Table of Contents

Introduction ...................................................................................................................................... 3
Internal Audit Process ....................................................................................................................... 4
A. Purpose ......................................................................................................................................... 4
B. Frequency ..................................................................................................................................... 4
C. Scope ............................................................................................................................................ 4
D. Procedure ...................................................................................................................................... 5
E. Reporting ..................................................................................................................................... 5
F. Follow Up ...................................................................................................................................... 6
Introduction

As part of an agreement between The City University of New York (CUNY) and the Environmental Protection Agency, CUNY adopted an Environmental Management System (EMS) designed to attain University and College goals for the effective management and continued improvement of its environmental programs. A component of the EMS includes performing internal audits of each campus. The internal audit program has become an effective tool, helping campuses improve environmental, health and safety compliance.

This Program outlines the internal audit process as it is implemented across all CUNY campuses. It is not intended to supersede any specific operational rules or procedures that have been adopted by the University to comply with health, safety and environmental regulations or policies.

Please check the CUNY Office of Environmental, Health, Safety and Risk Management (EHRSRM) website (www.cuny.edu/ehrsrm) to be sure that you have the most recent version of the manual. In addition, we welcome your input and comments, so that we can continue to improve the University’s environmental programs.

Howard N. Apsan, Ph.D.
University Director
Environmental, Health, Safety and Risk Management
Internal Audit Process

A. Purpose
The Internal Audit Process seeks to support and improve environmental, health and safety compliance on CUNY campuses through regular inspections, internal reporting and corrective action.

B. Frequency
Campuses are audited at least every three years. In addition to the scheduled audits, one campus will be selected for an unscheduled audit each semester. This audit is meant to simulate an unannounced visit from a regulatory agency.

C. Scope
The scope of the audits includes environmental, health and safety regulatory programs applicable to the campus. Additional programs may be added to the audit’s scope as necessary.

1. Environmental Programs. Environmental programs that will be audited include the following:
   a. Air
   b. Petroleum Bulk Storage
   c. Resource Conservation and Recovery Act
   d. Spill Prevention, Control and Countermeasures
   e. Water
   f. Universal Waste
   g. Regulated Medical Waste
   h. Radiation Safety
   i. Community Right-To-Know
   j. CUNY Environmental Management System

2. Health and Safety Programs. Health and Safety programs that will be audited include the following:
   a. Hazard Communication and Right-to-Know
   b. Asbestos awareness training
   c. Bloodborne Pathogen
   d. Respiratory Protection
   e. Confined Space
   f. Lockout/Tagout
   g. Powered Industrial Trucks
   h. Respirable Crystalline Silica
D. Procedure

1. Audit Team. The audit team consists of the University Environmental Compliance Director, University Health & Safety Director, rotating EHS Officers from campuses not being audited that semester, and other EHSRM support staff.

2. Locations Involved. The audit team inspects all laboratories, all facilities shops, theatrical scene shops, painting studios, darkrooms, print shops, waste storage areas, and petroleum bulk storage facilities. Additional locations may also be inspected.

3. Records Reviewed. Along with physical locations, the records required for regulatory programs will be reviewed. The review will include records for the following:
   a. Training
   b. Fuel use
   c. Emissions calculations
   d. PBS registrations and inspections
   e. Manifests and related documents
   f. Program specific plans
   g. Required supportive materials

E. Reporting

Following each audit, a detailed report will be issued to the campus. Audit reports will contain the following information for each program:

1. Executive Summary of Findings. This consists of a brief description of types of deficiencies.

2. Comparison to Previous Audits. This is a brief description highlighting persistent issues noted on past audits.

3. Detailed List of Findings. This details findings in the following manner:
   a. The specific location of the deficiency.
   b. A detailed description of the nature of the deficiency.
   c. The citation(s) of the regulation(s) that define the deficiency.
   d. Corrective actions needed to resolve the deficiency.
F. Follow Up

1. Out-briefing. At the discretion of the campus, immediately at the end of the audit, campus leadership can meet with the EHSRM auditors to discuss the deficiencies found during the audit.

2. Report Review. After the audit report has been issued, the EHSRM auditors will meet with members of campus leadership to discuss the audit report in detail including any systematic changes recommended to keep the campus in compliance.

3. Corrective Action. The campus will provide EHSRM with a detailed description of the corrective actions taken to mitigate each deficiency within 14 days of receiving the audit report. If any corrective action requires more than 14 days to complete, the campus will provide EHSRM with a timeframe for correcting the deficiency. If there is a time limit imposed by regulation, the timeline provided by the campus must comply with the regulatory time limit.

4. Re-inspection. If EHSRM deems it necessary, the campus will be re-inspected to document that corrective measures have been implemented to insure continuous compliance.