



UNITED STATES CAPITOL POLICE OFFICE OF INSPECTOR GENERAL

Performance Audit of Hazardous Materials Response Team

Report Number OIG-2014-05

September 2014

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UNITED STATES CAPITOL POLICE WASHINGTON, DC 20003



INSPECTOR GENERAL

PREFACE

The Office of Inspector General (OIG) prepared this report pursuant to the Inspector General Act of 1978, as amended. It is one of a series of audits, reviews, and investigative and special reports OIG prepares periodically as part of its oversight responsibility with respect to the United States Capitol Police (USCP) to identify and prevent fraud, waste, abuse, and mismanagement.

This report is the result of an assessment of the strengths and weaknesses of the office or function under review. It is based on interviews with employees and officials of relevant agencies and institutions, direct observation, and a review of applicable documents.

We developed our recommendations on the basis of the best knowledge available to OIG and discussed in draft with those responsible for implementation. It is my hope that the recommendations will result in more effective, efficient, and/or economical operations.

I express my appreciation to those contributing to the preparation of this report.

Fay F. Ropella Inspector General

Tray It. Ropella

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Abbreviations and Acronyms

Chemical, Biological, Radiological, and Nuclear	CBRN
Chemical, Biological, Radiological, Law	CBRLE
Enforcement	
Cotton and Company LLP	Cotton
Determination and Findings	D&F
Economy Act	the Act
Federal Acquisition Regulations	FAR
Fiscal Year	FY
Force Development Process	FDP
Full-time Equivalent	FTE
Government Accountability Office	GAO
Hazardous Materials Response Team	HMRT
Hazardous Device Section	HDS
Hazardous Incident Response Division	HIRD
Office of Inspector General	OIG
Office of Policy and Management Systems	OPOL
Off-Site Delivery Center	OSDC
Operational Service Bureau	OSB
Property Asset Management Division	PAMD
Quick Response Vehicle	QRV
Radiation Safety Officer	RSO
Self-Contained Breathing Apparatus	SCBA
Standard Operating Procedure	SOP
Specialty Response Vehicle	SRV
United States Capitol Police	USCP or the Department
Vehicle and Cargo Inspection System	VACIS

EXECUTIVE SUMMARY

The United States Capitol Police (USCP or the Department) maintains the Hazardous Materials Response Team (HMRT) within the Hazardous Incident Response Division (HIRD), which is part of the Operational Services Bureau (OSB). The role of HMRT is to prepare for, detect, respond to, and defeat chemical, biological, radiological, and nuclear (CBRN) threats arising within the geographic jurisdiction or statutory protective authority of USCP.

Based on several complaints and at the request of then-Inspector of HIRD, the Office of Inspector General (OIG) conducted a performance audit of the HMRT program. The objectives of this audit were to determine if HMRT (1) established adequate internal controls and processes for ensuring the integrity of its program, (2) complied with applicable laws, regulations, and guidance pertaining to management and operation of its program, and (3) took corrective actions related to the previous recommendations OIG made in Report Number OIG-2010-02, Review of Hazardous Materials Response Team Procurement Process, issued in March 2010. Our scope for the audit included HMRT controls, processes, and operations during Fiscal Years (FYs) 2011, 2012, and 2013. OIG contracted with Cotton & Company LLP to assist with the performance of this audit.

The Government Accountability Office (GAO) Standards for Internal Control in the Federal Government, (GAO/AIMD-00-21.3.1, dated November 1999), define internal controls as an integral component of an organization's management that provides reasonable assurance of effective and efficient operations, reliable financial reporting, and compliance with applicable laws and regulations. Although it followed a set of practices and processes, HMRT did not complete its annual review of standard operating procedures (SOPs). Accordingly, multiple inconsistencies existed between the official SOP lists the Office of Policy and Management Systems (OPOL) and HMRT provided. For example, HMRT reported some SOPs rescinded that neither management nor OPOL approved. In addition, during our testing of procurement transactions, we noted missing packing slips, receiving reports, invoices, or other equivalent documentation. Further, there was a potential conflict of interest between an HMRT employee and a contractor.

During a walkthrough of the warehouse, we observed large piles of equipment and supplies that HMRT identified as excess and for which HMRT had not begun to approve or begin the disposal process. We also noted that property and inventory was not properly secured in the warehouse. Examples of property and inventory not being secure included (1) the inventory cage had a simple lock on the front of the cage but the door remained open during the day, (2) no security camera was present and positioned to see vulnerable locations of the warehouse or a proximity card reader, and (3) warehouse inventory and property were vulnerable to theft, waste, and abuse because employees maintained office space inside its secure area of the warehouse, compromising the security of inventory located in its inventory warehouse.

HMRT did not always comply with, or provide documentation supporting that it complied with its SOPs. Testing of the qualified drivers list, provided by HMRT, revealed that HMRT drivers listed as qualified to operate the Specialty Response Vehicle (SRV) did not conduct the required annual driver evaluation on that vehicle and the driver evaluation course did not meet testing objectives, subsequently invalidating the results of the driver evaluations. HMRT also is not correctly using form the provided by HMRT, revealed that HMRT also is not correctly using form the provided by HMRT, revealed that HMRT also is not correctly using form the provided by HMRT also is not considered by HMRT also is not consid

HMRT did not comply with the Contained Breathing Apparatus (SCBA) Inspection and Maintenance. In addition, HMRT could not locate two tanks for SCBA maintenance and one tank remained missing. Furthermore, HMRT did not comply with the SCBA inspections for respirator facepiece fit tests and medical monitoring. As a result, HMRT records regarding respiratory equipment or qualified staff medically cleared to use the equipment was not up to date and medical equipment may not have been operational. HMRT created a Radiation Safety Officer (RSO) Program, requiring two RSOs per shift, an essential element in assessing the potential radiological dangers existing on the Capitol Complex. HMRT did not, however, have any designated RSOs.

We reviewed three recommendations from the previous OIG report. Although HMRT implemented a recommendation for ensuring that applicable personnel receive training in Federal procurements as well as Agency and Division policies and procedures, we believe that management should continue to monitor implemented actions to ensure that all aspects of the recommendation remain effective. HMRT implemented the other recommendations.

HMRT is an important program with opportunities for using its limited resources in a more efficient and effective manner. For example, HMRT purchased unnecessary or duplicate equipment such as two portable totaling about \$60,000 for screening vehicles at the Off-Site Delivery Center. Officials stated that the equipment was not needed and was stored in the trunks of supervisors' vehicles. Officials also offered that HMRT did not have a methodology for measuring its program performance outputs.

To develop a more efficient and effective HMRT program that would ensure the integrity of the program and support the business processes and the mission of HMRT, OIG recommends that the Department evaluate SOPs and determine additional controls needed for compliance with applicable guidance and use of resources in the most cost-effective manner. Appendix A contains a list of recommendations.

We provided a draft copy of this report to Department officials for comment on September 5, 2014. We incorporated the Department's comments as applicable and attached their response to the report in its entirety in Appendix B. During this audit, HMRT acted quickly to implement our recommendation to certify its Quick Response Vehicle Drivers by identifying an appropriate

¹Report Number OIG-2010-02, Review of Hazardous Materials Response Team Procurement Process, issued March 2010. "Recommendation 1: We recommend that USCP distribute to the Procurement Division and all Financial Liaison Officers a copy of the Standard Operating Procedures for sole-source justifications. Additionally, the Office of Financial Management should provide or ensure that applicable personnel receive training in Federal procurements as well as Agency and Division policies and procedures."

driving course that contained all of the required testing attributes and then recertifying all drivers using the new course. Additionally, HMRT located two air tanks previously noted as missing during the audit.

BACKGROUND

The United States Capitol Police (USCP or the Department) maintains the Hazardous Materials Response Team (HMRT) within the Hazardous Incident Response Division (HIRD), which is part of the Operational Services Bureau. The role of HMRT is to prepare for, detect, respond to, and defeat chemical, biological, radiological, and nuclear (CBRN) threats arising within the geographic jurisdiction or statutory protective authority of USCP. Public Law 108-83, dated September 30, 2003, authorized establishment of the HMRT.

On March 12 and 22, 2013, and August 22, 2012, there were three separately filed complaints related to HMRT irregularities. The then-HIRD Inspector requested that the Office of Inspector General (OIG) conduct a comprehensive audit of HMRT and follow up on previous recommendations from OIG Report Number OIG-2010-02, Review of Hazardous Materials Response Team Procurement Process, issued in March 2010.

HMRT responds to threats of CBRN incidents to conduct crisis management operations by providing capabilities for agent detection, identification, and limited mitigation: casualty search and extraction, and personnel decontamination; and limited emergency medical care and stabilization of contaminated personnel. HMRT members are hazardous materials technicians serving as a first response unit in the event of a CBRN incident within the Capitol Complex or during an authorized protection operation. Some of the technicians operate various vehicles such as the

Figure 1 - USCP HMRT Specialty Response Vehicle



Source: Photograph provided by HMRT.

HMRT Specialty Response Vehicle (SRV) (Figure 1), Class 3 Vehicle and Quick Response Vehicle (QRV), Class 2 Vehicle put in service in 2005 and 2004, respectively.

HIRD is authorized 51 full-time equivalents (FTEs), consisting of 22 FTEs assigned to HMRT, 19 assigned to the Hazardous Device Section, (HDS) and 10 assigned to HIRD. As of September 2014, there were six vacant positions within HMRT.

The Office of Policy and Management Systems (OPOL) is responsible for the USCP Written Directive System. The Property Asset Management Division (PAMD) is responsible for USCP

assets and disposal of surplus property. The Office of Facilities and Logistics provides the funding to address the medical requirements of HMRT SOPs.

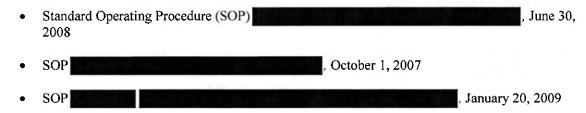
OBJECTIVE, SCOPE, AND METHODOLOGY

Based on several complaints and a request from the then-HIRD Inspector, OIG conducted a performance audit of HMRT. The objectives of the audit were to determine if HMRT (1) established adequate internal controls and processes for ensuring the integrity of its program, (2) complied with applicable laws, regulations, and guidance pertaining to management and operation of its program, and (3) took corrective actions related to the previous recommendations made in Report Number OIG-2010-02. Our scope for this audit included HMRT controls, processes, and operations during Fiscal Years (FYs) 2011, 2012, and 2013². OIG contracted with Cotton and Company LLP (Cotton) to assist this performance audit.

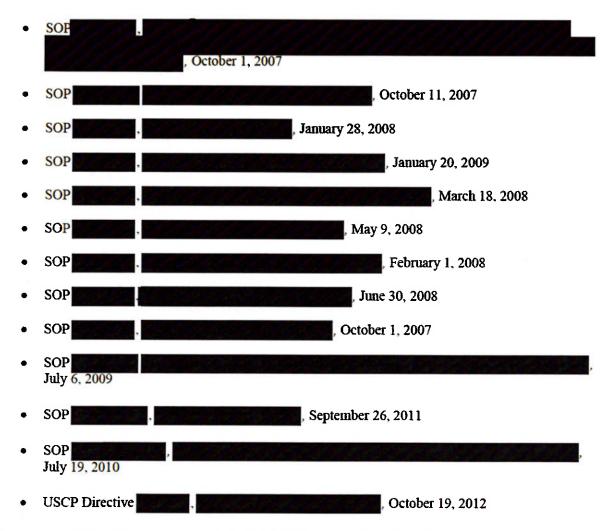
To accomplish the objectives, we interviewed HMRT officials and reviewed documentation to gain an understanding of the following areas:

- HMRT structure, strategy, and how the Unit supports the USCP mission. HMRT policies and procedures.
- Controls relating to procurement policies, including sole-source justifications.
- The number and dollar value of HMRT procurements in excess of \$3,500 as well as the percentage of sole-source justifications HMRT made during the period.
- Whether HMRT complied with applicable laws and regulations for procurement procedures
 regarding the competitive bid process and justifications for sole-source solicitations, based on a
 sample population.
- Whether purchased equipment was both necessary and reasonable as well as recorded in the property system.
- The extent to which HMRT implemented recommendations from the previous audit, Report Number OIG-2010-02.
- Budgeting process and HMRT's involvement in the Force Development Process (FDP).

To determine compliance, we reviewed the following guidance:



² We requested data related to our scope, FY 11 through FY 13; however, in some cases, such as driver certifications, HMRT provided FY 14 documentation.



The scope of HMRT procurements included 326 items totaling about \$973,200, as shown in Appendix C. Of the 326 items, we selected for testing a sample of 50 procurements totaling about \$443,600.

We also reviewed guidance from the Government Accountability Office (GAO), Federal Acquisition Regulation (FAR), the Economy Act, and other industry best practices. As a legislative branch entity, many laws and regulations that apply to executive branch agencies do not apply to USCP. We believe, however, that those laws and regulations represent appropriate guidance and industry best practices for USCP.

We conducted this performance audit in Washington, D.C., from January through September 2014, in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our

³ This acronym is incorrect in the SOP, it should be

audit objectives. We provided a draft copy of this report to Department officials for comment on September 5, 2014. We incorporated the Department's comments as applicable and attached their response to the report in its entirety as Appendix B.

RESULTS

Overall, HMRT did not establish adequate internal controls and processes to ensure the integrity of its program. HMRT also did not always comply with or have documentation supporting compliance with guidance or best practice requirements. Although the Department implemented two of the three recommendations from the previous audit, we identified some of the same deficiencies with sole source procurements (recommendation one). During this time of budget constraints, HMRT should use its limited resources more efficiently and effectively.

Lack of Internal Controls

The GAO Standards for Internal Control in the Federal Government (GAO/AIMD-00-21.3.1, dated November 1999) define internal controls as an integral component of an organization's management that provides reasonable assurance that the following objectives are being achieved:

- Effectiveness and efficiency of operations
- Reliability of financial reporting
- Compliance with applicable laws and regulations

USCP established operating procedures for HMRT to accomplish its mission. However, we identified areas that need improvement. For example, HMRT did not conduct the annual review of its SOPs resulting in an incomplete SOP manual. In addition, HMRT did not properly document purchase card procurements and sole-source justifications as the previous OIG audit recommended. Other improvements to the procurement process should include procedures that prevent conflicts of interest between USCP employees and vendors. Furthermore, HMRT should dispose of surplus inventory as required and improve physical security of its warehouse area. The warehouse space is accessible to employees without accountability responsibility, which circumvents documented property controls.

Policies and Procedures Need Additional Monitoring

The GAO Standards for Internal Control in the Federal Government, "Control Activities," states:

Internal control activities help ensure that management's directives are carried out. The control activities should be effective and efficient in accomplishing the agency's control objectives.

HMRT should improve policies and procedures for monitoring SOPs.

, requires an annual

review of SOPs to confirm that the guidance is correct, updated, or has not been rescinded. HMRT did not, however, comply with the requirement for the annual SOP review. As a result, multiple inconsistencies exist between the SOP listings OPOL and HMRT provided. For example, although HMRT reported three SOPs rescinded, OPOL reported those SOPs as current. In addition, HMRT identified four SOPs as current, yet OPOL did not have those SOPs on its official listing. The SOPs were:

Inconsistencies

existed because HMRT staff did not forward SOP review changes, comments, and documents through the chain of command for approval. As a result, HMRT did not have a complete and official SOP Manual. Thus, an incomplete review process provides an environment of uncertainty for HMRT employees because HMRT officials could have directed that subordinates disregard SOPs not officially rescinded. In addition, HMRT officials could have directed subordinates to adhere to new SOPs that the Department had not officially adopted. Such a practice could lead to misunderstandings and noncompliance with official guidance.

Lack of Support Documentation for Procurements

The GAO Standards for Internal Control in the Federal Government, "Appropriate Documentation of Transactions and Internal Control," states:

...that internal control and all transactions and other significant events need to be clearly documented, and the documentation should be readily available for examination. The documentation should appear in management directives, administrative policies, or operating manuals and may be in paper or electronic form. All documentation and records should be properly managed and maintained.

HMRT procurements consisted of 326 items totaling about \$973,200 as shown in Appendix C. Of the 326 items, we selected a sample of 50 procurements totaling about \$443,600, of which 29 were purchase card type procurements and the remaining 21 were purchase order type procurements. HMRT did not always have adequate documentation supporting its credit card purchases. We noted 12 instances for which no packing slips or equivalent documentation existed in support of the receiving report and 6 instances where an invoice, or equivalent documentation, was missing from the procurement file. HMRT officials stated that on several occasions the vendor did not provide any documentation relevant to the delivery of goods and services. As a result, USCP employees accepted delivery of goods and services without appropriate support documentation from the vendor. A risk of fraud increases significantly, when employees accept delivery of goods or services without the appropriate documentation.

Inadequate Justification for Sole-Source Procurements

HMRT justifications for sole-source procurements did not fully support the need. OIG previously recommended that HMRT document, justify, and provide more complete descriptions. Although the Department implemented the previous recommendation, the exact recommendation related to documenting sole-source procurements was not fully implemented previously discussed. We believe that additional monitoring is needed.

The Department distributed procedures outline seven authorities that permit procurement without full and open competition, consistent with FAR 6.302 "Circumstances permitting other than full and open competition." Additionally, the procedures list the content of sufficient facts the justification must contain, consistent with FAR language. Of the 21 purchase orders HMRT prepared during the audit scope, 8 were for sole-source purchases. Based on interviews of HMRT personnel and observations of HMRT activities, reasons for procuring from the same vendor or requesting a specific type or model of equipment were consistent with FAR guidelines. The most common reason cited in the sole-source procurements was the need to promote consistency among other law enforcement partners because the USCP must coordinate with other agencies frequently throughout the year.

We noted two exceptions during our testing procedures. HMRT listed the authority as the Economy Act on one sole-source procurement file, which by itself is not one of the seven available authorities to use as justification for sole-source procurement. The Act states, "Each Economy Act order to obtain supplies or services by interagency acquisition shall be supported by a determination and findings (D&F)." There was not a D&F located in the procurement file. Another procurement file contained an error in the vendor comparisons that could have led to an incorrect selection. As a result, USCP may not always receive the best value for goods and services.

Potential for Conflict of Interest May Exist

USCP acquisition policy is clear about maintaining the integrity of the procurement process. including avoiding conflicts of interest. USCP has language built into its contracts that require vendors to disclose any conflicts of interest. This audit identified circumstances in which USCP policy did not produce the intended outcomes. The vendor potentially did not comply with the FAR, Subpart 3.10, "Contractor Code of Business Ethics and Conduct." That section of the FAR requires that the contractor disclose, in a timely manner, any credible evidence of violations related to conflict of interest. USCP allowed an HMRT technician to obtain outside employment with a company that sells goods and services related to the Hazardous Materials community. The conflict arose when the USCP employee added the specific training to the FDP and recommended that the vendor be considered to provide the training. USCP includes a standard conflict of interest clause for contract orders exceeding \$150,000. Because it was a procurement order, the standard clause was not used in this specific contract. In addition, does not address the potential for conflicts of interest. As a result, the lack of clear, comprehensive, and constructive information useful in making future contract award decisions and permission for an employee to engage in outside employment with a specific vendor was not available.

Physical Security Needs Improvement

HMRT should improve physical security over its in	
accountable equipment, and consumable supplies.	The HMRT inventory was not secured in a
manner consistent with	Directive No.
Directive requires that USCP maintain, protect, con	ntrol, use, and dispose of property in the most
effective manner. The Directive establishes proper	rty and asset management policy and assigns

responsibilities to USCP managers and employees for management, control, and accountability of USCP property. However, HMRT inventory and property in its warehouse can be vulnerable to theft, waste, and abuse. The inventory cage had a simple lock on the front of the cage, but the door remained open during the day and there was no security camera facing the entrance of the warehouse or a proximity card reader to secure the entrance to the warehouse inventory area. The security of inventory located in its inventory warehouse was also compromised when management provided employees with office space inside its secure area of the warehouse. HMRT officials responded to this risk by relocating the employees in question.

Finally, HMRT is not following Property and Asset Management Directive No. related to the disposal of surplus inventory. HMRT identified surplus inventory in its warehouse and prepared paperwork to dispose of the property. HMRT personnel did not, however, approve the items for disposal. As a result, HMRT did not dispose of surplus inventory in a reasonable amount of time, which makes inventory vulnerable to theft, waste, and abuse. The audit team observed during a walkthrough of the warehouse large piles of equipment and supplies that HMRT had identified as excess. HMRT did not approve or begin the disposal process. Consequently, inventory items are becoming older and more obsolete, and its disposal value diminishing. HMRT excess property is also susceptible to theft. HMRT officials responded to this risk by immediately executing the paperwork necessary to have the excess equipment removed.

Conclusions

While HMRT followed a set of practices and processes, HMRT did not complete the annual SOP review. Accordingly, there were inconsistencies between the official SOP lists that OPOL and HMRT provided. During our testing of procurement transactions, we noted missing packing slips, receiving reports, and invoices; inadequate justification for sole-source procurements; and a potential conflict of interest. In addition, HMRT had large piles of equipment and supplies identified as excess, but that HMRT did not approve or begin the disposal process. Further, HMRT did not have adequate physical security over its property and inventory. As a result, HMRT inventory and property in its warehouse were vulnerable to theft, waste, and abuse. Thus, OIG makes the following recommendations.

Recommendation 1: We recommend that the United States Capitol Police evaluate the standard operating procedures for the Hazardous Materials Response Team as well as add controls that will confirm that the annual review process was completed and the Hazardous Materials Response Team and the Office of Policy and Management Systems guidance is consistent.

Recommendation 2: We recommend United States Capitol Police (USCP) distribute to the card holders a copy of the USCP.

Additionally, USCP should provide or ensure that applicable personnel receive training in purchase card policies and procedures. Additionally, USCP personnel with receiving responsibility must advise vendors that evidence of receipt is required to be provided before processing of payments.

<u>Recommendation 3</u>: We recommend that the Procurement Officer for the United States Capitol Police accept only sole-source justifications from program offices with the required market research and sufficient documentation that provides evidence of a complete understanding of why the procurement cannot be competitively bid.

<u>Recommendation 4</u>: We recommend the United States Capitol Police take the following steps to avoid any appearance of conflict of interest:

- a. Enforce its current policies related to conflicts of interest regarding individuals involved in the procurement process.
- b. Prohibit USCP employees from accepting employment with USCP vendors.
- c. Revise to address the potential for conflict of interest.

<u>Recommendation 5</u>: We recommend that the United States Capitol Police consider the following steps that will ensure the inventory for the Hazardous Materials Response Team is properly secured:

- a. Install a security camera at the entrance to the inventory cage that will capture any individuals entering and exiting the warehouse.
- b. Attach a proximity card reader to the door of the cage that will restrict access to only accountable property custodians.

Non-compliance with Standard Operating Procedures

HMRT did not always comply with or have the required documentation that it complied with guidance related to its SOPs. For example, HMRT (1) did not comply with the minimum driver standards, (2) did not establish controls for ensuring employees prepare and submit the analysis and a submit timely submission of air cylinder inspection reports, and (4) did not comply with the requirement for Respirator Facepiece Fit Tests. Additionally, HMRT does not have a document retention policy for forms used in the medical monitoring process.

Non-Compliance with Vehicle Operation Guidelines

HMRT did not comply with that HMRT drivers annually demonstrate proficiency on the vehicle for which they are qualified. is the requirements for operating Class 1, Class 2, and Class 3 vehicles. An example of a Class 3 type vehicle is the HMRT SRV, which is essentially a full-size fire truck. To qualify as a Class 3 driver, the minimum standards for Class 1 and Class 2 must be met, as well as the additional requirements stated in the SOP. To qualify as a Class 2 driver, the minimum standards for Class 1 must be met, as well as the additional requirements stated in the SOP related to Class 2. An

example of a Class 2 type vehicle is the HMRT QRV. The QRV is a Ford F550 Super Duty pick-up truck with a crew cab chassis.

requires an approved operator on any response vehicle must complete an annual driver's training class and demonstrate proficiency in the operation of the vehicle on which he/she is qualified.

USCP HMRT provided a list of 16 drivers that for FY 2013 were identified as Class 3 operators. The 16 operators should have been qualified annually to operate the USCP's SRV. However, during FY 2014 HMRT did not assess those 16 operators in the operation of the SRV. As a result, HMRT did not have drivers qualified to operate the SRV. HMRT stated that the two SRVs were no longer used to support the mission. One of the vehicles (05-23) was identified as surplus and had been stripped of USCP equipment and scheduled for decommissioning. USCP was attempting to sell, transfer, or otherwise dispose of that SRV. The other SRV (05-22) was damaged and temporarily out of service. In June 2014, HMRT provided documentation indicating that it was conducting the annual assessment with a Class 2 type vehicle—specifically the HMRT QRV instead of the SRV.

HMRT did not comply with the safety regulations for vehicle operation. The predetermined course selected by HMRT to meet the criteria set forth by the Commission on Accreditation for Law Enforcement Agencies, Inc., did not include one of the required evaluation criteria related to "Railroad crossing." Review of the map of the course revealed no active railroad tracks upon which the course evaluation attribute could be measured (Figure 2). Yet all driver evaluations were marked as "Pass" for the attribute. HMRT subsequently corrected the deficiency by reassessing driver proficiency of the Class 2 QRV using an updated driver course.



Figure 2- Picture of intersection with railroad tracks paved over (right side of picture)

Source: Photograph obtained through Internet research, Google Maps.

As a result of that non-compliance, USCP driver qualifications are in question. Training activities did not meet training objectives and USCP officials invalidated it. In response to our finding, HMRT immediately updated the driving course to reflect the change in the environment and re-tested all drivers.

At the time of an unannounced document inspection, HMRT was several weeks behind in entering data into the Additional discussions with process owners revealed that system data is not used. Each month, HMRT collects the same data on a separate spreadsheet through another process to generate a report sent to HMRT management and the Vehicle Maintenance Division. HMRT could not produce inventory inspection records for SRV 0522.

Figure 3- USCP HMRT Quick Response Vehicle

for the QRVs (Figure 3) and the SRVs on a weekly basis to evaluate the supplies and equipment on board the vehicles. As a result of noncompliance, the reported incorrect mileage/hour statistics presented an inaccurate vehicle-use profile. As a result, USCP lacks accurate documentation for assuring that emergency equipment and response equipment are fully operational and that HMRT replenished expired emergency supplies

HMRT did not monitor use of the forms or transcription of data into the HMRT database. In



Source: Photograph provided by HMRT.

addition, HMRT used two versions of the during FY 2013, one version created by HMRT and the other was the original USCP form. There were subtle data input points located in different places on the respective forms, causing inaccurate data entry. HMRT did not oversee the timeliness or accuracy of the data entered by into the database and controls were not in place that would ensure employees prepared and submitted in a timely or accurate manner.

Non-Compliance with Respirator Protection Program Requirements

CARLES AND
, states that all SCBA must undergo
inspection, cleaning, and maintenance procedures
outlined in which is part of the overall
respirator protection program HMRT did
not comply with the Respirator Protection Program
requirements for SCBA Inspection and Maintenance.
Weekly and monthly SCBA inspections must be
documented using the
Completed forms are forwarded to the Resource
Coordinator and data are entered into the HMRT
resource management database. Employees did not
submit monthly inspection reports in a timely manner
to the HMRT Resource Coordinator. As a result,
USCP could not assess compliance with manufacturer
recommendations and Occupational Safety and Health
Administration (OSHA) 1910.134, Respiratory
Protection, December 2006, requirements for
equipment maintenance. According to the HMRT
official, HMRT did not have control over timely
submission of air cylinder inspection reports. HMRT
also did not have a mechanism or control to track and
monitor receipt of the inspection forms. An HMRT
official stated that frequently several months can pass
before employees submit inspection reports.

Review of the inspection reports database that tracks 363 tanks revealed that one tank (tank number 109835) passed the 5-year hydrostatic testing requirement. HMRT stated that tank number 113396 and tank number 147286 could not be located for maintenance. As a result, HMRT did not know the status of its equipment. Any time lag in the receipt of information regarding equipment status could have affected the mission in an emergency. Additionally, lack of accountability for equipment could have affected maintenance planning efforts. The inability to track and monitor submission of reports dilutes the purpose of the SOP and the ability to assess compliance with manufacturer recommendations and OSHA 1910.134 requirements for equipment maintenance. Uncertainty of asset location also increases the risk that USCP can safeguard their assets. In response, HMRT subsequently located both tanks.

Non-Compliance with Respirator Facepiece Fit Requirements

, requires that USCP provide each HMRT employee with an AV2000 facepiece and conduct annual fit tests. Chemical, Biological, Radiological, Law Enforcement employees (CBRLE) must also complete a medical examination every 12 months, and Civil Disturbance Unit employees must complete an on-line medical evaluation every 24 months. No employee will be respirator tested and/or issued a respirator if he/she did

not complete the on-line medical questionnaire or medical examination. The SOP incorporates reference to the Code of Federal Regulations (CFR) 29, OSHA 1910.134, which documents the need for this guidance.

HMRT did not comply with the requirement for Respirator Facepiece Fit Test **HMRT** (June 9, 2014) identifies a total of 923 personnel tracked for medical compliance purposes. The June 9, 2014, report shows a fit-test compliance rate of 10.51 percent and physical compliance rate of 25.46 percent. Additionally, comparison of the inventory records medical data against found multiple data integrity irregularities, such as medical records maintained for officers with no record of equipment issued, officers listed with multiple records of equipment issued, and equipment issued with no record of medical requirements being met. More importantly, periodic verification of inventory was not conducted as required.

As a result, HMRT could not be certain that equipment would perform as planned or that employees could perform duties while wearing the respirators. Additionally, the lack of equipment accountability could have affected USCP mission response. Faulty equipment can put everyone's lives at risk—including that of USCP officers and the entire congressional community.

HMRT did not effectively monitor employee compliance with the SOP. The HMRT SOP does not provide additional procedures that HMRT can use when instances of non-compliance occur related to non-HMRT employees. According to HMRT, communication efforts to non-HMRT employees concerning medical requirements were ineffective. HMRT should complete a physical inventory of equipment to assist in identifying instances of non-compliance. However, it should be noted that coordination with additional Bureaus is required to ensure compliance with this SOP. The Office of Facilities Logistics is provided the budget to pay for the medical expenses associated with compliance. PAMD issues the equipment associated with this SOP. Uniformed Services Bureau and Operational Services Bureau supply the manpower for the ALERT (Advanced Law Enforcement Response Technician) and CDU (Civil Disturbance Unit) teams, which should be aware of the compliance requirements.

Non-Compliance with Radiation Safety Officer Program

guidance requires a minimum of two trained and certified Radiation Safety Officers (RSOs) assigned to each HMRT shift. However, HMRT did not comply with this requirement. According to HMRT, there are no RSOs. Thus, HMRT could not ensure that each HMRT shift has personnel with sufficient radiological

knowledge to respond to emergencies. Nor should USCP assume that HMRT will be prepared in the event of nuclear type attack. Lack of certified officers can put everyone's lives at risk—including that of USCP officers and the entire congressional community. HMRT officials stated that relates to operation of the Vehicle and Cargo Inspection System (VACIS) and because USCP decommissioned and disposed of the VACIS, both the SOP and the requirement for having an RSO on staff were no longer necessary. The SOP, however, does not reference VACIS.

Non-Compliance with Medical Monitoring for Entry Personnel

, dated October1, 2007, requires pre-entry medical monitoring and post-entry medical monitoring. The SOP provides general guidelines for baseline monitoring and readings that allow for early recognition and prevention of the effects of exposure to hazardous materials. The SOP requires that information for pre-entry medical monitoring must be recorded on the pre-entry form and maintained for the duration of the incident. HMRT is required to record information from the post-medical monitoring phase to close out the pre-entry medical monitoring form.

Nevertheless, HMRT did not have a document retention policy for forms used in the medical monitoring process and there is no way to determine compliance with the applicable SOP. However, HMRT did not maintain pre- and post-entry medical forms beyond the duration of the incident, which were disposed immediately after the event. As a result, USCP lacks historical evidence that could be used to evaluate compliance with SOPs. Inconsistent application of medical monitoring puts HMRT personnel at greater risk of suffering from the effects hazardous materials. Yet, the HMRT SOP does not discuss retention of any of the documents used in the procedure as evidence for objective measurement of compliance.

Conclusions

HMRT did not comply with multiple standards designed to ensure the safety of officers and successful accomplishment of its mission. Complacency contributes to a lack of accountability and can create a dangerous environment in which to operate. Thus, OIG makes the following recommendations.

Recommendation 6: We recommend that the United States Capitol Police provide the Hazardous Materials Response Team staff with the appropriate training in vehicle operations and certifications for each vehicle in operation. The Hazardous Materials Response Team should update its list of qualified Class 1, 2, and 3 drivers to reflect compliance with standard operating procedures.

Recommendation 7: We recommend that the United States Capitol Police provide Hazardous Materials Response Team staff with the appropriate vehicle operations training exercises in order to meet training objectives. In this case, the Hazardous Materials Response Team should periodically validate that the predetermined driving course meets evaluation criteria.

Recommendation 8: We recommend that the United States Capitol Police (USCP) evaluate current vehicle operations documentation processes and take steps to improve the accuracy of inspection and inventory forms. The Hazardous Materials Response Team should evaluate the need for data to be transcribed into its database and consider an alternate system for maintaining documentation. The Hazardous Materials Response Team should also periodically inspect vehicles, sample inspection reports, and review the vehicle log database to ensure accuracy and that those vehicles are operational. USCP should provide periodic training to educate drivers on the specifics of the data required and how the Department uses the data.

evaluate the coordination required from other USCP Bureaus and establish one responsible entity to ensure compliance with the and SOPs. Additionally, USCP should reconcile life safety issues such as medical and inventory records related to the respirator protection program to obtain an accurate count of equipment as well as an accurate assessment of employee medical status related to the respirators and facepieces. USCP should strengthen standard operating procedures to allow more aggressive monitoring of compliance. USCP should also conduct a physical wall-to-wall inventory of equipment and records and reconcile the results with Property Asset Management Division records.

<u>Recommendation 10</u>: We recommend that the United States Capitol Police require that the Hazardous Materials Response Team develop a corrective action plan for reviewing the policies outlined in standard operating procedure for Radiation Safety Officers as well as revise as needed procedures to reflect applicable programs.

<u>Recommendation 11</u>: We recommend that the United States Capitol Police evaluate its documentation processes related to medical monitoring and incorporate into standard operating procedures a requirement for document retention that will allow for inspection of historic documents or other mechanism for ensuring consistent compliance with procedures.

Opportunities to Use Resources in a More Efficient and Effective Manner

USCP may have opportunities to use resources in a more efficient and effective manner. As of September 2014, HMRT was not using property requested through the FDP budget process. Additionally, statistics listed in the FY 2013 financial statement audit are not accurate and lack documentation.

Lack of Need of Duplicate Equipment

HMRT purchased equipment that may not have be	een necessary and may have duplicated other
	at a cost of approximately \$30,000 each. The
FDP states the devices were required to screen ve	hicles at the Off-Site Delivery Center (OSDC).

However, as of September 2014, USCP has equipment that fully meets the needs of the OSDC. According to complaints to OIG and subsequent interviews, the devices were not in use and not needed.

Duplication and purchase of unnecessary equipment occurred because HMRT did not have a clearly defined concept of operation or mission. The FDP process allows for items to be introduced into the budget process without sufficient justification and insufficient monitoring of the intended use of the equipment. HMRT is underutilizing the as is evident by the fact that the new equipment is being stored in the trunks of the vehicles of supervisors. The functionality of the

Thus, HMRT should reevaluate the need for duplicate equipment. In addition, USCP should place greater accountability over HMRT procurements so that duplicate or unnecessary purchases are not made.

Inaccurate Statistics Reported

The performance statistics HMRT reported in USCP's FY 2013 Financial Statement audit were not accurate. MD&A is an integrated part of an entity's annual financial statements. The purpose of an MD&A is to provide a narrative explanation, through the eyes of management, of how an entity has performed in the past, its financial condition, and its future prospects. In so doing, the MD&A attempts to provide stakeholders with complete, fair, and balanced information.

However, discrepancies existed between the number of incidents reported in the FY 2013 HIRD Incident Report and MD&A. For example, in the FY 2013 Financial Statement audit report MD&A reported 63 suspicious package reports, while the FY 2013 HIRD Incident Report showed 49, for a difference of 14 as shown in Table 1. The discrepancies occurred because USCP did not have a written methodology for reporting program performance outputs, which require underlying documentation. We followed up with the audit liaison and other USCP officials, but USCP was unable to provide an explanation for the differences. Performance trend data should provide Congress, the public, and other stakeholders with sufficient information on how a program is progressing compared with past achievements and shortfalls.

Table 1. Discrepancies of Incidents Reported in FY 2013

	FY 2013 HIRD Incident Report	FY 2013 MD&A	Difference
Suspicious Package Reports	49	63	14
Nuclear, Biological, or Chemical Suspicious Substances or Incidents	12	27	10

Source: USCP Financial Statement Audit, MDA, and HIRD Incident Report for FY 2013.

Conclusions

HMRT did not use its resources in the most efficient and effective manner. Equipment was purchased that has been underutilized and

In addition, program performance outputs are not supported by documentation. Thus, OIG makes the following recommendations.

<u>Recommendation 12</u>: We recommend that the United States Capitol Police more clearly define the mission of the Hazardous Materials Response Team so that efforts are not duplicated. Greater accountability should also be placed over procurements for the Hazardous Materials Response Team so duplicate or unnecessary equipment is not purchased resulting in funds put to better use of about \$60,000.

Recommendation 13: We recommend that the United States Capitol Police (USCP) develop procedures for preparing supplementary information that will ensure the accuracy and reliability of program performance data. The procedures should include the Office of Financial Management working directly with those in charge of the supporting documentation that ensures accuracy of figures presented in the Management Decision and Analysis. USCP must clearly define the performance criteria and communicate this information Department-wide so that this information can be consistently applied at the data entry, retrieval, and reporting levels.

APPENDICES

Listing of Recommendations

Recommendation 1: We recommend that the United States Capitol Police evaluate the standard operating procedures for the Hazardous Materials Response Team as well as add controls that will confirm that the annual review process was completed and the Hazardous Materials Response Team and the Office of Policy and Management Systems guidance is consistent.

Recommendation 3: We recommend that the Procurement Officer for the United States Capitol Police accept only sole-source justifications from program offices with the required market research and sufficient documentation that provides evidence of a complete understanding of why the procurement cannot be competitively bid.

Recommendation 4: We recommend the United States Capitol Police take the following steps to avoid any appearance of conflict of interest:

- d. Enforce its current policies related to conflicts of interest regarding individuals involved in the procurement process.
- e. Prohibit USCP employees from accepting employment with USCP vendors.
- f. Revise
 "to address the potential for conflict of interest.

<u>Recommendation 5</u>: We recommend that the United States Capitol Police consider the following steps that will ensure the inventory for the Hazardous Materials Response Team is properly secured:

- c. Install a security camera at the entrance to the inventory cage that will capture any individuals entering and exiting the warehouse.
- d. Attach a proximity card reader to the door of the cage that will restrict access to only accountable property custodians.

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<u>Recommendation 9</u> : We recommend that the United States Capitol Police (USCP)
evaluate the coordination required from other USCP Bureaus and establish one
responsible entity to ensure compliance with the
and SOPs. Additionally, USCP should reconcile life
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Appendix A

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DEPARTMENT COMMENTS



France MP-104 0004

UNITED STATES CAPITOL POLICE

OFFICE OF THE CHIEF ITS IN STREET, NE. MARKATON DC 20810-2711

September 19, 2014

COP 140064

MEMORANDUM

TO:

Ms. Fay F. Ropella, CPA, CFE

Inspector General

FROM:

Kim C. Dine

Chief of Police

SUBJECT: Response to Office of Inspector General (OIG) draft report on its Performance

Audit USCP Hazardous Materials Response Team (Report No. 01G-2014-05)

The purpose of this memorandum is to provide the United States Capital Police response to the recommendations contained within the Office of Inspector General's (OIG's) draft report Performance Audit USCP Hazardous Materials Response Jeam (HMRT) (Report No OlG-2014-05).

The Department agrees with all of the recommendations and appreciates the opportunity to work with the OlG to further improve upon current policies and procedures currently in place within the Department's HMRT Program. The Department will assign Action Plans to appropriate personnel regarding each recommendation in effect to achieve long term resolution of these matters. Additionally, regarding recommendation 9 - the Department has located both its missing

Thank you for the opportunity to respond to the OIG's draft report. Your continued support of the men and women of the United States Capitol Police is appreciated.

Very respectfully.

Kim C. Dine Chief of Police

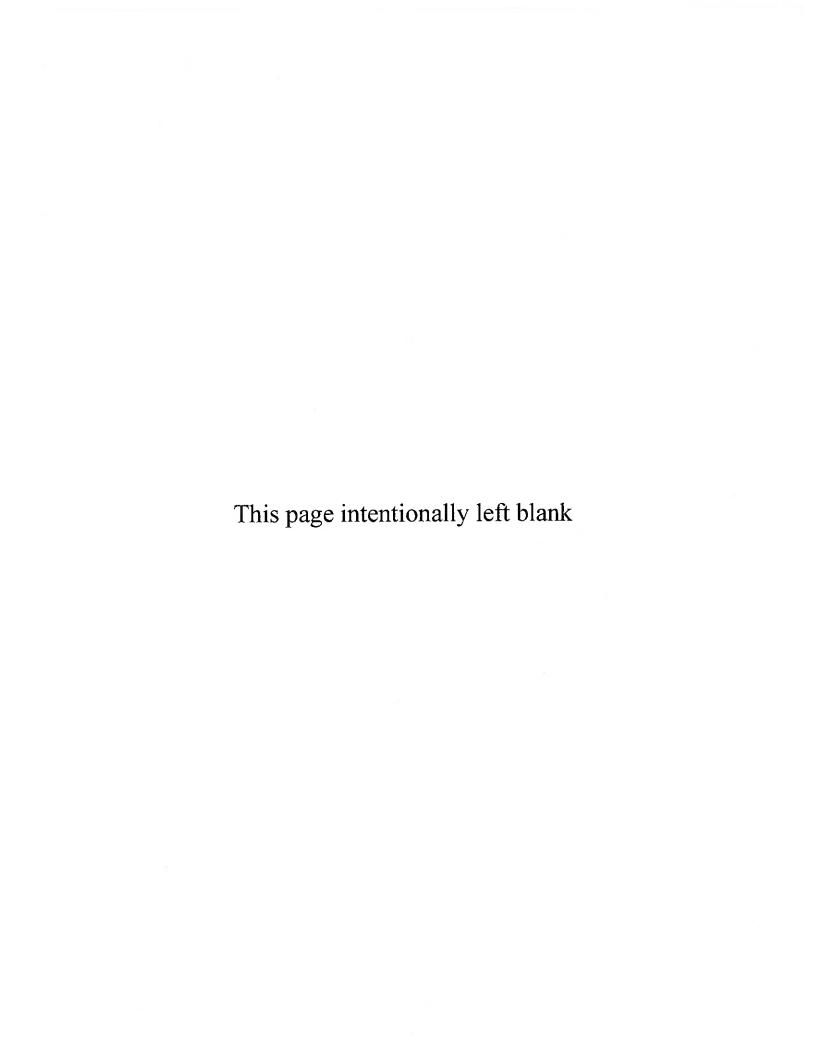
Richard L. Braddock, Chief Administrative Officer Daniel B. Malloy, Assistant Chief of Police SCP Audit Linison

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Appendix C

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Budget Object Classifications	2011	2012	2013	Total
Biohazard Supplies	\$78,859.79	\$16,844.75	\$10,605.24	\$106,309.78
Capitalized Furniture, Equipment, and Machinery	\$93,500.00		\$76,388.38	\$169,888.38
Credit Card Disputes		1	\$(645.00)	\$(645.00)
External Training	\$740.00	\$370.00		\$1,110.00
Internal Training Contractual Agreements	\$11,500.00	\$15,950.00		\$27,450.00
Membership Fees	\$390.00			\$390.00
Miscellaneous Merchant and Vendor Services	\$103,581.82	\$34,222.15	\$48,017.06	\$185,821.03
Non-Capitalized Furniture, Equipment, Machinery	\$70,559.39	\$200,557.97	\$42,317.80	\$313,435.16
Office and Miscellaneous Supplies	\$46,412.68	\$64,474.27	\$33,126.65	\$144,013.60
Provisions		\$505.04	\$578.43	\$1,083.47
Subscriptions, Audiovisual, Misc. Publications	\$1,948.45		\$2,588.75	\$4,537.20
System Supplies and Materials	\$8,327.72	\$5,510.23	\$5,918.69	\$19,756.64
Temp Travel Training	\$52.00			\$52.00
Grand Total – Amount	\$415,871.85	\$338,434.41	\$218,896.00	\$973,202.26
Total number of procurements	120 Items	98 Items	108 Items	326 Items



FRAUD, WASTE, ABUSE AND MISMANAGEMENT

of Federal programs and resources hurts everyone.

Call the Office of Inspector General

HOTLINE 1 (866) 906-2446

or email OIG@uscp.gov to report illegal or wasteful activities.

You may also write to:
Office of Inspector General
United States Capitol Police
499 South Capitol St., S.W., Suite 345
Washington D.C. 20510

Please visit our website at http://www.uscapitolpolice.gov/oig.php