March 17, 2017

Dr. Leroy M. Morishita, President
California State University, East Bay
25800 Carlos Bee Boulevard
Hayward, CA 94542

Dear Dr. Morishita:

Subject: Audit Report 16-47, Emergency Management, California State University, East Bay

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, East Bay

Audit Report 16-47
February 14, 2017
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, controls evaluated were not adequate, appropriate, or effective to provide reasonable assurance that risks were being managed and objectives were met.

We found that due to vacancies and turnover in the emergency operations manager position, components of the existing campus emergency management program needed to be improved and emergency training needed to be strengthened. Specifically, we found that the performance and documentation of evacuation drills needed improvement; emergency training for emergency operations center (EOC) team members, new hires, and volunteer team leaders was not always performed as required; emergency exercises were not always performed in accordance with California State University (CSU) requirements; EOC supplies were not always adequate or properly accounted for; the listing of campus emergency resources was outdated and decentralized; and the emergency operations plan (EOP) and student housing emergency procedures were outdated or incomplete.

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

1. VOLUNTEER TEAM LEADER PROGRAM

OBSERVATION

The campus volunteer team leader (VTL) program needed improvement.

The VTL program is responsible for facilitating the safe evacuation of campus buildings through the use of trained volunteer faculty and staff employees. During our review, we found that:

- VTLs were not required to complete annual training. We reviewed training records for ten VTLs and found that nine did not complete required training.

- Although the campus performed evacuation drills at the main campus annually, these drills included only a few selected buildings, not the entire campus, as required. In addition, the Concord satellite campus did not perform an evacuation drill in 2016.

- The results of evacuation drills for the main campus and Concord satellite campus were not always documented in after-action reports or discussed with emergency management team members.

- The listing of VTLs for the main campus and the Concord satellite campus on the environmental health and safety (EHS) website was outdated and did not reflect current team members.

Maintaining an effective VTL program helps to ensure the safety of employees, students, and visitors in the event of an emergency.

RECOMMENDATION

We recommend that the campus:

a. Require VTLs to complete annual training and document training completion.

b. Perform annual campuswide evacuation drills at the main and Concord satellite campuses.

c. Document the results of evacuation drills in after-action reports and communicate the results to emergency management team members.

d. Update the listing of VTLs on the EHS website to reflect current team members.

MANAGEMENT RESPONSE

We concur.
a. Coordination and documentation of all completed VTL training is the responsibility of the EHS VTL training coordinator. A mandatory VTL training has been scheduled for March 29, 2017. An agenda and the sign-in list of attendees will be provided to the Office of Audit and Advisory Services (OAAS) by April 10, 2017.

b. The campus emergency coordinator has prepared a schedule of evacuation drills for the Hayward campus; the first drill will occur on April 5, 2017. The Concord campus is scheduled for an evacuation drill on April 19, 2017. The overall schedule of drills and exercises will be provided to the OAAS by March 31, 2017.

c. After-action reports of the initial Hayward and Concord evacuation drills will be communicated to emergency management team members via email within 30 days of each drill. Evidence of this communication will be provided to OAAS by May 19, 2017.

d. The EHS website has been updated by EHS staff to reflect the current VTLs in Hayward and Concord. The revised webpage links will be provided to OAAS by March 31, 2017.

2. SPECIALIZED EMERGENCY PREPAREDNESS TRAINING

OBSERVATION

Training requirements for EOC team members were unclear, and training was not always completed as required.

We found that the campus did not have a process to track EOC team member training and that prior to November 2016, specialized training was not provided to EOC team members annually, as required by systemwide policy.

We also found that the campus EOP did not accurately reflect campus-specific requirements regarding completion of certain Federal Emergency Management Agency (FEMA) courses and that five of the ten EOC team members we reviewed either had not completed the required FEMA courses or had not completed the courses by the campus-specified deadline.

Properly defined training requirements and completion and documentation of emergency training ensures that emergency team members are properly prepared to respond to an emergency situation, increases safety, and reduces the risk of noncompliance with campus and CSU requirements.

RECOMMENDATION

We recommend that the campus:

a. Develop a process to monitor and track training completed by EOC team members.

b. Provide specialized emergency training to EOC team members annually and document completion of the training.

c. Update the campus EOP to reflect current FEMA training requirements.
MANAGEMENT RESPONSE

We concur.

a. The Campus Emergency Coordinator will develop a process to monitor and track annual training. Revised EOC team training courses will be provided in a group setting to the updated EOC team. Any EOC team members who do not attend the initial training session will be tracked and trained at a separate meeting. An updated EOC team roster and a written process to monitor and track annual training will be provided to OAAS by April 17, 2017.

b. The 2016 training has been completed for the individual noted during the audit; evidence of this will be provided by April 30, 2017. The campus will confer with other CSU campuses to identify specialized annual emergency training courses for EOC team members. The new courses will be selected by May 31, 2017. 2017 training has been scheduled, and attendance will be documented.

c. The campus EOP is being updated for 2017 and will address the revised specialized training requirements and the updated list of EOC team members, as noted above. The campus will provide the revised EOP to OAAS by August 4, 2017.

3. EMERGENCY EXERCISES

OBSERVATION

The campus did not perform simulated emergency incidents and exercises in accordance with systemwide policy.

Specifically, systemwide policy requires that simulated emergency incidents, including mutual aid and assistance agreements, be performed according to the following schedule: tabletop exercises and drills, annually; functional exercises, every other year; and full-scale exercises, at least every five years.

We reviewed simulated incidents and exercises from 2014 to 2016 and found that the campus had conducted only one tabletop exercise and no functional exercises during that time period. In addition, we were unable to verify that a full-scale exercise had been performed within the past five years. We also found that although the campus had an established memorandum of understanding for mutual assistance with the Concord Police Department, the campus had not coordinated any exercises to test this agreement.

Completing simulated emergency incidents and exercises and conducting interagency emergency management activities in accordance with CSU requirements strengthens the campus emergency management team’s ability to effectively respond in the event of an emergency.
RECOMMENDATION

We recommend that the campus perform simulated emergency incidents and exercises, including the periodic testing of mutual aid and assistance agreements, as required by systemwide policy.

MANAGEMENT RESPONSE

We concur. The campus emergency coordinator has scheduled a simulated emergency drill on the Concord campus on April 19, 2017, that will test the mutual aid and assistance agreement with the city of Concord police department. The after-action report will be provided to the OAAS by May 15, 2017.

The Hayward campus full-scale exercise is more complex; it is in the planning stages, and the date for the exercise will be determined by June 1, 2017. The campus will provide interim planning specifics to OAAS by August 1, 2017.

Tabletop and functional exercises will be performed in accordance with systemwide policy. An EOC functional tabletop exercise is scheduled for July 19, 2017; evidence of completion will be provided by August 14, 2017. The overall schedule of functional drills and exercises will be provided by March 31, 2017.

4. EMERGENCY OPERATIONS CENTER

OBSERVATION

The campus primary and secondary EOCs needed improvement.

Specifically, we found that supplies for the primary and secondary EOCs were insufficient. For example:

- Supplies for the primary EOC were in two different areas of the building, which would likely make access difficult during an emergency.

- The primary and secondary EOCs did not have sufficient laptops to support the five Standardized Emergency Management System (SEMS) functions.

- The primary EOC supply listing maintained by the emergency operations manager was inaccurate. Specifically, it did not include two equipment items and several USB storage devices and did not agree with the campus EOP’s emergency supply listing.

- The primary EOC did not contain a listing of emergency contact phone numbers or a listing of campus emergency resources.

We also found that the campus did not have documented procedures on how to activate or set up the EOCs during an emergency.
Maintaining a well-equipped EOC allows for a timely and adequate response in an emergency and ensures that emergency supplies are readily available.

RECOMMENDATION

We recommend that the campus:

a. Centralize supplies for the primary EOC to facilitate access.

b. Review the current supply listings for the primary and secondary EOCs for adequacy and accuracy, taking into consideration the issues noted above; document the outcome of this evaluation; and adequately equip the EOCs and update the supply listings based on this review.

c. Maintain a copy of emergency contact phone numbers and a listing of campus emergency resources in the EOC.

d. Document EOC activation/set-up procedures and maintain a copy of the procedures at the primary and secondary EOCs.

MANAGEMENT RESPONSE

We concur.

a. Emergency supplies located in the suite across from the primary EOC will be centralized and moved to a new locked file cabinet in the primary EOC. A new cabinet was purchased by EHS staff on February 10, 2017. Delivery is expected by April 7, 2017, and supplies will be relocated by April 15, 2017.

b. An evaluation of supply listings for the primary and secondary EOCs will be performed by the campus emergency coordinator. The EOC supply listings will be updated to ensure adequacy of supplies by May 1, 2017. A copy of the revised listing, including the addition of five laptops, will be provided to OAAS by May 15, 2017.

c. A copy of the emergency contact phone numbers and a listing of campus emergency resources will be added to the binders in the primary and secondary EOCs by the campus emergency coordinator. These updated lists will be provided to OAAS by April 1, 2017.

d. The campus emergency coordinator has documented the step-by-step EOC activation/set-up procedures. The procedures have been added to the binders in the primary and secondary EOCs. A copy of the procedures will be provided to OAAS by April 1, 2017.

5. EMERGENCY RESOURCES

OBSERVATION

Campus listings of emergency resources needed improvement.
We found that the campus had several lists of emergency resources maintained by various departments that did not appear to have been evaluated or tracked by the emergency operations manager, as required in the campus EOP. These resource listings were not organized by category or type and did not always contain the date they were last updated.

Specifically, we found that:

- Emergency resource listings maintained by the student health center (SHC), EHS, and housing did not always reflect the current emergency resources available.

- Some perishable emergency resources at SHC and housing were expired.

Additionally, we found that the campus did not maintain a listing of emergency contracts, as required by systemwide policy.

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

**RECOMMENDATION**

We recommend that the campus:

a. Create a process to allow the emergency operations manager to evaluate and track the various emergency resource listings.

b. Review emergency resource listings to address the issues noted above, replace any supplies as needed, and update the listings accordingly.

c. Create a listing of emergency contracts or vendors to be used for emergency purchases.

**MANAGEMENT RESPONSE**

We concur.

a. The emergency operations coordinator will perform an annual inventory in coordination with the VTL coordinator, student health and student housing. The first inventory will be performed as of May 30, 2017, and the lists of actual versus expected emergency supplies will be provided to the OAAS by June 15, 2017.

b. After the scheduled inventory, emergency supplies will be ordered by each area as needed to replace supplies used and replenish perishable resources, such as expired batteries. The emergency resource listings will be updated and centralized in the EOC to reflect the emergency supplies physically on hand in student housing, student health, the two EOCs and the EHS storage location. The four updated listings will be provided to OAAS by July 31, 2017.
6. EMERGENCY OPERATIONS PLAN

**OBSERVATION**

The campus EOP needed to be updated.

We found that:

- The plan did not address the needs of campus international students or individuals with limited English proficiency.

- The plan did not include checklists for specific functions (branches/unit roles) within each section of the EOC to define emergency assignments, roles, and responsibilities.

- The plan did not contain an annex addressing campus closure or other courses of action to secure campus buildings, facilities, and grounds when necessary.

- EOC team members did not have access to the EOP functional annexes, which included specific information and checklists used for emergency response.

- The plan was not always updated annually. We found that although the current EOP was updated in 2016, the previous version was updated in 2013.

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 review the current EOP, update it to address the areas discussed above, and distribute the updated version, including the functional annexes, to the EOC team.

**MANAGEMENT RESPONSE**

We concur. The campus is in the process of updating the EOP for 2017 to address the areas noted in the audit. The EOP and all functional annexes will be distributed to the EOC team by August 1, 2017, and the EOP will be added to the campus website. The OAAS will receive a copy of the EOP and functional annexes by August 4, 2017.
7. STUDENT HOUSING

OBSERVATION

The student housing emergency procedures and evacuation drills needed improvement.

We found that several sections of the student housing emergency procedures manual were incomplete or needed to be updated. Additionally, the manual included a student housing EOC and EOC team that was not referenced in the campus EOP, and it was unclear how the student housing EOC would coordinate with the campus EOC during an emergency, as roles and responsibilities had not been established.

Also, we found that student housing evacuation drills were not performed twice a year as discussed in the campus annual safety and security report, and that prior to 2015, housing evacuation drills were not documented. Further, we found that the campus EOP inaccurately stated that evacuation drills were performed four times a year.

Complete and current emergency procedures and properly defined emergency roles and responsibilities provide assurance that the campus will be able to effectively respond to emergencies in an effective and timely manner.

RECOMMENDATION

We recommend that the campus:

a. Review and update the student housing emergency procedures manual to ensure that it is complete and contains current information.

b. Review the student housing EOC and EOC team and determine whether it is appropriate. If so, define the roles and responsibilities for the student housing EOC team and determine how the student housing EOC will coordinate with the campus EOC during an emergency.

c. Perform student housing evacuation drills twice a year as indicated in the campus annual safety and security report, and maintain documentation showing that these drills occurred.

d. Update the EOP to reflect current practices for student housing evacuation drills.

MANAGEMENT RESPONSE

We concur.

a. The revised student housing emergency procedures will be finalized by the director of student housing and residential life by March 10, 2017. These procedures will be provided to OAAS by March 31, 2017.

b. Student housing has been officially designated as a branch. The August 2017 EOP will define roles, responsibilities, and coordination between student housing and the EOC.
during an emergency. This may involve revisions to the March 2017 student housing emergency procedures.

c. The campus emergency coordinator conducted a student housing fire drill on February 22, 2017, for the Tamalpais, Shasta, and Diablo residence halls. The after-action report will be provided to the OAAS by March 31, 2017. Student housing evacuation drills will be performed twice a year, and we will maintain documentation of these drills.

d. The EOP revision will reflect that student housing evacuation drills are performed twice a year. The EOP will be provided to the OAAS by August 4, 2017.

8. NEW-HIRE TRAINING

OBSERVATION

New employees at the campus and Associated Students, Inc. (ASI) did not always complete emergency preparedness training, as required by campus and systemwide policy.

We reviewed training records for 20 faculty and staff new hires and found that:

- In five instances, there was insufficient documentation to show that new staff attended the in-person emergency preparedness training conducted by human resources and risk management, as required by the campus.

- Four individuals had not completed online safety orientation training, and 12 individuals did not complete this training within 30 days of their hire date, as required by the campus. Completion dates for these 12 individuals ranged from 112 days to 831 days after the employee was hired.

Additionally, we found that new ASI employees were not provided with emergency preparedness training.

Provision of emergency preparedness training to new employees assures that employees are aware of emergency and evacuation procedures, increases safety, and allows for an adequate response in the event of an emergency.

RECOMMENDATION

We recommend that the campus and ASI:

a. Reinforce the requirement that new campus staff members attend in-person emergency preparedness training and that all new campus hires complete online safety orientation training within 30 days of hire.

b. Provide emergency preparedness training to new ASI employees.
MANAGEMENT RESPONSE

We concur.

a. The AVP of human resources and the associate provost will revise the new-hire training checklist forms for staff and faculty by March 31, 2017. All new faculty training will be monitored by the faculty contract specialist in academic affairs. Online training, including safety orientation, will be monitored for timely completion by the EHS VTL training coordinator, using Skillport reports, effective May 1, 2017. An updated emergency preparedness training flyer will be provided by human resources at all new employee orientations, effective May 1, 2017. The revised training checklist forms for faculty and staff and the updated emergency preparedness training flyer will be provided to OAAS by April 15, 2017.

b. Emergency preparedness training of new ASI employees will be monitored and documented by the executive director of ASI, who handles some of the human resources functions. A memo from the ASI executive director to the ASI office manager regarding emergency preparedness training will be provided to the OAAS by March 31, 2017.
GENERAL INFORMATION

BACKGROUND

The 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.

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 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, East Bay (CSUEB), the emergency management program supports the campus community by implementing plans and procedures in emergency
planning, training, response, mitigation, and recovery. The emergency operations manager is responsible for the day-to-day operations of the emergency management program and advising university administrators and executives on disaster preparedness, response, and recovery issues. The emergency operations manager reports directly to the chief of police, who reports up to the vice president of administration and finance, who is also the emergency executive responsible for overseeing the campuswide emergency management program. EHS is responsible for the VTL program, which ensures the safe evacuation of buildings during a drill or actual emergency.

SCOPE

We visited the CSUEB campus from November 1, 2016, through December 9, 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 December 9, 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 or similar 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 943, University Health Services
- EO 1056, California State University Emergency Management Program
- Coded memorandum Human Resources 2004-10, Mutual Aid
- 20 United States Code §1092(f), Higher Education Opportunity Act
- Code of Federal Regulations Title 29, Part 1910, 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
- CSUEB Multi-hazard Emergency Operations Plan
- CSUEB Student Housing and Residence Life Emergency Procedures Manual
- CSUEB Student Health and Counseling Services Disaster and Emergency Manual

AUDIT TEAM

| Senior Director: Michelle Schlack |
| Senior Audit Manager: Wendee Shinsato |
| Audit Manager: Cindy Merida |
| Senior Auditor: Samer Harb |