AMERICANS WITH DISABILITIES ACT COMPLIANCE

CALIFORNIA STATE UNIVERSITY,
SAN MARCOS

Audit Report 11-44
August 2, 2011

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BOARD OF TRUSTEES
THE CALIFORNIA STATE UNIVERSITY
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ABBREVIATIONS

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<th>Description</th>
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<tr>
<td>ADA</td>
<td>Americans with Disabilities Act</td>
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<tr>
<td>ATI</td>
<td>Accessible Technology Initiative</td>
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<tr>
<td>CERT</td>
<td>Community Emergency Response Team</td>
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<tr>
<td>CSU</td>
<td>California State University</td>
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<tr>
<td>DACC</td>
<td>Disability Access and Compliance Committee</td>
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<td>DSS</td>
<td>Disabled Student Services</td>
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<tr>
<td>EO</td>
<td>Executive Order</td>
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<tr>
<td>EOC</td>
<td>Emergency Operations Center</td>
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<tr>
<td>ICS</td>
<td>Incident Command System</td>
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<tr>
<td>NIMS</td>
<td>National Incident Management System</td>
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<tr>
<td>PSS</td>
<td>Procurement and Support Services</td>
</tr>
<tr>
<td>RMS</td>
<td>Risk Management and Safety</td>
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<tr>
<td>SAM</td>
<td>State Administrative Manual</td>
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<tr>
<td>SEMS</td>
<td>Emergency Management System</td>
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EXECUTIVE SUMMARY

As a result of a systemwide risk assessment conducted by the Office of the University Auditor during the last quarter of 2010, the Board of Trustees, at its January 2011 meeting, directed that Americans with Disabilities Act (ADA) Compliance be reviewed. The Office of the University Auditor had previously reviewed ADA activities as part of the 2002 audits of Disability Support and Accommodations at ten campuses.

We visited the California State University, San Marcos campus from May 23, 2011, through June 17, 2011, and audited the procedures in effect at that time.

Our study and evaluation revealed certain conditions that, in our opinion, could result in significant errors and irregularities if not corrected. Specifically, the campus did not maintain adequate internal control over the following areas: nondiscrimination training, emergency evacuation procedures for individuals with disabilities, and accessible technology. These conditions, along with other weaknesses, are described in the executive summary and body of this report. In our opinion, except for the effect of the weaknesses described above, the operational and administrative controls for ADA compliance in effect as of June 17, 2011, taken as a whole, were sufficient to meet the objectives stated in the “Purpose” section of this report.

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.

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.

Nondiscrimination Training [8]

The campus did not always document nondiscrimination training for newly hired faculty and nondiscrimination refresher training for faculty and staff, nor had it developed a related training policy.

Program and Physical Accessibility [9]

Emergency evacuation procedures for individuals with disabilities needed improvement. Specifically, the campus emergency management plan did not adequately address evacuation procedures for individuals with disabilities, and building marshals, Community Emergency Response Team (CERT) members, and other emergency team personnel did not always receive annual specialized training addressing evacuation, shelter-in-place, refuge areas, and use of evacuation chairs for individuals with disabilities.
EXECUTIVE SUMMARY

FISCAL ADMINISTRATION [10]

General accounting procedures for the collection of miscellaneous cash receipts needed improvement. For example, one individual was responsible for both receiving cash and check payments for test proctoring services and reporting the deposits to the campus cashier’s office, and the payments received for test proctoring services were not periodically reconciled to deposits entered in the CashNet system.

ACCESSIBLE TECHNOLOGY [11]

The campus had not established an Accessible Technology Initiative (ATI) steering committee.
INTRODUCTION

BACKGROUND

In 1973, Congress adopted the Rehabilitation Act, prohibiting discrimination on the basis of disability and ensuring equal opportunity for people with disabilities at any federal agency, including any program or institution that receives federal funds. Section 504 of the Rehabilitation Act ensures certain civil rights for people with disabilities, including access to federally funded programs or activities. In June 1977, the federal government issued regulations implementing Section 504, and in response, California State University (CSU) campuses prepared self-evaluations identifying the steps that would ensure that students with disabilities had equal access to educational opportunities.

In March 1980, CSU developed a policy statement, the Policy for the Provision of Services to Students with Disabilities, 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. It also detailed program goals and objectives, definitions of disabilities, and support services to be offered. In 1980, the CSU Systemwide Advisory Committee on Services to Students with Disabilities was established. The Policy for the Provision of Services to Students with Disabilities was revised in 1989, in part to incorporate disability services identified in 1987’s Assembly Bill 746, State Funded Disabled Student Programs and Services.

In 1990, the federal government enacted the Americans with Disabilities Act (ADA), which reaffirmed Section 504 of the Rehabilitation Act of 1973 and extended the discrimination prohibition to businesses and organizations that do not receive federal funds. The ADA also detailed additional criteria in the areas of employment, new construction or renovation, transportation, and telecommunications; and for public entities that employ 50 or more people, it required the appointment of an ADA coordinator, a self-evaluation, and a transition plan to itemize compliance steps.

In August 1998, President Bill Clinton signed into law the Rehabilitation Act Amendments of 1998. Among other things, the law requires federally funded programs and services to provide people with disabilities access to electronic and information technology. It also strengthened Section 508 of the Rehabilitation Act, which was enacted to eliminate barriers in information technology, make new opportunities available for people with disabilities, and encourage development of technologies that will help achieve these goals. The law applies to all federal agencies, which must ensure that any electronic and information technology that is developed, procured, maintained, or used is accessible to employees and members of the public with disabilities. Section 508 also describes various means for disseminating information, including computers, software, and electronic office equipment. It applies to, but is not solely focused on, federal web pages on the Internet. The law does not apply to private industry or state and local government, but those entities must comply with the law if they are receiving federal funds or under contract with a federal agency. Government Code §11135 requires the CSU and other state governmental entities to comply with the accessibility requirements of Section 508 of the Rehabilitation Act of 1973, as amended.

In 2004, the CSU implemented Executive Order 926, Policy on Disability Support and Accommodations, to make information technology resources and services accessible to all CSU students, faculty, and staff, as well as the general public. Concurrently, the CSU developed the Center for Accessible Media to help
expedite the delivery of electronic instructional texts to eligible CSU students with disabilities. In January 2006, the CSU launched its Accessible Technology Initiative (ATI) in order to develop the work plan, guidance, and resources to assist campuses in carrying out the accessible technology provisions of its revised *Policy on Disability Support and Accommodations*. CSU ATI plans are continuously developing and were revised and extended through policy every year from 2007 to 2010 based on experiences reported by the campuses and the understanding that ATI requirements and milestones should be flexible, allowing campuses to follow different plans for accomplishing them. It is anticipated that ATI will continue to evolve as new needs are identified.

In September 2008, the ADA Amendments Act of 2008 was signed into law, and it became effective on January 1, 2009. The amendments clarified and reiterated who is covered by the law’s civil rights protections and revises the definition of “disability” to more broadly encompass impairments that substantially limit a major life activity. The amended language also states that mitigating measures, including assistive devices, auxiliary aids, accommodations, medical therapies, and supplies have no bearing in determining whether a disability qualifies under the law.
PURPOSE

Our overall audit objective was to ascertain the effectiveness of existing policies and procedures related to ADA compliance and to determine the adequacy of controls over related processes to ensure compliance with relevant governmental regulations, Trustee policy, Office of the Chancellor directives, and campus procedures.

Within the audit objective, specific goals included determining whether:

- Administration of ADA compliance incorporates a defined mission, stated goals and objectives, and clear lines of organizational authority and responsibility, as well as formation of an Advisory Committee on Services to Students with Disabilities, a standing committee on Disability Access and Compliance, and an ATI Steering Committee.

- Policies and procedures are current and comprehensive, and distribution procedures are effective.

- The adequacy of and satisfaction with the ADA program are consistently monitored and assessed.

- Campus notification and complaints processes ensure appropriate compliance with regulatory requirements, as well as timely and adequate resolution of noted disability-related issues.

- People 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 ADA, and student disability services comply with state law, as well as CSU and campus policies.

- Verification of disabilities is timely and adequately performed, and appropriate documentation is provided in compliance with CSU and campus policies.

- Disability information and records 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 people, and auxiliary aids and other equipment for people with disabilities are properly maintained and safeguarded.

- Campus disaster and evacuation plans include evacuation procedures for people with disabilities.

- 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 and accurate, valued properly, and processed in a timely manner, and credit is received.
The campus has developed and documented an ATI implementation plan, including ongoing updates and monitoring through self-assessments.

Equally effective alternative access to programs and facilities is developed, documented, and communicated.

Procedures to ensure compliance with the accessible electronic and information technology procurement program are adequate.

Campus training for ATI is adequate.
INTRODUCTION

SCOPE AND METHODOLOGY

The proposed scope of the audit as presented in Attachment A, Audit Agenda Item 2 of the January 25 and 26, 2011, meeting of the Committee on Audit stated that ADA compliance includes compliance with federal, state, and local rules and regulations that relate to the ADA of 1990 (Title 42). Of primary concern is appropriateness of systemwide guidance, management culture, facility specifications and accommodations, program access considerations, and compliance with reporting standards and requirements. Proposed audit scope would include review of Trustee policy, systemwide directives, and campus policies and procedures; examination of management compliance efforts; review of facility initial or modification design process; analysis of reported campus and systemwide statistics; and testing of reasonable accommodation efforts.

Our study and evaluation were conducted in accordance with the International 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 accounting 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 policies, letters, and directives. The audit focused on procedures in effect from July 1, 2008, through May 13, 2011.

A preliminary risk assessment of campus ADA compliance information was used to select for our audit testing those areas or activities with highest risk. This assessment was based upon a systematic process using management’s feedback and professional judgments on probable adverse conditions and other pertinent information, including prior audit history in this area. We sought to assign higher review priorities to activities with higher risks. As a result, not all risks identified were included within the scope of our review.

Based upon this assessment of risks, we specifically included within the scope of our review the following:

- Monitoring of the quality and effectiveness of campus ADA program services.
- Resolution of complaints and grievances relating to program and physical accessibility.
- Qualifications of services to students with disabilities staff and campuswide training practices.
- Provision of reasonable access and accommodations to applicants and employees.
- Verification of disabilities and providing (or declining) of services to students with disabilities.
- Maintenance and protection of disability information from unauthorized disclosure.
- Provision of programs, services, and activities that are readily accessible to disabled individuals.
- Administration of program and grant funds for ADA compliance.
- Processing and collection of chargebacks for ADA-related services provided to self-supporting operations.
- Recording, safeguarding, and maintenance of inventory for auxiliary aids and equipment.
- Ongoing updates and monitoring of the ATI implementation plan.
- Prioritization of ATI implementation tasks and plans.
- Development, documentation, and communication of equally effective alternative access.
- Adequacy of ATI training.
- Compliance with the accessible electronic and information technology procurement program.
NONDISCRIMINATION TRAINING

The campus did not always document nondiscrimination training for newly hired faculty and nondiscrimination refresher training for faculty and staff, nor had it developed a related training policy.

Executive Order (EO) 883, Systemwide Guidelines for Nondiscrimination and Affirmative Action Programs in Employment, dated October 31, 2003, states that training should cover, but is not limited to, the types of discrimination (including sexual harassment and racial, ethnic, national origin, sex, and disability discrimination), the methods of reporting discrimination, and the respective responsibilities of management and staff in reporting, investigating, and resolving discrimination complaints. It is recommended that training be provided to all new employees shortly after their start dates and periodically thereafter. It is further recommended that information contained in the training be made accessible for reference by current employees annually.

The manager of human resources and equal opportunity stated that it was human resources’ position that EO 833 recommends, but does not require, the campus to offer new employee and refresher equal employment opportunity training, and that campus policy was not necessary. The academic labor relations manager, academic resources, stated that academic services had not yet developed a training program for faculty members.

Failure to document new-hire and refresher nondiscrimination training for faculty and staff and to maintain campus policy for ADA nondiscrimination training increases the risk that employees will not be fully aware of nondiscrimination procedures and requirements, thereby increasing the risk of litigation.

Recommendation 1

We recommend that the campus:

a. Document nondiscrimination training for newly hired faculty and nondiscrimination refresher training for faculty and staff.

b. Develop and implement policies for new-hire and refresher nondiscrimination training.

Campus Response

We concur.

a. Academic resources shall document nondiscrimination training for newly hired faculty and nondiscrimination refresher training for current faculty. Human resources and equal opportunity shall document nondiscrimination refresher training for staff.
b. The campus shall develop a policy regarding new-hire and refresher nondiscrimination training in accordance with Executive Order (EO) 883.

Anticipated completion date: December 23, 2011

PROGRAM AND PHYSICAL ACCESSIBILITY

Emergency evacuation procedures for individuals with disabilities needed improvement.

We found that:

- The campus emergency management plan did not adequately address evacuation procedures for individuals with disabilities.
- Building marshals, Community Emergency Response Team (CERT) members, and other emergency team personnel did not always receive annual specialized training addressing evacuation, shelter-in-place, refuge areas, and use of evacuation chairs for individuals with disabilities.

The California Emergency Management Agency states that evacuation planning should ensure that both functional needs and access for individuals with disabilities are addressed and that an evacuation plan that does not address functional needs is incomplete.

EO 1056, California State University Emergency Management Program, dated March 7, 2011, states that campuses should train the campus community on the California State Emergency Management System (SEMS) and National Incident Management System (NIMS) compliant campus plan. At a minimum, specialized training should be performed annually for employees designated either as building coordinator or building floor marshal, Emergency Operations Center (EOC) team member, or member of the campus emergency management team. Specialized training includes, but is not limited to, SEMS, NIMS and crisis response.

The emergency manager of risk management and safety stated that he was in the process of reviewing the campus emergency operation procedures in an attempt to improve the current evacuation procedures for individuals with disabilities; however, he had not yet had the time to implement changes. He also stated that he was aware of EO 1056 requirements, but was unaware of the need to provide specialized training annually to emergency team personnel.

Failure to address evacuation procedures for individuals with disabilities and provide specialized training for emergency team personnel increases the risk that emergency responders will not be fully aware of their responsibilities related to the evacuation of individuals with disabilities, consequently increasing the risk of inadequate response to emergencies.

**Recommendation 2**

We recommend that the campus:
a. Update the emergency management plan to adequately address evacuation procedures for individuals with disabilities.

b. Provide annual specialized training addressing evacuations, shelter-in-place, refuge areas, and use of evacuation chairs for individuals with disabilities to building marshals, CERT members, and other emergency team personnel.

Campus Response

We concur.

a. The campus shall update the emergency management plan to adequately address evacuation procedures for individuals with disabilities.

b. The campus shall provide annual specialized training addressing evacuations, shelter-in-place, refuge areas, and use of evacuation chairs for individuals with disabilities to building marshals, CERT members, and other emergency team personnel.

Anticipated completion date: December 16, 2011

FISCAL ADMINISTRATION

General accounting procedures for the collection of miscellaneous cash receipts needed improvement.

We found that:

- One individual was responsible for both receiving cash and check payments for test proctoring services and reporting the deposits to the campus cashier’s office.

- The payments received for test proctoring services were not periodically reconciled to deposits entered in the CashNet system.

State Administrative Manual (SAM) §8080.1 states that no one person will perform more than one of the following types of duties: receiving and depositing remittances, and reconciling bank accounts.

SAM §20050 states that the elements of a satisfactory system of internal accounting and administrative controls shall include, but are not limited to: a plan of organization that provides segregation of duties appropriate for proper safeguarding of state assets; a system of authorization and recordkeeping procedures adequate to provide effective accounting control over assets, liabilities, revenues, and expenditures; and an effective system of internal review.

The director of disabled student services stated that segregation of duties between the receiving and reporting of miscellaneous deposits was not in place because he was unaware of the reporting requirements. He also stated that miscellaneous cash receipts were not reconciled to the CashNet system because he was unaware that it was a requirement, and it was his belief that the current...
monthly reconciliation process of comparing the shadow account to the department fund account was sufficient.

Inadequate controls over cash receiving, reporting, and reconciliation duties increases campus exposure to loss from inappropriate acts.

**Recommendation 3**

We recommend that the campus:

a. Implement appropriate segregation of duties over receiving and reporting cash receipts.
b. Periodically reconcile cash receipts to deposits entered in the CashNet system.

**Campus Response**

We concur. All cash handling has been removed from disabled student services. All checks now go directly to the cashier’s office for deposit. Since all cash handling has been removed from disabled student services, the cashier’s office will reconcile cash receipts to deposits entered in the CashNet system.

Anticipated completion date: September 30, 2011

**ACCESSIBLE TECHNOLOGY**

The campus had not established an Accessible Technology Initiative (ATI) steering committee.

We found that the Disability Access and Compliance Committee (DACC) was addressing ATI issues, but the campus had not established a separate ATI steering committee that focused solely on ATI-related issues.

Coded Memorandum Academic Affairs 2010-13, *Revision of Accessible Technology Initiative Coded Memo*, states that expectations and responsibilities for campus executive sponsors in the implementation of ATI include convening a campuswide ATI steering committee.

The dean and chief information officer of instructional and information technology services stated his belief that ATI compliance was adequately addressed by the DACC, rather than through a separate ATI committee.

Failure to establish an ATI steering committee increases the risk that campus programs, services, and activities will not be fully accessible to all individuals.

**Recommendation 4**

We recommend that the campus establish an ATI steering committee.
Campus Response

We concur. Per recommendation of this audit and Coded Memorandum Academic Affairs 2010-13, on June 7, 2011, the campus formed the Accessible Technology Initiative Steering Committee through an invitation by the provost. The first meeting will be in early fall 2011, once all members are available.

Anticipated completion date: December 16, 2011
### APPENDIX A:
**PERSONNEL CONTACTED**

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
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<tbody>
<tr>
<td>Karen S. Haynes</td>
<td>President</td>
</tr>
<tr>
<td>Candace Bebee</td>
<td>Assistant to the Vice President, Finance and Administrative Services</td>
</tr>
<tr>
<td>Bridget Blanshan</td>
<td>Associate Vice President and Dean of Students, Student Affairs</td>
</tr>
<tr>
<td>Melanie Chu</td>
<td>Associate Librarian, Kellogg Library</td>
</tr>
<tr>
<td>Gary Cinnamon</td>
<td>Associate Vice President, Facilities Development and Management</td>
</tr>
<tr>
<td>Floyd Dudley</td>
<td>Director, Facility Services</td>
</tr>
<tr>
<td>Brad Fenton</td>
<td>Director, Planning Design and Construction</td>
</tr>
<tr>
<td>Dawn Formo</td>
<td>Associate Dean for Instruction and Academic Programs, College of Arts and Sciences</td>
</tr>
<tr>
<td>Regina Frasca</td>
<td>Director, Risk Management and Safety (RMS)</td>
</tr>
<tr>
<td>Belinda Garcia</td>
<td>Director, Parking and Commuter Services</td>
</tr>
<tr>
<td>Linda Hawk</td>
<td>Vice President, Finance and Administrative Services</td>
</tr>
<tr>
<td>Troy Holmes</td>
<td>Emergency Manager, RMS</td>
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<tr>
<td>Michelle Hunt</td>
<td>Academic Labor Relations Manager, Academic Resources</td>
</tr>
<tr>
<td>Albert Kern</td>
<td>Interim Dean, Extended Learning</td>
</tr>
<tr>
<td>Dora Knoblock</td>
<td>Executive Director, University Auxiliary and Research Services Corporation</td>
</tr>
<tr>
<td>Kara Kornher</td>
<td>Psychologist and Learning Disabilities Specialist, Disabled Student Services (DSS)</td>
</tr>
<tr>
<td>Suzanne Lingold</td>
<td>Associate Dean, Extended Learning</td>
</tr>
<tr>
<td>Teresa Macklin</td>
<td>Director and Information Security Officer, Instructional and Information Technology Services</td>
</tr>
<tr>
<td>Lisa McLean</td>
<td>Manager, Human Resources and Equal Opportunity</td>
</tr>
<tr>
<td>Lorena Meza</td>
<td>Associate Vice President, Student Academic Support Services</td>
</tr>
<tr>
<td>Dannis Mitchell</td>
<td>Outreach/Multicultural Librarian, Reference/Information Literacy Program</td>
</tr>
<tr>
<td>Isabel Newberg</td>
<td>Director, Procurement and Support Services (PSS)</td>
</tr>
<tr>
<td>Pamela Ohrazda</td>
<td>Buyer, PSS</td>
</tr>
<tr>
<td>Sara Quinn</td>
<td>Director, Clarke Field House and Student Union</td>
</tr>
<tr>
<td>Holly Reed</td>
<td>Resident Director, University Village Apartments</td>
</tr>
<tr>
<td>Katy Rees</td>
<td>Assistant Vice President, Administration</td>
</tr>
<tr>
<td>Michelle Saavedera</td>
<td>Support Services Coordinator, DSS</td>
</tr>
<tr>
<td>John Segoria</td>
<td>Director, DSS</td>
</tr>
<tr>
<td>Eloise Stiglitz</td>
<td>Vice President, Student Affairs</td>
</tr>
<tr>
<td>Janelle Temnick</td>
<td>Administrative Support Coordinator, Office of the Dean of Students</td>
</tr>
<tr>
<td>Wayne Veres</td>
<td>Dean and Chief Information Officer, Instructional and Information Technology Services</td>
</tr>
<tr>
<td>Sarah Villarreal</td>
<td>Director Student Services, Extended Learning</td>
</tr>
<tr>
<td>Randy Woods</td>
<td>Inspector of Record, Planning Design and Construction</td>
</tr>
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August 26, 2011

Mr. Larry Mandel
University Auditor
The California State University
401 Golden Shore
Long Beach, CA 90802

Subject: Campus Response to Audit Report 11-44, Americans with Disabilities Act Compliance
California State University San Marcos

Dear Mr. Mandel:

Enclosed is our revised campus response for Audit Report 11-44, Americans with Disabilities Act Compliance. We anticipate sending our supporting evidence no later than December 23, 2011.

Please let us know if you have any questions or need additional information.

Sincerely,

Linda Hawk
Vice President
Finance and Administrative Services

Attachment

c: President Karen S. Haynes
AMERICANS WITH DISABILITIES ACT COMPLIANCE

CALIFORNIA STATE UNIVERSITY,
SAN MARCOS

Audit Report 11-44

NONDISCRIMINATION TRAINING

Recommendation 1

We recommend that the campus:

a. Document nondiscrimination training for newly hired faculty and nondiscrimination refresher training for faculty and staff.

b. Develop and implement policies for new-hire and refresher nondiscrimination training.

Campus Response

a. We concur. Academic Resources shall document nondiscrimination training for newly hired faculty and nondiscrimination refresher training for current faculty. Human Resources and Equal Opportunity shall document nondiscrimination refresher training for staff.

   Anticipated completion date: December 23, 2011

b. We concur. The campus shall develop a policy regarding new-hire and refresher nondiscrimination training in accordance with Executive Order (EO) 883.

   Anticipated completion date: December 23, 2011

PROGRAM AND PHYSICAL ACCESSIBILITY

Recommendation 2

We recommend that the campus:

a. Update the emergency management plan to adequately address evacuation procedures for individuals with disabilities.

b. Provide annual specialized training addressing evacuations, shelter-in-place, refuge areas, and use of evacuation chairs for individuals with disabilities to building marshals, CERT members, and other emergency team personnel.
Campus Response

a. We concur. The campus shall update the emergency management plan to adequately address evacuation procedures for individuals with disabilities.

   Anticipated completion date: December 16, 2011

b. We concur. The campus shall provide annual specialized training addressing evacuations, shelter-in-place, refuge areas, and use of evacuation chairs for individuals with disabilities to building marshals, CERT members, and other emergency team personnel.

   Anticipated completion date: December 16, 2011

FISCAL ADMINISTRATION

Recommendation 3

We recommend that the campus:

a. Implement appropriate segregation of duties over receiving and reporting cash receipts.
b. Periodically reconcile cash receipts to deposits entered in the CashNet system.

Campus Response

We concur. All cash handling has been removed from Disabled Student Services. All checks now go directly to the Cashier’s Office for deposit. Since all cash handling has been removed from Disabled Student Services, the Cashier’s Office will reconcile cash receipts to deposits entered in the CashNet system.

   Anticipated completion date: September 30, 2011

ACCESSIBLE TECHNOLOGY

Recommendation 4

We recommend that the campus establish an ATI steering committee.

Campus Response

We concur. Per recommendation of this audit and Coded Memorandum Academic Affairs 2010-13, on June 7, 2011, the campus formed the Accessibility Technology Initiative Steering Committee through an invitation by the Provost. The first meeting will be in early Fall 2011 once all members are available.

   Anticipated completion date: December 16, 2011
September 20, 2011

MEMORANDUM

TO: Mr. Larry Mandel  
University Auditor

FROM: Charles B. Reed  
Chancellor

SUBJECT: Draft Final Report 11-44 on  
Americans with Disabilities Act Compliance  
California State University, San Marcos

In response to your memorandum of September 20, 2011, I accept the response  
as submitted with the draft final report on Americans with Disabilities Act  
Compliance, California State University, San Marcos.

CBR/amd