found to be satisfactory. Numbers in brackets [ ] refer to page numbers in the report.

### **PROGRAM ADMINISTRATION [7]**

#### **PROGRAM MANAGEMENT [7]**

Administration of the campus disability support and accommodations (DSA) program was in need of improvement. Adequate control over the administration of the DSA program reduces the risk of regulatory scrutiny, potential lawsuits, and negative publicity.

#### **SSD ADVISORY COMMITTEE [8]**

The Services to Students with Disabilities (SSD) Advisory Committee's practices did not ensure timely resolution of accessibility issues, adequate representation by campus constituents, regular meetings and attendance by committee members, and effective circulation of meeting minutes. Effective SSD Advisory Committee practices and control reduce the risk that campus programs, services, and activities will not be fully accessible to all individuals.

#### **WRITTEN PROCEDURES [10]**

Written procedures were not in place for certain aspects of the DSA program. Proper development, documentation, and communication of written procedures improve internal control and ensure that disabled students are properly served.

### **PROGRAM AND PHYSICAL ACCESSIBILITY [11]**

Campus computer labs and websites were not fully accessible by all persons. Providing access to campus programs, services, activities, and communications reduces the risk of regulatory scrutiny, potential lawsuits, and negative publicity.

### **PERSONNEL QUALIFICATIONS AND TRAINING [13]**

Campus training efforts for disability and other diversity-related issues did not always include faculty personnel. Providing training to all applicable personnel reduces the risk of noncompliance with campus and California State University (CSU) policies and state and federal regulations regarding disabled persons.

## **EMPLOYEE ACCOMMODATIONS [14]**

The campus' disabled employees accommodations program was not administered in compliance with written guidelines. Sufficient control over the administration of the employee accommodations program reduces the risk of scrutiny and criticism that program funds are not fully used for intended purposes.

## **DISABILITY VERIFICATION AND PROVISION OF SUPPORT [14]**

Student disability information was not afforded adequate protection or properly completed. Adequate control over disability information reduces the risk of unauthorized disclosure of personal information, campus liability due to inappropriate activities, and potential disputes over the provision of services.

## **FISCAL ADMINISTRATION [16]**

### **CHARGEBACK FOR SERVICES [16]**

Procedures had not been established to chargeback services provided by SSD to the college of extended learning (CEL). Adequate control over services provided to other departments reduces the risk of misunderstandings and inconsistencies between current practice and the intentions of management and increases the amount of funds available for student disability services.

### **FEE COLLECTION AND OVER BILLING FOR SERVICES [18]**

Fees and reimbursement for services were not always deposited into state accounts. Sufficient control over fees and other funds ensures that funds are used for appropriate purposes, and misappropriations will be detected.

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

### **PROGRAM ADMINISTRATION**

#### **PROGRAM MANAGEMENT**

Administration of the campus disability support and accommodations (DSA) program was in need of improvement.

We noted that:

- ▶ Program manager/director responsibilities as they relate to compliance with the Americans with Disabilities Act (ADA) were not formally defined and documented.
- ▶ Campus programs, services, and activities were not periodically reviewed for accessibility. The campus had neither developed a policy for this process nor was it clear if the ADA compliance officer, the program manager/director, the services to students with disabilities (SSD) department, or other person/department was responsible for this process.
- ▶ The campus had not performed client surveys or other performance monitoring of student disability services, policies, and practices.

Code of Federal Regulations (CFR) Title 28, Part 35, *Nondiscrimination on the Basis of Disability in State and Local Government Service*, §35.149, effective January 26, 1992, states that no qualified individual with a disability shall, because a public entity's facilities are inaccessible to or unusable by individuals with disabilities, be excluded from participation in, or be denied the benefits of the services, programs, or activities of a public entity, or be subjected to discrimination by any public entity.

State Administrative Manual (SAM) §20050 states that existence of one or more of the following danger signals will usually be indicative of a poorly maintained or vulnerable control system: lines of organizational authority and responsibility are not clearly articulated or are nonexistent, and no procedures are established to assure that controls in all areas of operation are evaluated on a reasonable and timely basis.

The ADA compliance officer stated that program managers are responsible for ADA compliance and acknowledged that responsibilities in this regard were not documented in a campus policy or clearly defined. The SSD director acknowledged the importance of student surveys and other performance monitoring of disability services and stated that since she is new to her position, she would review this and other noted areas with her department staff.

Inadequate control over the administration of the DSA program increases the risk of regulatory scrutiny, potential lawsuits, and negative publicity.

### **Recommendation 1**

We recommend that the campus:

- a. Define and document program manager/director responsibilities as they relate to ADA compliance.
- b. Develop a policy for periodically reviewing campus programs, services, and activities for accessibility, including assignment of responsibility for this process and frequency.
- c. Implement a performance monitoring process for disabled student services that includes, but is not limited to, periodic student surveys.

### **Campus Response**

- a. The campus concurs with the finding and will define and document program manager/director responsibilities as they relate to ADA compliance. Projected completion date: 3-31-03
- b. The campus concurs with the finding and will develop a procedure for periodically reviewing campus programs, services, and activities for accessibility, including assignment of responsibility for the review process and frequency. Projected completion date: 3-31-03
- c. The campus concurs with the finding and will establish a method of monitoring student disability services, policies, and priorities. Projected completion date: 3-31-03

### **SSD ADVISORY COMMITTEE**

The Services to Students with Disabilities (SSD) Advisory Committee's practices did not ensure timely resolution of accessibility issues, adequate representation by campus constituents, regular meetings and attendance by committee members, and effective circulation of meeting minutes.

We noted that:

- ▶ The committee had not been delegated the authority to resolve programmatic and physical access issues that were raised via ongoing meetings. Consequently, certain issues were outstanding for over a year without formal plans for resolution.
- ▶ Although the committee had established a subcommittee on architectural barrier removal, the subcommittee had been inactive for the last four years.
- ▶ The president's (or designee's) appointment of the committee members could not be provided.
- ▶ Members had not been appointed from Associated Students, Inc. (ASI), public safety, the physical education department, and the learning center; and there was only one (versus four) student on the committee.
- ▶ The committee did not meet from June 5, 2000, to March 9, 2001, while the chairperson was on sabbatical during the 2000 fall and winter quarters.

- ▶ Certain committee members either never attended or seldom attended the meetings.
- ▶ Meeting minutes were only circulated to the committee members and not to campus management with responsibility for resolving related issues or with a need to know.

The campus charter, *Services to Students with Disabilities Advisory Committee*, revised fall quarter 1999, states that the advisory committee is to establish a subcommittee on architectural barrier removal; committee members will be appointed by the university president or designee; membership will include, but not be limited to, areas within the campus community (e.g., ASI, public safety, physical education department, etc.); and the committee shall meet regularly, at least once per quarter during the academic year.

SAM §20050 states that existence of one or more of the following danger signals will usually be indicative of a poorly maintained or vulnerable control system: lines of organizational authority and responsibility are not clearly articulated or are nonexistent, internal control weaknesses detected are not acted upon in a timely fashion, and line supervisors ignore or do not adequately monitor control compliance.

The assistant vice president of student affairs acknowledged that the charter did not clearly define accountability and authority for the SSD Advisory Committee. The associate dean for undergraduate studies and former chairperson for the architectural barrier removal subcommittee stated that meetings were discontinued a few years ago due to communication issues within the campus. The chair of the advisory committee located the president's written appointment for the prior term but could not provide one for the current year. She also acknowledged that neither membership nor meeting attendance was not at appropriate levels and stated that she and the new SSD director were evaluating this issue.

Failure to maintain an effective SSD Advisory Committee increases the risk that campus programs, services, and activities will not be fully accessible to all individuals.

## **Recommendation 2**

We recommend that the campus:

- a. Define, delegate, and document the authority of the SSD Advisory Committee, especially as it relates to resolving access and accommodations issues raised during the meetings.
- b. Evaluate the function of the architectural barrier removal subcommittee and, if applicable, identify new membership as per the SSD Advisory Committee charter and re-institute meetings.
- c. Obtain the president's (or designee's) written appointment of the committee members.
- d. Appoint students and members from the campus departments noted in the committee charter and implement controls to ensure regular meeting attendance by such individuals.

- e. Select appropriate campus management and include them on the distribution of committee meeting minutes.

### **Campus Response**

- a. The campus concurs with the finding and will take steps to reevaluate the structure of the SSD Advisory Committee, establish a method to follow through with issues, and ensure appropriate membership. Projected completion date: 3-31-03
- b. The campus concurs with the finding and will evaluate and document the function of the Architectural Barrier Removal Subcommittee, identify appropriate new membership of the subcommittee, and reinstitute meetings. Projected completion date: 3-31-03
- c. The campus concurs with the finding and will secure the president's (or designee's) written appointment of SSD Advisory Committee members. Projected completion date: 3-31-03
- d. The campus concurs with the finding and will ensure that students and campus representatives are included in the membership of the SSD Advisory Committee and are appropriately encouraged to attending meetings. Projected completion date: 3-31-03
- e. The campus concurs with the finding and will ensure that minutes of the SSD Advisory Committee are distributed to appropriate campus management employees. Projected completion date: 3-31-03

### **WRITTEN PROCEDURES**

Written procedures were not in place for certain aspects of the DSA program.

We noted that:

- ▶ Written procedures for student complaints and grievances related to physical and programmatic access issues had not been established. We also noted that in the absence of written procedures, students communicated complaints to various distributed departments (e.g., SSD and the Assistive Computing Resource Center (ACRC)), which had also not established internal procedures for accepting, researching, and resolving such complaints.
- ▶ SSD had not documented procedures for verifying student disabilities; documenting, verifying, and reporting temporary disabilities; and responding to incidents with disabled students.

CFR Title 28, Part 35, *Nondiscrimination on the Basis of Disability in State and Local Government Service*, §35.107, effective January 26, 1992, states that a public entity that employs 50 or more persons shall adopt and publish grievance procedures providing for prompt and equitable resolution of complaints alleging any action that would be prohibited by this part.

CSU directive Academic Affairs Educational Support (AAES) 89-07/Business Policy (BP) 89-08, *Policy for the Provision of Services to Students with Disabilities*, dated January 9, 1989, states that disabled student services directors shall establish campus guidelines to implement the provision of

services, and that students with disabilities denied a requested service may appeal the decision to the campus vice president or dean of student affairs, utilize the campus student grievance procedures, or utilize the Federal 504 grievance procedure.

SAM §20050 states that one symptom of a deficient internal control system is policy and procedural or operational manuals that are either not currently maintained or are nonexistent.

The student affairs judicial officer stated that the campus had formal procedures for academic and nonacademic grievances and that students typically raised ADA-related complaints to the SSD office for resolution. The SSD director acknowledged that the informal complaint process needed improvement and stated that since she is new to her position, she would review this and other noted areas with her department staff prior to developing procedures. The ACRC coordinator acknowledged the importance of documenting grievance procedures and stated that this was an oversight.

Failure to develop, document, and communicate written procedures increases the risk that disabled students will not be properly served and misunderstandings will occur.

### **Recommendation 3**

We recommend that the campus:

- a. Document and distribute written campus procedures for student complaints and grievances related to physical and programmatic access and other ADA issues.
- b. Document procedures for departmental functions such as accepting, researching, and resolving student complaints, verifying student disabilities (including temporary disabilities), and responding to incidents or unexpected emergencies with disabled students.

### **Campus Response**

- a. The campus concurs with the finding. A written procedure will be established to address student complaints and grievances relative to physical and programmatic access. Projected completion date: 3-31-03
- b. The campus concurs with the finding. A written procedure will be established to include proper documentation of complaints, verification of disabilities, and responses to incidents and unexpected emergencies involving disabled students. Completion date: 3-31-03

## **PROGRAM AND PHYSICAL ACCESSIBILITY**

Campus computer labs and websites were not fully accessible by all persons.

We noted that:

- ▶ Self-instructional computer labs in the college of education and the college of business and public administration were not fully accessible by all persons. In addition, the responsibility for purchasing accessible workstations (which included, but was not limited to, computers, monitors, and accessible tables and chairs) was not clearly defined at the college of business and public administration.
- ▶ Websites for five campus programs (housing and residential life, student union, college of extended learning, college of education, and college of business and public administration) were not fully accessible by all persons. We also noted that the campus had not developed a web accessibility policy nor was it clear if the program manager/director of information resources and technology or other persons/departments were responsible for this area.

CFR Title 28, Part 35, *Nondiscrimination on the Basis of Disability in State and Local Government Service*, §35.149, effective January 26, 1992, states that no qualified individual with a disability shall, because a public entity's facilities are inaccessible to or unusable by individuals with disabilities, be excluded from participation in, or be denied the benefits of the services, programs, or activities of a public entity, or be subjected to discrimination by any public entity.

CFR Title 28, Part 35, *Nondiscrimination on the Basis of Disability in State and Local Government Service*, §35.160(a) and §35.160(b)(1), state that a public entity shall take appropriate steps to ensure that communications with applicants, participants, and members of the public with disabilities are as effective as communications with others, and furnish appropriate auxiliary aids and services where necessary to afford an individual with a disability an equal opportunity to participate in, and enjoy the benefits of, a service, program, or activity conducted by a public entity, respectively.

The dean of the college of education acknowledged responsibility for ensuring that computer labs were accessible and indicated this situation was not brought to her attention for resolution. The dean of the college of business and administration stated that responsibility for computer accessibility in the department's labs was not sufficiently defined. The webmaster stated that he provides assistance to campus areas, however acknowledged that responsibility for ensuring that websites are fully accessible to all persons has not been clearly defined.

Insufficient access to campus programs, services, activities, and communications increases the risk of regulatory scrutiny, potential lawsuits, and negative publicity.

#### **Recommendation 4**

We recommend that the campus:

- a. Define and document responsibilities to ensure computer labs and websites are fully accessible to all persons.
- b. Review and correct the accessibility issues noted in the computer labs and websites cited above.

### **Campus Response**

- a. The campus concurs with the finding and will develop written processes to ensure that computer labs are fully accessible to all persons with disabilities through the use of portable computer workstations and compliance with accessibility guidelines. Projected completion date: 4-30-03
- b. The campus concurs with the finding and will ensure that websites and computer labs in the five noted campus programs are accessible according to established accessibility guidelines. Projected completion date: 4-30-03

## **PERSONNEL QUALIFICATIONS AND TRAINING**

Campus training efforts for disability and other diversity-related issues did not always include faculty personnel.

Similar to staff and other personnel, faculty attended new employee orientation sessions, had access to campus disability awareness conferences and other special events, and were invited to formalized diversity training that was mandated for staff and management personnel. However, attendance at these formalized training sessions was not mandatory for the faculty and through discussions with various deans, other opportunities for ADA and other related training could not be identified.

The Bureau of State Audits report, *CSU and UC: Campuses Generally Provide Access for Students with Disabilities*, dated November 24, 1995, stated that to increase campus awareness of ADA requirements, the chancellor's office of the CSU should instruct its campuses to provide training classes or seminars for faculty and staff.

The associate provost for academic personnel stated that new faculty attend orientation sessions and are given a handbook that includes information regarding disabled student services. He further stated, however, that mandatory training requirements for faculty personnel might be subject to collective bargaining.

Not providing training to all applicable personnel increases the risk of noncompliance with campus and CSU policies and state and federal regulations regarding disabled persons.

### **Recommendation 5**

We recommend that the campus develop specific training for faculty to ensure sufficient understanding of student disability issues and campus-related support and accommodation services.

### **Campus Response**

The campus concurs with the finding and will establish a training program for faculty to be presented at faculty meetings for all academic departments as well as at quarterly orientation programs for new part-time faculty. Projected completion date: 4-30-03

## **EMPLOYEE ACCOMMODATIONS**

The campus' disabled employees accommodations program was not administered in compliance with written guidelines.

Our review of three employee requests received by the Assistive Technology/Assistance Program (AT/AP) in fiscal years 2000/2001 and 2001/2002 disclosed that:

- ▶ There was no written evidence that the AT/AP Advisory Committee evaluated and approved the partial funding of all three requests.
- ▶ The AT/AP was used to fund expenses related to disability awareness conferences held by the campus in the prior two years even though program guidelines did not include funding such conferences.

The campus' AT/AP guidelines state that the program is designed to provide limited funding to help defray the costs for making reasonable equipment or device accommodations and auxiliary aid for qualified individuals with disabilities, and that all proposals will be evaluated by the committee.

The disabled employees program coordinator stated that all committee members were apprised of her recommendations for funding and that partial funding of such requests was to preserve the monies for future requests. She also stated that the campus has historically charged the program for various expenditures related to the disability awareness conferences.

Insufficient control over the AT/AP increases the risk of scrutiny and criticism that program funds are not fully used for intended purposes.

### **Recommendation 6**

We recommend that the campus strengthen controls to ensure that all disabled employee program requests are evaluated and approved by responsible committee members, and that program expenditures comply with defined guidelines.

### **Campus Response**

The campus concurs with the finding and will revise assistive device program guidelines for the expenditure of funds to provide a more inclusive approach to meet actual funding needs. Projected completion date: 11-30-02

## **DISABILITY VERIFICATION AND PROVISION OF SUPPORT**

Student disability information was not afforded adequate protection or properly completed.

We noted that:

- ▶ Student disability records maintained by SSD were not provided locked protection overnight. The records were maintained in file cabinets that were accessible to persons (including students) using the testing rooms or the SSD general facility.
- ▶ The ACRC maintained student disability records in unlocked desk drawers and on a local computer drive that was not password protected.
- ▶ Upon implementation of the student information systems plus (SIS+) automated student system 09A screen, various campus departments (e.g., financial aid and bursars) were provided access to student disability information without a need to know.
- ▶ Information in student disability records was not properly completed. For example, we noted numerous exam cover sheet/receipts that did not identify the testing accommodation (e.g., enlarge exam, scribe, reader, etc.) and/or the date and time that the exams were returned to the academic area. We also noted instances whereby the responsible SSD counselor did not initial student information forms to evidence verification of the disability.

CSU directive AAES 89-07/BP 89-08, *Policy for the Provision of Services to Students with Disabilities*, dated January 9, 1989, states that each campus shall maintain confidential records identifying its students with professionally verified disabilities.

Civil Code §1798.1(c), *Information Practices Act of 1977*, states that in order to protect the privacy of individuals, it is necessary that the maintenance and dissemination of personal information be subject to strict limits.

SAM §20050 states that one element of a satisfactory system of internal administrative control is an effective system of internal review. Further, the *Standards for the Professional Practice of Internal Auditing*, issued by the Institute of Internal Auditors, defines internal control as a process designed to provide an organization reasonable assurance regarding the reliability and integrity of information.

The SSD director stated that as part of her new responsibilities, she is evaluating the filing, protection, and completion of all student disability information maintained in the department. The ACRC coordinator acknowledged the importance of this issue and took immediate steps to secure student disability information in his department. The associate director of records, registration, and evaluations stated that due to prior security issues, the campus implemented a special screen in the SIS+ student system to protect student disability information; however, the campus was unaware that the screen was accessible by campus departments without a need to know. The associate director took immediate steps to delete inappropriate access to the information.

Inadequate control over disability information increases the risk of unauthorized disclosure of personal information, campus liability due to inappropriate activities, and disputes over the provision of services.

### **Recommendation 7**

We recommend that the campus:

- a. Develop written policies and procedures for the maintenance, retention, disclosure, security, and completion of student disability information by responsible departments.
- b. Appropriately secure the student disability records maintained by SSD and the ACRC.
- c. Establish data security controls to ensure that only persons with a need to know have access to student disability information in automated computer systems, including periodic reviews of data security assignments to ensure ongoing protection of this information.
- d. Develop procedures and monitoring processes to ensure that student disability records are properly completed.

### **Campus Response**

- a. The campus concurs with the finding. Procedures will be developed to ensure that files in the DSA are housed in a secure location. Projected completion date: 3-31-02
- b. The campus concurs with the finding and will take steps to ensure that all student disability records are appropriately secured. Projected completion date: 3-31-02
- c. The campus concurs with the finding and will take appropriate steps to establish data security controls to protect the confidentiality of student disability information. Projected completion date: 3-31-02.
- d. The campus concurs with the finding and will establish procedures to ensure that student disability records are properly completed. Projected completion date: 3-31-02

## **FISCAL ADMINISTRATION**

### **CHARGEBACK FOR SERVICES**

Procedures had not been established to chargeback services provided by SSD to the college of extended learning (CEL).

SSD coordinated the hiring of interpreters for disabled students that attended CEL courses. However, these services and the departments' respective roles and responsibilities had neither been formally defined in a written agreement nor fully charged back to the CEL.

CSU directive AAES 90-05/BP 90-14, *Provision of Services to and Support for Students with Disabilities Enrolled in Extended/Continuing Education Courses*, dated February 29, 1990, states that it is the responsibility of the extended/continuing education office on each campus to fund for direct support services for student with disabilities enrolled in extended/continuing education courses,

including interpreters for the deaf, readers for the visually impaired or learning disabled, note takers and test proctors.

CSU directive Business Affairs – Office of the Chancellor (BA) 83-30, *Policy on Chargeable Services to Self-Supporting Operations*, dated December 28, 1983, requires auxiliaries to pay for services provided by the campus. *Executive Order (EO) No. 753, Allocation of Costs to Auxiliary Enterprises, effective July 28, 2000, superseded this directive.*

EO No. 753, *Allocation of Costs to Auxiliary Enterprises*, dated July 28, 2000, established the responsibility for auxiliaries to pay allowable direct costs plus an allocable portion of indirect costs associated with facilities, goods, and services provided by the campus and funded by the General Fund.

SAM §8752 indicates that state policy is for departments to recover full costs whenever goods or services are provided for others.

The director of extension programs and the SSD director stated that the respective departments are working together to establish a chargeback process and procedures. The director of extension programs also acknowledged the need for a memorandum of understanding (MOU) with SSD regarding the provision of disability services.

The lack of adequate control over services provided to other departments increases the risk of misunderstandings and inconsistencies between current practice and the intentions of management and reduces the amount of funds available for disability services operations.

### **Recommendation 8**

We recommend that the campus:

- a. Formalize the provision of student disability services by SSD to the CEL in a MOU.
- b. Establish and implement chargeback procedures for the provision of services to disabled students attending CEL and other self-supporting programs.

### **Campus Response**

- a. The campus concurs with the finding and will negotiate a memorandum of understanding between the office of services to students with disabilities and the college of extended learning. Projected completion date: 10-31-02
- b. The campus concurs with the finding and will implement procedures to establish and collect chargeback fees for the provision of services to disabled students who attend CEL and other self-supporting programs. Projected completion date: 10-31-02

## **FEE COLLECTION AND OVER BILLING FOR SERVICES**

Fees and reimbursement for services were not always deposited into state accounts.

We noted that:

- ▶ National Student Exchange (NSE) application fees, which were made payable to the campus, were improperly deposited into an account at the CSU San Bernardino Foundation (Foundation) instead of a stateside trust account that was established for these fees.
- ▶ National Evaluation Systems (NES) room rental fees that were made payable to the campus were improperly deposited into a separate account at the Foundation.
- ▶ The campus was over billed \$11,511 for real-time captionist services that were paid from a General Fund account. Rather than reimburse the General Fund, the refund from the applicable vendor was improperly deposited into Foundation and stateside trust accounts in the amounts of \$4,471 and \$7,040, respectively.

SAM §8001 indicates that except when otherwise authorized by the director of finance or unless deposited directly in the state treasury, all money in the possession of or controlled by any agency will be deposited in the centralized state treasury system.

Government Code §16305.1 indicates that all money in the possession of or collected by any state agency or department is subject to the provisions of §16305.3 through §16305.7, inclusive, and is hereafter referred to as state money. Government Code §16305.3 indicates that all state money shall be deposited in trust in the custody of the treasurer, except when otherwise authorized by the director of finance.

The SSD director stated that she is reviewing these fee collection practices and the related Foundation accounts and will make the appropriate changes to ensure compliance.

Insufficient control over fees and other funds increases the risk that funds may be used for inappropriate purposes, and misappropriations will not be detected.

### **Recommendation 9**

We recommend that the campus:

- a. Deposit future NSE and NES fees into the appropriate state accounts.
- b. Immediately transfer the balance of NSE and NES fees from the respective Foundation accounts to the stateside trust account that was established for the program and the applicable General Fund account, respectively.
- c. Immediately transfer the balance of the over billing reimbursement from the respective Foundation and trust accounts to the applicable General Fund account where the expenditure for services had originally occurred.

- d. Based on the above, evaluate the need for the Foundation accounts and if necessary, transfer the remaining funds to the state and close the accounts accordingly.
- e. Strengthen procedures to ensure that all applicable staff understands the purpose and use of Foundation and state trust accounts for fee collections, reimbursements, and other business transactions.

**Campus Response**

- a. The campus concurs with the finding and will develop procedures to ensure that future NSE and NES fees are deposited into appropriate state accounts. Projected completion date: 3-31-03
- b. The campus concurs with the finding and will develop procedures to ensure that appropriate accounting practices are maintained in the future. Projected completion date: 3-31-03
- c. The campus concurs with the finding and will take appropriate action to transfer funds to the applicable General Fund account. Projected completion date: 11-1-02
- d. The campus concurs with the finding and will take appropriate action to close the applicable Foundation account. Projected completion date: 11-1-02
- e. The campus concurs with the finding and will develop written procedures to ensure that staff are adequately trained to follow acceptable accounting practices in the future. Projected completion date: 3-31-03

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## APPENDIX A: PERSONNEL CONTACTED

<u>Name</u>	<u>Title</u>
Albert K. Karnig	President
Patricia Arlin	Dean, College of Education
Chani Beeman	Coordinator, Academic Computing and Media
Susan Berilla	Manager, Training and Development
Twillea Carthen	Manager, Recruitment and Human Resources Programs, and Disabled Employees Program Coordinator
Mary Chouinard	Associate Director, Records, Registration, and Evaluations
Larry Cummins	Computer Lab Technician, WorkAbility IV
David DeMauro	Vice President, Administration and Finance
Carolynn Eggleston	Associate Professor and Chair of the Advisory Committee
Christopher Eller	Webmaster, Academic Computing and Media
Nicholas Erickson	Director, Office of Housing and Residential Life
Inez Everett	Administrative Analyst, Services to Students with Disabilities
Laurie Flynn	Director, Services to Students with Disabilities
Christine Hansen	Director, Student Leadership and Development
Craig Henderson	Counselor, Academic Support Services, Services to Students with Disabilities, and Student Affairs Judicial Officer
Ruth Howell	Project Secretary, WorkAbility IV
Paulie Kimball	Student and Advisory Committee Member
Helga Kray	Executive Director, Student Union
Natalie Morales	Academic Support Services Coordinator, Services to Students with Disabilities
Karen Newman	Aide to the Vice President, Student Affairs
Gordon L. Patzer	Dean and Professor, College of Business and Public Administration
Linda Pella-Hartley	Aide to the Vice President, Administration and Finance
Kevin Price	Coordinator, Assistive Resource Computing Center
Johnnie Ann Ralph	University Librarian
Amanda Retsek	Deaf Services Specialist, Services to Students with Disabilities
Sandra Richards	Director, Extension Programs, College of Extended Learning
Frank Rincon	Vice President, Student Affairs
Thomas Rivera	Associate Dean, Undergraduate Studies
William Shum	Director, Capital Planning, Design and Construction
Tony Simpson	Director, Facilities Services
Amanda Spivey	Career Development Coordinator, WorkAbility IV
William Takehara	Associate Vice President, Financial Operations
Camille TorteZ	Interim Emergency Operations Coordinator
J. Paul Vicknair	Associate Provost, Academic Personnel
Howard Wang	Assistant Vice President, Student Affairs
Dale West	Director, Human Resources

State of California

**California State University, San Bernardino**  
5500 University Parkway  
San Bernardino, California 92407-2397

**MEMORANDUM**

DATE           October 8, 2002

TO             Larry Mandel  
                University Auditor  
                The California State University



FROM :       David DeMauro, Vice President  
              for Administration and Finance

SUBJECT:     **Campus Response to Audit Report Number 02-34**  
              ***DISABILITY SUPPORT AND ACCOMMODATIONS***  
              **California State University, San Bernardino**

Enclosed for your consideration are campus responses to *Disability Support and Accommodations Audit Report No. 02-34*. Also enclosed is the diskette containing the campus response.

Support documentation will be submitted separately for the each of the findings.

xc: Laurie Flynn  
      Jerry Pritchard  
      Frank Rincón  
      Michael Ross  
      Susan Summers  
      Howard Wang  
      Dale West  
      Paul Vicknair

Enclosures

CALIFORNIA STATE UNIVERSITY,  
SAN BERNARDINO

DISABILITY SUPPORT AND ACCOMMODATIONS  
AUDIT REPORT NO. 02-34

PROGRAM ADMINISTRATION

PROGRAM MANAGEMENT

**Recommendation 1**

We recommend that the campus:

Define and document program manager/director responsibilities as they relate to ADA compliance.

- b. Develop a policy for periodically reviewing campus programs, services, and activities for accessibility, including assignment of responsibility for this process and frequency.
- c. Implement a performance monitoring process for disabled student services that includes, but is not limited to, periodic student surveys.

**Campus Response**

- a. The campus concurs with the finding and will define and document program manager/director responsibilities, as they relate to ADA. **Projected completion date: 3-31-03**
- b. The campus concurs with the finding and will develop a procedure for periodically reviewing campus programs, services, and activities for accessibility, including assignment of responsibility for the review process and frequency. **Projected completion date: 3-31-03**
- c. The campus concurs with the finding and will establish a method of monitoring student disability services, policies and priorities. **Projected completion date: 3-31-03**

SSD ADVISORY COMMITTEE

**Recommendation 2**

We recommend that the campus:

- a. Define, delegate, and document the authority of the SSD Advisory Committee, especially as it relates to resolving access and accommodations issues raised during the meetings.

- b. Evaluate the function of the architectural barrier removal subcommittee and, if applicable identify new membership as per the SSD Advisory Committee charter and re-institute meetings.
- c. Obtain the president's (or designee's) written appointment of the committee members.
- d. Appoint students and members from the campus departments noted in the committee charter and implement controls to ensure regular meeting attendance by such individuals.
- e. Select appropriate campus management and include them on the distribution of committee meeting minutes.

**Campus Response**

- a. The campus concurs with the finding and will take steps to re-evaluate the structure of the SSD Advisory Committee, establish a method to follow through with issues, and ensure appropriate membership. **Projected completion date: 3-31-03**
- b. The campus concurs with the finding and will evaluate and document the function of the Architectural Barrier Removal Subcommittee, identify appropriate new membership of the subcommittee, and re-institute meetings. **Projected completion date: 3-31-03**
- c. The campus concurs with the finding and will secure the president's (or designee's) written appointment of SSD Advisory Committee members. **Projected completion date: 3-31-03**
- d. The campus concurs with the finding and will ensure that students and campus representatives are included in the membership of the SSD Advisory Committee and are appropriately encouraged to attending meetings. **Projected completion date: 3-31-03**

The campus concurs with the finding and will ensure that minutes of the SSD Advisory Committee are distributed to appropriate campus management employees. **Projected completion date: 3-31-03**

**WRITTEN PROCEDURES**

**Recommendation 3**

We recommend that the campus

Document and distribute written campus procedures for student complaints and grievances related to physical and programmatic access and other ADA issues.

- b. Document procedures for departmental functions such as accepting, researching, and resolving student complaints, verifying student disabilities (including temporary disabilities), and responding to incidents or unexpected emergencies with disabled students.

### **Campus Response**

- a. The campus concurs with the finding. A written procedure will be established to address student complaints and grievances relative to physical and programmatic access. **Projected completion date: 3-31-03**
- b. The campus concurs with the finding. A written procedure will be established to include proper documentation of complaints, verification of disabilities, and responses to incidents and unexpected emergencies involving disabled students. **Completion date: 3-31-03**

## **PROGRAM AND PHYSICAL ACCESSIBILITY**

### **Recommendation 4**

We recommend that the campus:

- a. Define and document responsibilities to ensure computer labs and websites are fully accessible to all persons.
- b. Review and correct the accessibility issues noted in the computer labs and websites cited above

### **Campus Response**

- a. The campus concurs with the finding and will develop written processes to ensure that computer labs are fully accessible to all persons with disabilities through the use of portable computer workstations and compliance with accessibility guidelines. **Projected completion date: 4-30-03**
- b. The campus concurs with the finding and will ensure that websites and computer labs in the five noted campus programs are accessible according to established accessibility guidelines. **Projected completion date: 4-30-03.**

## **PERSONNEL QUALIFICATIONS AND TRAINING**

### **Recommendation 5**

We recommend that the campus develop specific training for faculty to ensure sufficient understanding of student disability issues and campus-related support and accommodation services.

### **Campus Response**

The campus concurs with the finding and will establish a training program for faculty to be presented at faculty meetings for all academic departments as well as at quarterly orientation programs for new part-time faculty. **Projected completion date: 4-30-03**

## EMPLOYEE ACCOMMODATIONS

### Recommendation 6

We recommend that the campus strengthen controls to ensure that all disabled employee program requests are evaluated and approved by responsible committee members, and that program expenditures comply with defined guidelines.

### Campus Response

The campus concurs with the finding and will revise assistive device program guidelines for the expenditure of funds to provide a more inclusive approach to meet actual funding needs. **Projected completion date: 11-30-02**

## DISABILITY VERIFICATION AND PROVISION OF SUPPORT

### Recommendation 7

We recommend that the campus:

- a. Develop written policies and procedures for the maintenance, retention, disclosure, security, and completion of student disability information by responsible departments.
- b. Appropriately secure the student disability records maintained by SSD and the ACRC.
- c. Establish data security controls to ensure that only persons with a need to know have access to student disability information in automated computer systems, including periodic reviews of data security assignments to ensure ongoing protection of this information.
- d. Develop procedures and monitoring processes to ensure that student disability records are properly completed.

### Campus Response

- a. The campus concurs with the finding. Procedures will be developed to ensure that files in the DSA are housed in a secure location. **Projected completion date: 3-31-02**
- b. The campus concurs with the finding and will take steps to ensure that all student disability records are appropriately secured. **Projected completion date: 3-31-02**
- c. The campus concurs with the finding and will take appropriate steps to establish data security controls to protect the confidentiality of student disability information. **Projected completion date: 3-31-02.**
- d. The campus concurs with the finding and will establish procedures to ensure that student disability records are properly completed. **Projected completion date: 3-31-02**

## FISCAL ADMINISTRATION

### CHARGEBACK FOR SERVICES

#### Recommendation 8

We recommend that the campus:

- a. Formalize the provision of student disability services by SSD to the CEL in a MOU.
- b. Establish and implement chargeback procedures for the provision of services to disabled students attending CEL and other self-supporting programs.

#### Campus Response

- a. The campus concurs with the finding and will negotiate a Memorandum of Understanding between the Office of Services to Students with Disabilities and the College of Extended Learning. **Projected completion date: 10-31-02**
- b. The campus concurs with the finding and will implement procedures to establish and collect chargeback fees for the provision of services to disabled students who attend CEL and other self-supporting programs. **Projected completion date: 10-31-02**

## FEE COLLECTION AND OVER-BILLING FOR SERVICES

#### Recommendation 9

We recommend that the campus:

- a. Deposit future NSE and NES fees into the appropriate state accounts.
- b. Immediately transfer the balance of NSE and NES fees from the respective Foundation accounts to the stateside trust account that was established for the program and the applicable General Fund account, respectively.
- c. Immediately transfer the balance of the over-billing reimbursement from the respective Foundation and trust accounts to the applicable General Fund account where the expenditure for services had originally occurred.
- d. Based on the above, evaluate the need for the Foundation accounts and if necessary, transfer the remaining funds to the state and close the accounts accordingly.
- e. Strengthen procedures to ensure that all applicable staff understands the purpose and use of Foundation and state trust accounts for fee collections, reimbursements, and other business transactions.

**Campus Response**

- a. The campus concurs with the finding and will develop procedures to ensure that future NSE and NES fees are deposited into appropriate State accounts. **Projected completion date: 3-31-03**
- b. The campus concurs with the finding and will develop procedures to ensure that appropriate accounting practices are maintained in the future. **Projected completion date: 3-31-03**
- c. The campus concurs with the finding and will take appropriate action to transfer funds to the applicable General Fund account. **Projected completion date: 11-1-02**
- d. The campus concurs with the finding and will take appropriate action to close the applicable Foundation account. **Projected completion date: 11-1-02**
- e. The campus concurs with the finding and will develop written procedures to ensure that staff are adequately trained to follow acceptable accounting practices in the future. **Projected completion date: 3-31-03**

THE CALIFORNIA STATE UNIVERSITY  
OFFICE OF THE CHANCELLOR

BAKERSFIELD

October 29, 2002

ANNE ISLANDS

ICO

MEMORANDUM

DOMINGUEZ HILLS


FRESNO

TO: Mr. Larry Mandel  
University Auditor

GARDEN GROVE

HAYWARD

FROM: Charles B. Reed  
Chancellor



HUMBOLDT

SUBJECT: Draft Final Report Number 02-34 on *Disability Support and Accommodations*, California State University, San Bernardino

LONG BEACH

LOS ANGELES

MARITIME ACADEMY

In response to your memorandum of October 29, 2002, I accept the response as submitted with the draft final report on *Disability Support and Accommodations*, California State University, San Bernardino.

MONTEREY BAY

NORTH RIDGE

POMONA

CBR/ac

SACRAMENTO

Enclosure

SAN BERNARDINO

cc: Mr. David DeMauro, Vice President, Administration and Finance  
Dr. Albert K. Karnig, President

SAN DIEGO

SAN FRANCISCO

SAN JOSE

SAN JUAN BAPTIST

SAN MARCO

SONOMA

STANISLAUS