September 20, 2016

Dr. Willie Hagan, President
California State University, Dominguez Hills
1000 East Victoria Street
Carson, CA 90747

Dear Dr. Hagan:

Subject: Audit Report 16-43, Emergency Management, California State University, Dominguez Hills

We have completed an audit of Emergency Management as part of our 2016 Audit Plan, and the final report is attached for your reference. The audit was conducted in accordance with the Institute of Internal Auditors' International Standards for the Professional Practice of Internal Auditing.

I have reviewed the management response and have concluded that it appropriately addresses our recommendations. The management response has been incorporated into the final audit report, which has been posted to the Office of Audit and Advisory Services' website. We will follow-up on the implementation of corrective actions outlined in the response and determine whether additional action is required.

Any observations not included in this report were discussed with your staff at the informal exit conference and may be subject to follow-up.

I wish to express my appreciation for the cooperation extended by the campus personnel over the course of this review.

Sincerely,

Larry Mandel
Vice Chancellor and Chief Audit Officer

c: Timothy P. White, Chancellor
EMERGENCY MANAGEMENT

California State University,
Dominguez Hills

Audit Report 16-43
August 30, 2016
EXECUTIVE SUMMARY

OBJECTIVE

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

CONCLUSION

Based upon the results of the work performed within the scope of the audit, a few specific control weaknesses were noted; generally, however, controls were adequate, appropriate, and effective to provide reasonable assurance that risks were being managed and objectives were met.

Overall, we found that the campus had an appropriate framework for emergency management and a strong exercise and training program for members of their emergency operations center team. However, we did find that, due to turnover in the emergency management coordinator position, components of the existing campus emergency management programs needed to be updated and that a review of campus emergency resources was necessary. Specifically, we found that the campus emergency operations center (EOC) was not adequately equipped, the floor warden program needed improvement, the emergency operations plan (EOP) was outdated, and campus listings of emergency resources were inadequate.

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

1. EMERGENCY OPERATIONS CENTER

OBSERVATION

The primary campus EOC, in the Extended Education (EE) building, was not adequately equipped.

Specifically, we found that:

- There were no emergency food or water supplies in the EOC.
- The EE building was not equipped with an emergency power supply, flashlights, or emergency lighting. Although portable generators were available for use, these generators, and the fuel needed to run them, were located across campus in the facilities services building. We also noted that the generators would not capable of providing full power to the building; rather, they could provide power on a small scale for two to four hours at a time.
- The EOC was not equipped with adequate administrative or office supplies, and some of the available equipment, such as laptops and printers, were outdated and had not been recently tested to ensure functionality.
- Mobile phones and radios at the EOC had not been recently tested to ensure functionality.
- There were no copies of the current EOP in the EOC.

Maintaining an adequately equipped emergency operations center allows for a timely and adequate response in the case of an emergency.

RECOMMENDATION

We recommend that the campus:

a. Evaluate the current supplies and equipment at the EOC for adequacy, taking into consideration the issues noted above. Document the outcome of this evaluation.

b. Based on this evaluation, adequately equip the EOC.

MANAGEMENT RESPONSE

We concur.

a. The campus will evaluate the current supplies and equipment at the EOC for adequacy, taking into consideration the issues noted above. The campus will document the outcome of the evaluation.
b. The campus will adequately equip the EOC, based on the outcome of the evaluation.

Projected completion date: February 2017

2. FLOOR WARDEN PROGRAM

OBSERVATION

The campus floor warden program needed improvement.

Although the campus had a longstanding floor warden program in place, we found that:

- Not all buildings on campus had assigned floor wardens.
- Monthly training meetings for floor wardens were sparsely attended. We reviewed ten floor wardens and found that five of them did not attend at least one meeting per year from 2014 to 2016.
- Documentation showing that building evacuation drills were held was not maintained. We reviewed eight evacuation drills that took place in Fall 2015 or Spring 2016 and found that after-action reports were not available for six of the drills.
- Floor warden policies were outdated. For example, they referred to assembly area manager and building liaison positions that were not currently in use.
- The list of floor wardens on the campus emergency preparedness website was outdated.

Maintaining an effective floor warden program provides assurance that there is adequate coverage of campus buildings, evacuation drills are performed, and, in the event of an emergency, building evacuations are performed in a safe and orderly manner, accounting for students and employees.

RECOMMENDATION

We recommend that the campus:

a. Assign floor wardens for all buildings on campus and post the updated list of floor wardens to the campus emergency preparedness website.

b. Evaluate and update the current process of providing and tracking floor-warden training, to ensure that floor wardens receive required training at least once per year.

c. Determine how floor wardens will communicate the results of building evacuation drills to the emergency management coordinator, and prepare after-action reports for evacuation drills.

d. Update floor warden policies to reflect current campus practices.
MANAGEMENT RESPONSE

We concur.

a. The campus will assign floor wardens for all buildings on campus and post the updated list of floor wardens to the campus emergency preparedness website.

b. The campus will evaluate and update the current process of providing and tracking floor-warden training, to ensure that floor wardens receive required training at least once per year.

c. The campus will determine how floor wardens will communicate the results of building evacuation drills to the emergency management coordinator and prepare after-action reports for evacuation drills.

d. The campus will update floor warden policies to reflect current campus practices.

Projected completion date: January 2017

3. EMERGENCY OPERATIONS PLAN

OBSERVATION

The campus EOP needed improvement.

We found that:

- The plan was outdated and had not been updated within the past year. In our review of the plan, we noted a number of areas that needed to be updated, including EOC organization charts, names and titles, and an antibiotics plan that was no longer valid.

- The plan was incomplete. There were numerous references throughout the plan to documents or areas that did not exist, and a mass fatality plan included in the EOP annexes was still in draft form.

- The plan identified and summarized 11 high-risk threat assessments that could impact the campus; however, it did not include annexes to address emergency response for these types of incidents.

- The plan did not address the needs of international students on campus.

- There was no evidence that the student health center had reviewed the medical portions of the EOP other than the Student Health Center Policies and Procedures annex.

- The plan was duplicative in areas and poorly organized. For example, it included a description of EOC activation guidelines in at least three different places. Also, the plan
did not contain a comprehensive table of contents to illustrate everything that was included in the EOP, and some sections did not have tables of contents.

- Members of the campus EOC team had access to only the basic plan. They did not have access to the annexes, which include specific information and checklists for emergency response.

- The plan did not address notification protocols for EOC team members in the event of an emergency.

- There were two different versions of the basic plan posted on the campus website, and the EOC organization chart on the website was outdated.

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

**RECOMMENDATION**

We recommend that the campus:

a. Review the EOP and update it to address the areas discussed above.

b. Distribute the updated EOP to the campus EOC team.

c. Update the campus website to include the most current version of the basic EOP.

**MANAGEMENT RESPONSE**

We concur.

a. The campus will review the EOP and update it to address the areas discussed above.

b. The campus will distribute the updated EOP to the campus EOC team.

c. The campus will update the campus website to include the most current version of the basic EOP.

Projected completion date: January 2017

4. **EMERGENCY RESOURCES**

**OBSERVATION**

Campus rosters of emergency resources needed improvement.

We found that:

- The list of emergency supplies did not include emergency food. The campus plan was to obtain food from the Loker Student Union (LSU) in the event of an emergency. However,
this arrangement had not been formalized, and the logistics of the situation had not been reviewed and considered.

- The list of emergency supplies was incomplete, as there were items in the EOC supply closet that had not been inventoried. In addition, the list did not include emergency medical supplies discussed in the EOP, the portable generators available at the facilities management building, or the numbers for mobile phones expected to be used in the event of an emergency.

- The list of emergency supplies did not include the location of the supplies. In addition, it was not organized by category or type, as required by systemwide policy.

- Listed emergency supplies were not always available. We reviewed ten types of emergency supplies on the list and could not locate all of the items listed in two instances.

- The campus list of vendors to be used for emergency purchases was not updated annually.

- The list of emergency supplies and the list of vendors would not be easily accessible in the event of an emergency, as they were only available in electronic format on the emergency management coordinator’s computer.

Maintaining adequate emergency supplies and ensuring that rosters of emergency resources are accurate and complete provides assurance that critical resources will be available within a reasonable timeframe in the event of an emergency.

**RECOMMENDATION**

We recommend that the campus:

a. Perform and document a review to determine whether obtaining food from the LSU in the event of an emergency would be feasible. If so, formalize the arrangement with a documented agreement. If not, determine how the campus will address and obtain emergency food supplies.

b. Update the list of emergency supplies to address the issues noted above.

c. Annually update the list of vendors to be used for emergency purchases.

d. Make the list of emergency supplies and the list of vendors easily accessible so that it can be obtained in the event of an emergency.

**MANAGEMENT RESPONSE**

We concur.

a. The campus will perform and document a review to determine whether obtaining food from the LSU in the event of an emergency would be feasible. If so, the campus will formalize the arrangement with a documented agreement. If not, the campus will determine how the campus will address and obtain emergency food supplies.
b. The campus will update the list of emergency supplies to address the issues noted above.

c. The campus will annually update the list of vendors to be used for emergency purchases.

d. The campus will make the list of emergency supplies and the list of vendors easily accessible so that it can be obtained in the event of an emergency.

Projected completion date: February 2017
GENERAL INFORMATION

BACKGROUND

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

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. Executive Order (EO) 1056, California State University Emergency Management Program, defines the key components of an effective campus emergency management program. At the systemwide level, the Office of Risk Management (ORM) has administrative oversight and programmatic responsibility for the emergency management function and coordinates the Emergency Coordinators working group, an advisory body for CSU systemwide emergency management. In 2014, ORM commissioned an outside consultant to review campus emergency management plans.
At California State University, Dominguez Hills (CSUDH), the emergency management coordinator has primary responsibility for the implementation and management of the campus emergency preparedness program, which includes providing emergency preparedness training; reviewing and updating the campus EOP; overseeing the campus floor warden program; and equipping a functional EOC. The chief of police provides direct supervision over the emergency management coordinator and reports up to the vice president of administration and finance. The campus has also formed an emergency preparedness committee that includes representation from a diverse cross-section of the campus community and is responsible for coordinating initiatives and activities related to emergency readiness and continuity of operations.

SCOPE

We visited the CSUDH campus from July 11, 2016, through July 29, 2016. Our audit and evaluation included the audit tests we considered necessary in determining whether administrative and operational controls are in place and operative. The audit focused on procedures in effect from January 1, 2014, through July 29, 2016.

Specifically, we reviewed and tested:

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

As a result of changing conditions and the degree of compliance with procedures, the effectiveness of controls changes over time. Specific limitations that may hinder the effectiveness of an otherwise adequate system of controls include, but are not limited to, resource constraints, faulty judgments, unintentional errors, circumvention by collusion, and management overrides. Establishing controls that would prevent all these limitations would not be cost-effective; moreover, an audit may not always detect these limitations.

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

CRITERIA

Our audit was based upon standards as set forth in federal and state regulations and guidance; CSU Board of Trustee policies; Office of the Chancellor policies, letters, and directives; campus procedures; and other sound administrative practices. This audit was conducted in conformance with the Institute of Internal Auditors’ International Standards for the Professional Practice of Internal Auditing.

This review emphasized, but was not limited to, compliance with:

- EO 1056, California State University Emergency Management Program
- EO 943, University Health Services
- Coded memorandum Human Resources 2004-10, Mutual Aid
- 20 United States Code §1092(f), Higher Education Opportunity Act
- Code of Federal Regulations Title 28, Part 36, American Disabilities Act
- Code of Federal Regulations Title 29, Part 1910, Occupational Safety and Health Standards
- NFPA 1600, Standard on Disaster/Emergency Management and Business Continuity/Continuity of Operations Programs
- Government Code §8607
- Government Code §13402 and §13403
- CSUDH Emergency Operations Plan
- CSUDH Floor Warden Handbook

AUDIT TEAM

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