DISASTER AND CONTINGENCY PLANNING

CALIFORNIA STATE UNIVERSITY,
LOS ANGELES

Report Number 03-43
March 30, 2004

Members, Committee on Audit

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Roberta Achtenberg, Vice Chair
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ABBREVIATIONS

ACLP  American Culture and Language Program
BCIS  Bureau of Citizenship and Immigration Services
CSULA  California State University, Los Angeles
DCP  Disaster and Contingency Planning
DRII  Disaster Recovery Institute International
EO  Executive Order
IPS  International Programs and Services
MPP  Management Personnel Plan
OES  Office of Emergency Services
SAM  State Administrative Manual
SEMS  Standardized Emergency Management System
SEVIS  Student and Exchange Visitor Information System
EXECUTIVE SUMMARY

As a result of a systemwide risk assessment conducted by the Office of the University Auditor during the last quarter of 2002, the Board of Trustees, at its January 2003 meeting, directed that Disaster and Contingency Planning (DCP) be reviewed. DCP was partially audited in 1997 in a sequence of audits on Seismic Safety and Disaster Readiness.

We visited the California State University, Los Angeles campus from October 13, 2003, through December 5, 2003, and audited the procedures in effect at that time.

In our opinion, the administration and management of DCP activities needed to be improved to ensure appropriate preparation and restoration of operations.

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

GENERAL ENVIRONMENT [8]

Authority for certain DCP roles and activities was not always formalized. Except in one instance, incident command responsibilities were not documented in delegations of authority and job descriptions. In addition, documentation could not be provided to show that the director of the student health center had reviewed and approved the medical disaster component of the campus emergency management plan and to show that the campus had authority from the Office of Emergency Services to register volunteers.

EMERGENCY READINESS [10]

Some site-specific building evacuation and emergency plans that were subordinate to the campus-wide multi-hazard emergency plan needed updating. Four of twenty-two building evacuation and emergency plans were incomplete, and seven plans were older than one year. In addition, the administration of information for non-immigrant students was in need of improvement. For example, a lack of segregation of duties existed between admission or program acceptance and the reporting of information to the Bureau of Citizenship and Immigration Services, and I-20 forms signed by the designated school official could not be provided for some non-immigrant students.

FACILITY ISSUES [13]

Emergency generators other than a communications generator were not periodically tested under a dummy load to ensure their readiness in the event of an emergency, and the disposition of some fire/life safety issues detailed in public safety activity and status reports was unclear.
BUSINESS CONTINUITY [15]

Although self-assessment worksheets had been developed for department use in analyzing critical processes, the results had not been well documented and incorporated into a comprehensive business continuity plan.
INTRODUCTION

BACKGROUND

Government Code §8680.3 defines disaster to mean:

A fire, flood, storm, tidal wave, earthquake, terrorism, epidemic, or other similar public calamity that the governor determines presents a threat to public safety.

In California Code of Regulations, Title 19, §2402, Standardized Emergency Management System Regulations, emergency is defined to mean:

A condition of disaster or of extreme peril to the safety of persons and property caused by such conditions as air pollution, fire, flood, hazardous material incident, storm, epidemic, riot, drought, sudden and severe energy shortage, plant or animal infestations or disease, the governor’s warning of an earthquake or volcanic prediction, or an earthquake or other conditions, other than conditions resulting from a labor controversy.

Mohammad Qayoumi, vice president for administration and finance and chief financial officer at California State University, Northridge, recently authored a book entitled, Mission Continuity Planning, published by the National Association of College and University Business Officers. This publication defines two types of disasters: 1) those that happen suddenly and without notice (e.g., earthquakes), and 2) phased disasters where there can be early warning of eminent danger (e.g., winter storms).

Since the September 11th terrorist attacks, there have been a number of federal initiatives affecting colleges and universities including controls over international students and registration requirements surrounding select agents and toxins. The federal Department of Homeland Security has implemented a new system called Student and Exchange Visitor Information System (SEVIS) to record and monitor information about international students. Other federal agencies including Health and Human Services and the Center for Disease Control have also issued regulations.

Two sources of industry guidance on standards and terminology are Business Continuity: Best Practices as defined by the Business Continuity Institute and a Glossary of Terms from the Disaster Recovery Institute International (DRII). In Best Practice, a disaster recovery plan is “a plan to resume a specific essential operation, function or process of an enterprise.” The DRII’s Glossary of Terms describes disaster recovery as an “approved set of arrangements and procedures that enable an organization to respond to a disaster and resume its critical business functions within a defined time frame.”

Disaster recovery/emergency preparedness plans are required of state agencies by Government Code §8607(a), which states:

The Office of Emergency Services, in coordination with all interested state agencies with designated response roles in the state emergency plan and interested local emergency management agencies shall
INTRODUCTION

jointly establish by regulation a standardized emergency management system for use by all emergency response agencies.
The Standardized Emergency Management System (SEMS) is the system required by Government Code §8607(a) for managing response to multi-agency and multi-jurisdiction emergencies in California. SEMS consists of five organizational levels, which are activated as necessary: field response, local government, operational area, regional, and state. By standardizing key elements of the emergency management system, SEMS is intended to facilitate the flow of information within and between levels of the system and facilitate coordination among all responding agencies. SEMS incorporates the use of five essential Incident Command System functions: command, operations, planning/intelligence, logistics, and finance/administration.

Business/mission continuity is frequently considered a broader term than emergency planning. The goal of emergency planning is to address the immediate impacts of the disaster and to respond as needed to bring the emergency to closure. Business/mission continuity is a continuing cycle of preparation that includes:

![Circular diagram showing the stages of disaster management: Mitigation, Risk Reduction, Prevention, Preparedness, Response, Recovery](image)

**PURPOSE**

Our overall audit objective was to ascertain the effectiveness of existing policies and procedures related to the administration of *Disaster and Contingency Planning* (DCP) activity 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.
INTRODUCTION

Within the overall audit objective, specific goals included determining whether:

- Campuses have developed DCP and other processes that address the most probable incidents that may affect the safety of personnel, damage assets, or cause significant business interruptions and that are also designed to comply with recent terrorism measures.

- Buildings can be safely secured and evacuated, when appropriate, or configured for sheltering-in-place in response to disasters or emergencies.

- The DCP plan is adequately tested and maintained.

- Equipment, information (such as the amount of hazardous materials or number of occupants in a building), supplies, and trained personnel will be available when needed.

- Campuses have a well-equipped emergency operations center.

- Buildings have been retrofitted to the extent practical and reasonable facility measures have been taken such as anchoring furniture and other potential falling objects, providing adequate fire suppression measures, and securing building ventilation and air handling systems so potential biological agents cannot be easily introduced to contaminate widespread areas.

- Campuses have done what they can to reduce the risk of power interruptions.

- Reasonable business continuity plans have been formulated according to priorities established for critical business applications, processes, and systems.

- Continuity of operations beyond initial response periods is realistically addressed.

SCOPE AND METHODOLOGY

The proposed scope of the audit as presented in Attachment B, Agenda Item 2 of the January 23-24, 2003, meeting of the Committee on Audit, stated that DCP includes program and facility readiness and resource planning for actions related to natural and man-made disasters and the recovery there from. Potential impacts include injury of students, staff, faculty, and visitors; disruption of programs and services; financial exposures; damage claims from injured parties; and property damage.

Our study and evaluation were conducted in accordance with the *Standards for the Professional Practice of Internal Auditing* issued by the Institute of Internal Auditors, and included the audit tests we considered necessary in determining that operational and administrative controls are in place and operative. 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. Industry-
wide standards were also considered. The audit review period was July 1, 2001, to date. At California State University, Los Angeles, the public safety department has overall responsibility for DCP. Our primary focus involved the internal administrative, compliance, and operational controls over DCP management. Specifically, we reviewed and tested:

- DCP policies and procedures.
- DCP plans.
- Availability of DCP resources including communication systems, equipment, and supplies.
- Mutual aid agreements.
- Extent of exercises/tests of DCP capabilities.
- Training of DCP personnel.
- Registration and monitoring of visa students.
- Control of select agents and toxins regulated by the federal government.
- Preparation of facilities to withstand disasters.
- Business/mission continuity arrangements for critical processes.
OBSERVATIONS, RECOMMENDATIONS, AND CAMPUS RESPONSES

GENERAL ENVIRONMENT

AUTHORITY AND PERFORMANCE DOCUMENTATION

Authority for, and performance of, certain disaster and contingency planning (DCP) roles and activities were not always formalized or well documented.

We found that, with one exception, incident command responsibilities for key responders in the campus-wide multi-hazard emergency plan were not clearly documented in employee position descriptions. In addition, although the director of the student health center reviewed the plan and participated in drills, there was no documentation to evidence his annual review and approval of the medical disaster components.


California OES, *Standardized Emergency Management Systems Guidelines*, Part I, §B2, dated December 23, 1994, indicates, in part, that the command function with the incident command system is the action taken to direct, order, or control resources by virtue of some explicit legal, agency, or delegated authority.

State Administrative Manual (SAM) §20050 states that elements of a satisfactory system of internal accounting and administrative control include a system of authorization and record-keeping procedures.

Executive Order (EO) No. 814, *Policy on University Health Services*, dated April 4, 2002, requires that the student health center staff review the medical disaster component of the campus emergency plan annually.

The director of human resource management stated that the position descriptions were not updated because the DCP roles and responsibilities had been evolving over time. The director of public safety stated that he had met and informally reviewed the plan with staff in the student health center.

Internal control for DCP activities is compromised when roles and responsibilities and performance of activities are not formalized or fully documented.
Recommendation 1

We recommend that the campus formally document:

a. Incident command responsibilities in position descriptions.
b. Annual review and approval of the campus medical disaster components of the plan.

Campus Response

The campus will formally document:

a. Incident command responsibilities for Management Personnel Plan (MPP) position descriptions, including all campus vice presidents. The campus will consult with the chancellor’s human resource management (HRM) regarding non-MPP position descriptions as necessary.
b. Annual review and approval of the campus medical disaster components of the plan.

The anticipated completion date is August 31, 2004.

REGISTERING VOLUNTEERS

The campus did not have authority from the Governor’s OES to register disaster service worker volunteers.

Title 19 §2570.1 and §2570.2 indicate, in part, that the legislature has provided a state-funded program of workers’ compensation benefits for disaster service worker volunteers who contribute their services to protect the health and safety and preserve the lives and property of the people of the state. A disaster service worker is any person registered with a disaster council or the Governor’s OES, or a state agency granted authority to register disaster service personnel pursuant to the California Emergency Services Act without pay or other consideration.

The director of risk management and environmental health and safety stated that the campus had not made a request to the OES to register disaster services workers because of provisions in the campus volunteer appointment process that allows for volunteers if they have filled out the requisite campus form with certain required information, had the form approved by an appropriate administrator, and returned the form to human resources management prior to performing any work or service.

In the absence of OES authorization, the campus is exposed to potential liability for disaster service worker volunteers.

Recommendation 2
We recommend that the campus obtain OES authorization to register disaster service worker volunteers.

**Campus Response**

The campus will obtain OES authorization to register disaster service worker volunteers.

The anticipated completion date is August 31, 2004.

**EMERGENCY READINESS**

**SUBORDINATE EMERGENCY PLANS**

Certain subordinate site-specific building evacuation and emergency plans needed updating.

Our review of building evacuation and emergency plans for 22 buildings disclosed that four had incomplete plans and seven others had plans older than one year.

California State University, Los Angeles (CSULA) Administrative Procedure 408, *Emergency Action Plan*, requires site-specific “building evacuation and emergency plans” to be updated annually and filed with the emergency operations center. These plans are subordinate to the campus-wide multi-hazard emergency plan.

The director of public safety stated that there were limited resources that could be devoted to maintaining the subordinate plans.

Incomplete planning increases the risk that the campus will not be able to properly respond to emergencies.

**Recommendation 3**

We recommend that the campus update and keep current the subordinate site-specific plans.

**Campus Response**

The campus has initiated a project to update and maintain all subordinate site-specific plans on a current basis.

The anticipated completion date is August 31, 2004.
NON-IMMIGRANT STUDENTS

The administration of information for non-immigrant students was in need of improvement.

Our review disclosed that:

- A lack of segregation of duties existed between admission or program acceptance and the reporting of information to the Bureau of Citizenship and Immigration Services (BCIS). For students admitted to the campus, the same person in the admissions office both admitted and issued the immigration paperwork commonly known as the I-20. For participants in the American Culture and Language Program (ACLP), the same person in the program office accepted the participants and certified eligibility status. Although International Programs and Services (IPS) assumed responsibility for matriculating students when they arrived at the campus, IPS was not involved with the ACLP.

- I-20 forms signed by the designated school official could not be provided for 4 of the 24 non-immigrant students reviewed that were admitted after January 30, 2003. One other non-immigrant student did not have an I-20 issued on a timely basis. This latter I-20 was issued on November 11, 2003, and the student had already been enrolled at the campus after transferring from a local community college.

- Two of twenty-five continuing, non-immigrant students reviewed had differing address records. In the first instance, the address reported to the federal government through the Student and Exchange Visitor Information System (SEVIS) was considered more current than what was recorded in the campus student records system. In the second instance, SEVIS needed updating.

- There were certain transition issues with SEVIS. At CSULA, the fall 2003 quarter was the first term after the August 1, 2003, deadline for implementing SEVIS for continuing students. Our review of 25 continuing students disclosed that two student files were incomplete and would require further follow-up to assure appropriate status reporting. In addition, one file contained a reportable event that was overlooked.

Code of Federal Regulations, Title 8, Part 214, *Retention and Reporting of Information for F, J and M Non-Immigrants; Student and Exchange Visitor Information System; Final Rule*, dated December 11, 2002, prescribes institutional responsibilities for reportable events involving international students including change of address and less than full-time enrollments.

SAM §20050 indicates that the elements of a satisfactory system of internal accounting and administrative controls include a system of record-keeping procedures and a plan of organization that provides segregation of duties.
The director of international programs and services stated that system coordination was awkward because there were two separate databases that were not linked by a common identification number, and the campus had recently experienced turnover of a key staff member in the office. The director
of admissions and university registrar stated that the campus was in the process of implementing the PeopleSoft Student Administration module, which created workload issues and a reluctance to make changes.

Failure to adequately control the reporting of information for non-immigrant students increases exposure to non-compliance with federal regulations.

**Recommendation 4**

We recommend that the campus:

a. Segregate duties and responsibilities over the admission and certification of eligibility for non-immigrant students or establish appropriate mitigating controls.

b. Strengthen policies and procedures to ensure that non-immigrant student information is monitored and updated in a timely manner and maintained in compliance with federal regulations.

**Campus Response**

The campus will:

a. Review duties and responsibilities over the admission and eligibility certification for non-immigrant students and update controls to ensure separation of duties or establish appropriate mitigating controls.

b. Strengthen policies and procedures to ensure that non-immigrant student information is monitored and updated in a timely manner and maintained in compliance with federal regulations.

The anticipated completion date is August 31, 2004.

**FACILITY ISSUES**

**EMERGENCY POWER**

Emergency generators other than a communications generator had not been tested under load.

There were 12 emergency generators, excluding a communications generator, at the campus in service at the time of our visit. Although these generators were started by facilities services during maintenance, they were not periodically tested under a dummy load.

The assistant director of facilities services stated that the testing of generators under load was not occurring because the generators did not have a load bank.

Testing of emergency generators that does not consider current needs increases the risk of failure during an actual emergency.

**Recommendation 5**

We recommend that the campus periodically test emergency generators under load.

**Campus Response**

The campus will update procedures to ensure the periodic testing of its emergency generators under load.

The anticipated completion date is August 31, 2004.

**DISPOSITION OF FIRE/LIFE SAFETY ISSUES**

The disposition of fire/life safety issues was unclear.

Public safety had performed extensive building inspections on fire and life safety systems that were detailed in activity and status reports. Our review of these documents disclosed certain entries for which final dispositions were unclear. Specifically,

- Waiting to locate a spare zone in the panel for the panic button.
- Waiting for parts in order to replace a faulty smoke detector.
- Duct detectors on all floors had water in the conduits, which had rotted the detectors and the wiring in the conduits.
- Manual programmable pull station was not communicating with the main alarm control panel.
- No specific testing records existed for fire sprinkler systems.

The university police administrative services manager stated that tracking of changes occurred through a combination of documents and their familiarity with the buildings through subsequent visits. She further stated that corrections depended upon a number of factors they could not control including workload priorities in facilities services.

Untimely disposition of known fire/life safety issues could subject building occupants to unreasonable risks and expose the campus to liability if injuries result from a known condition.

**Recommendation 6**

We recommend that the campus prioritize and track all fire/life safety issues until remedied.

**Campus Response**

The campus has initiated a coordinated project to prioritize and track all fire/life safety issues until remedied.

The anticipated completion date is August 31, 2004.

**BUSINESS CONTINUITY**

Completion of self-assessment worksheets was not documented and incorporated into business continuity plans.

We noted that information technology services had developed a plan for the continuation of business operations in the event of an extended outage of data processing services. In addition, the campus had implemented a document imaging system that was used by certain departments. However, completion of worksheets for the self-assessment of critical processes had not been documented campus wide.

EO No. 696, *Implementation of the California State University Emergency Preparedness Program*, dated January 29, 1999, requires the campus to maintain an emergency management system which should become effective when a hazardous condition or natural disaster reaches or has the potential for reaching proportions beyond the capacity of routine operations.

SAM §4843.1 requires each state agency to establish and maintain both an operational recovery plan and a plan to resume operations following a disaster.
Title 5 §41302 delegates authority to the campus president to effect any regulations, procedures, and other measures deemed necessary or appropriate to meet an emergency, safeguard persons and property, and maintain educational activities. Sound business practice mandates comprehensive planning that anticipates needs and establishes a foundation for rehearsing support activities.

The director of public safety stated that the self-assessment worksheets were not completed because of workload considerations and other priorities.

Without a sufficient business continuity plan, business resumption would be more difficult.

**Recommendation 7**

We recommend that the campus complete the self-assessment worksheets for critical processes and incorporate them into the business continuity plans.

**Campus Response**

The campus will ensure that self-assessment worksheets for critical processes are completed and incorporated into the business continuity plans.

The anticipated completion date is August 31, 2004.
## APPENDIX A:
## PERSONNEL CONTACTED

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>James M. Rosser</td>
<td>President</td>
</tr>
<tr>
<td>Raul Amador</td>
<td>Building Service Engineer, Facilities Services</td>
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<tr>
<td>Kathy Anderson</td>
<td>System Coordinator, Office of Admissions and University Registrar</td>
</tr>
<tr>
<td>Karl Beeler</td>
<td>Assistant Vice President, Student Affairs/Enrollment Management - Student Affairs</td>
</tr>
<tr>
<td>Becky Bishop</td>
<td>Student Services Coordinator, American Culture and Language Program</td>
</tr>
<tr>
<td>Kevin Brady</td>
<td>Director, Risk Management/Environmental, Health and Safety</td>
</tr>
<tr>
<td>Gregg Breed</td>
<td>Assistant Director of Facilities Services, General Services</td>
</tr>
<tr>
<td>Desiree Bumgarner</td>
<td>Administrative Services Manager, University Police</td>
</tr>
<tr>
<td>Ying Cao</td>
<td>Associate Director, International Programs and Services</td>
</tr>
<tr>
<td>Susan Cash</td>
<td>Acting Associate Vice President, Academic Programs - Academic Affairs</td>
</tr>
<tr>
<td>Doug Davis</td>
<td>University Librarian</td>
</tr>
<tr>
<td>Anita Eral</td>
<td>Admissions Consultant</td>
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<tr>
<td>Michael Fels</td>
<td>Director, International Programs and Services</td>
</tr>
<tr>
<td>Ben Figueroa</td>
<td>Director of General Services and Risk Programs</td>
</tr>
<tr>
<td>Steven N. Garcia</td>
<td>Vice President, Administration and Finance</td>
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<tr>
<td>Sally Gardner</td>
<td>Director, American Culture and Language Program</td>
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<tr>
<td>Michael Gray</td>
<td>Radiation/Biological Safety Officer</td>
</tr>
<tr>
<td>Mark Guthieinz</td>
<td>Director, Facilities Services</td>
</tr>
<tr>
<td>Jerry Harding</td>
<td>Fire Technician, University Police</td>
</tr>
<tr>
<td>Tom Johnson</td>
<td>Director, Procurement and Contracts</td>
</tr>
<tr>
<td>Greg King</td>
<td>Director, Public Safety</td>
</tr>
<tr>
<td>Yuet Lee</td>
<td>Assistant Vice President, Administration and Finance/Financial Services</td>
</tr>
<tr>
<td>Thomas Leung</td>
<td>University Controller</td>
</tr>
<tr>
<td>Tony Liu</td>
<td>Assistant Director, Utilities - Facilities Services</td>
</tr>
<tr>
<td>Dave McNutt</td>
<td>Executive Director, Public Affairs</td>
</tr>
<tr>
<td>Nancy Miron</td>
<td>Assistant Executive Director for Marketing Communications, Public Affairs</td>
</tr>
<tr>
<td>Bev Mitchum</td>
<td>Director, IT Security Management and Compliance – Information Technology Services</td>
</tr>
<tr>
<td>Rob Pure</td>
<td>Automotive Garage Supervisor, Facilities Services</td>
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<td>Peter Quan</td>
<td>Vice President, Information Technology Services</td>
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<tr>
<td>Blanca Rodriguez</td>
<td>Manager, Payroll</td>
</tr>
<tr>
<td>Lisa Sanchez</td>
<td>Director, Human Resource Management</td>
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<td>Carol Selkin</td>
<td>Director, Media Relations/Public Information - Public Affairs</td>
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<tr>
<td>Linda Shaffer</td>
<td>University Internal Auditor</td>
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<tr>
<td>Amy Wang</td>
<td>Immigration Counselor</td>
</tr>
<tr>
<td>Joan Woosley</td>
<td>Director of Admissions and University Registrar</td>
</tr>
</tbody>
</table>
May 10, 2004

Mr. Larry Mandel, University Auditor
Office of the University Auditor
Office of the Chancellor – The California State University
401 Golden Shore, 4th Floor
Long Beach, CA 90802-4210

Re: University’s Response to Recommendations Contained in Report Number 03-43, Disaster & Contingency Planning - CSULA

Dear Mr. Mandel:

Attached are the University’s responses to recommendations contained in the subject report for Disaster & Contingency Planning - CSULA.

Please contact Ms. Linda Shaffer, Campus Internal Auditor, at (323) 343-5102 if you wish to discuss any matter contained herein.

Sincerely,

James M. Rosser
President

Attachment

cc: (w/attachment)
Steven N. Garcia, Campus CFO/Vice President for Administration
Herman D. Lujan, Provost/Vice President for Academic Affairs
Peter Quan, Campus CTO/Vice President for Information Resource Management
Anthony R. Ross, Vice President for Student Affairs
Susan B. Cash, Associate Vice President for Academic Affairs
Gregory King, Director of Public Safety
Michael Fels, Director of International Programs and Services
John R. Ferris, Director of Facilities Services
Benjamin Figueroa, Director of General Services and Risk Programs
Lisa Sanchez, Director of Human Resource Management
Linda Shaffer, Campus Internal Auditor
GENERAL ENVIRONMENT

AUTHORITY AND PERFORMANCE DOCUMENTATION

Recommendation 1

We recommend that the campus formally document:

a. Incident command responsibilities in position descriptions.
b. Annual review and approval of the campus medical disaster components of the plan.

Campus Response

The campus will formally document:

(a) Incident command responsibilities for MPP position descriptions, including all campus Vice Presidents. The campus will consult with the Chancellor’s HRM regarding non-MPP position descriptions as necessary.

(b) Annual review and approval of the campus medical disaster components of the plan.

The anticipated completion date is August 31, 2004.

REGISTERING VOLUNTEERS

Recommendation 2

We recommend that the campus obtain OES authorization to register disaster service worker volunteers.

Campus Response

The campus will obtain OES authorization to register disaster service worker volunteers.

The anticipated completion date is August 31, 2004.
EMERGENCY READINESS

SUBORDINATE EMERGENCY PLANS

Recommendation 3

We recommend that the campus update and keep current the subordinate site-specific plans.

Campus Response

The campus has initiated a project to update and maintain all subordinate site-specific plans on a current basis.

The anticipated completion date is August 31, 2004.

NON-IMMIGRANT STUDENTS

Recommendation 4

We recommend that the campus:

a. Segregate duties and responsibilities over the admission and certification of eligibility for non-immigrant students or establish appropriate mitigating controls.

b. Strengthen policies and procedures to ensure that non-immigrant student information is monitored and updated in a timely manner and maintained in compliance with federal regulations.

Campus Response

The campus will

(a) Review duties and responsibilities over the admission and eligibility certification for non-immigrant students and update controls to ensure separation of duties or establish appropriate mitigating controls.

(b) Strengthen policies and procedures to ensure that non-immigrant student information is monitored and updated in a timely manner and maintained in compliance with federal regulations.

The anticipated completion date is August 31, 2004.
FACILITY ISSUES

EMERGENCY POWER

Recommendation 5

We recommend that the campus periodically test emergency generators under load.

Campus Response

The campus will update procedures to ensure the periodic testing of its emergency generators under load.

The anticipated completion date is August 31, 2004.

DISPOSITION OF FIRE/LIFE SAFETY ISSUES

Recommendation 6

We recommend that the campus prioritize and track all fire/life safety issues until remedied.

Campus Response

The campus has initiated a coordinated project to prioritize and track all fire/life safety issues until remedied.

The anticipated completion date is August 31, 2004.

BUSINESS CONTINUITY

Recommendation 7

We recommend that the campus complete the self-assessment worksheets for critical processes and incorporate them into the business continuity plans.

Campus Response

The campus will ensure that self-assessment worksheets for critical processes are completed and incorporated into the business continuity plans.

The anticipated completion date is August 31, 2004.
MEMORANDUM

TO: Mr. Larry Mandel
    University Auditor

FROM: Charles B. Reed
      Chancellor

SUBJECT: Draft Final Report Number 03-43 on Disaster and Contingency Planning, California State University, Los Angeles

May 19, 2004

In response to your memorandum of May 19, 2004, I accept the response as submitted with the draft final report on Disaster and Contingency Planning, California State University, Los Angeles.

Enclosure

cc: Dr. James M. Rosser, President