

INSPECTION, ENFORCEMENT,  
AND COMPLAINT PROCESSES  
OFFICE OF STATE FIRE MARSHAL



PERFORMANCE AUDIT  
ISSUED JANUARY 28, 2015

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LOUISIANA LEGISLATIVE AUDITOR  
DARYL G. PURPERA, CPA, CFE

January 28, 2015

The Honorable John A. Alario, Jr.,  
President of the Senate  
The Honorable Charles E. "Chuck" Kleckley,  
Speaker of the House of Representatives

Dear Senator Alario and Representative Kleckley:

This report provides the results of our performance audit on the Office of State Fire Marshal (OSFM) within the Louisiana Department of Public Safety & Corrections. The purpose of this audit was to determine whether OSFM has developed sufficient processes to ensure buildings are in compliance with applicable codes and regulations. This audit focused on OSFM's inspection, enforcement, and complaint processes.

The report contains our findings, conclusions, and recommendations. Appendix A contains OSFM's response to this report. I hope this report will benefit you in your legislative decision-making process.

We would like to express our appreciation to the management and staff of OSFM for their assistance during this audit.

Sincerely,

Daryl G. Purpera, CPA, CFE  
Legislative Auditor

DGP/ch

OSFM 2015



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# Louisiana Legislative Auditor

Daryl G. Purpera, CPA, CFE



## Inspection, Enforcement, and Complaint Processes Office of State Fire Marshal

January 2015

Audit Control # 40130053

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### Introduction

The purpose of this audit was to determine whether the Office of State Fire Marshal (OSFM) within the Louisiana Department of Public Safety & Corrections has developed sufficient processes to ensure buildings are in compliance with applicable codes and regulations. This audit focused on OSFM's inspection, enforcement, and complaint processes.

Louisiana Revised Statute (R.S.) 40:1563 requires that OSFM supervise the inspections of all state or federally-licensed buildings,<sup>1</sup> state buildings, universities, manufactured housing, detention centers, and schools. To meet the requirements of this law, OSFM conducts regular inspections of these buildings. The purpose of inspections is to ensure that buildings and their associated structures are in compliance with the provisions of the Life Safety Code, National Fire Protection Association guidelines, Americans with Disabilities Act Accessibility Guidelines, Louisiana Administrative Code, and other applicable codes. During fiscal year 2014, OSFM had an operating budget of \$21.9 million, 163 staff including 54 inspectors, and 25,868<sup>2</sup> structures (one building can contain multiple structures) under its jurisdiction to inspect on a regular basis.

The **mission** of OSFM is to uphold the law and provide for the protection of life and property from the hazards of fire or explosion.

In addition, R.S. 40:1563(C)(2)(f) gives OSFM the authority to monitor fire prevention bureaus. A fire prevention bureau is an agency within a local jurisdiction that can be authorized by OSFM to conduct inspections and investigate fires within that jurisdiction. As of June 30, 2014, there were a total of 18 certified fire prevention bureaus, covering 40% of the state's population, conducting inspections for OSFM. Our objective for this audit was:

#### **Has OSFM developed sufficient processes to ensure that buildings are in compliance with applicable codes and regulations?**

We evaluated OSFM's inspection, enforcement, and complaint processes from calendar years 2011 through 2013 and found that OSFM management needs to strengthen these processes to ensure buildings and their associated structures are in compliance with applicable codes and regulations. Appendix A contains OSFM's response to this report, Appendix B details our scope and methodology, and Appendix C summarizes OSFM's inspection and enforcement processes. Appendix D lists the specific inspection requirements for institutional occupancies requiring a state or federal license, state buildings, universities, detention centers, health care facilities, and schools.

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<sup>1</sup> This includes health care facilities and licensed outpatient facilities.

<sup>2</sup> This number is according to the number of structures in OSFM's database and does not include family day care structures (home-based) with less than seven children, because these inspection records are not kept after one year.

## Has OSFM developed sufficient processes to ensure that buildings are in compliance with applicable codes and regulations?

We evaluated OSFM's inspection, enforcement, and complaint processes from calendar years 2011 through 2013 and found that OSFM management needs to strengthen these processes to ensure buildings and their associated structures are in compliance with applicable codes and regulations. Specifically, we found OSFM needs to:

- develop a risk-based strategy that includes timeframes for inspecting schools, universities, state buildings, and licensed outpatient facilities to ensure it conducts timely inspections.
- monitor fire prevention bureaus to ensure they are conducting all required inspections.
- conduct timely re-inspections to ensure violations identified during inspections are corrected.
- develop and implement a penalty and enforcement structure for violations identified during inspections to deter structure owners from repeatedly violating life safety codes.
- comprehensively track the number of complaints and impairment notifications received, investigated, and resolved to ensure that complaints are addressed timely.
- ensure that its data system contains accurate information to effectively manage its inspection, enforcement, and complaint processes.

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### **OSFM needs to develop a risk-based strategy that includes timeframes for inspecting schools, universities, state buildings, and licensed outpatient facilities to ensure it conducts timely inspections.**

State law<sup>3</sup> requires that OSFM supervise the inspections of all state or federally-licensed buildings,<sup>4</sup> state buildings, universities, detention centers, and schools. The purpose of inspections is to ensure these structures are in compliance with the provisions of the Life Safety Codes and other applicable codes to protect life and property from the hazards of fire or explosion. In accordance with this law, regulations<sup>5</sup> require that OSFM conduct annual

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<sup>3</sup> R.S. 40:1563

<sup>4</sup> This includes health care facilities and licensed outpatient facilities.

<sup>5</sup> See Appendix D for specific inspection requirements.

inspections of health care facilities,<sup>6</sup> day care centers, detention centers (inspected semi-annually), group homes, and substance abuse facilities,<sup>7</sup> which totaled 7,891 (31%) of the 25,868<sup>8</sup> structures (one building can contain multiple structures) under OSFM’s jurisdiction as of March 2014. We reviewed documentation for 122 of these structures and found that OSFM inspected 106 (87%) of them during calendar year 2013.

State regulations do not specify how often OSFM should inspect schools, universities, state buildings, and licensed outpatient facilities (i.e. mental health structures, physical therapy providers, and public health clinics), which totaled 17,977 (69%) of the 25,868 structures under OSFM’s jurisdiction as of March 2014. OSFM has established an informal “internal goal” of conducting annual inspections on these types of structures. We reviewed documentation for 278 of these structures and found that 65 (23%) were not inspected during calendar year 2013, and 20 of the 65 were not inspected at all over a three-year period. Exhibit 1 summarizes the number of structures not inspected in accordance with OSFM’s internal goal and those not inspected over a three-year period.

<b>Exhibit 1</b> <b>Inspections for Structures Without Regulated Inspections</b> <b>Calendar Years (CY) 2011 through 2013</b> <b>Out of 278 Reviewed</b>		
<b>Facility Type</b>	<b>Not Inspected During CY 2013</b>	<b>Not Inspected During CY 2011-2013</b>
School	41	14
State building	11	4
University	10	2
Licensed outpatient facilities	3	0
<b>Total</b>	<b>65</b>	<b>20</b>
<b>Note:</b> We gave OSFM a 15-month period to conduct these inspections. <b>Source:</b> Prepared by legislative auditor’s staff using OSFM inspection reports.		

According to OSFM management, inspectors are not always able to conduct their inspections in a timely manner because of other required responsibilities, such as conducting final building inspections, arson investigations, amusement ride inspections, and firework inspections. OSFM management stated that it prioritizes these responsibilities based on staffing availability and needs and cross-trains its inspectors to conduct different types of inspections, such as boiler and amusement rides, and to conduct arson investigations. From fiscal years 2011 through 2014, OSFM’s staff has decreased from 182 to 163 total staff. In addition, a March 2014 Lean Six Sigma project found that OSFM should have 70 inspectors to conduct required inspections along with all other responsibilities. During fiscal year 2014, OSFM had 54 inspectors.

<sup>6</sup> Centers for Medicare and Medicaid Services (CMS) requirements vary according to the type of healthcare facility, but it is OSFM practice to inspect health care structures annually.

<sup>7</sup> For certain licensed facilities, such as group homes, the inspection is a condition of the facility’s license renewal process.

<sup>8</sup> This number is according to the number of structures in OSFM’s database and does not include family day care structures (home-based) with less than seven children, because these inspection records are not kept after one year.

Because OSFM did not always conduct timely inspections on certain structures, it should consider developing an inspection strategy based on risk that includes formal timeframes for when schools, universities, state buildings, and licensed outpatient facilities should be inspected. For example, OSFM could include risk criteria such as the vulnerability of the population, the history of noncompliance with applicable codes and regulations, and the number and type of citizen complaints. Developing a risk-based approach would help ensure that OSFM's limited resources are devoted to those structures that pose the highest risk.

**Recommendation 1:** OSFM should develop a risk-based strategy that includes timeframes for inspecting schools, universities, state buildings, and licensed outpatient facilities to ensure it conducts timely inspections.

**Summary of Management's Response:** OSFM management concurs with this recommendation and stated that it already has adopted a risk-based strategy in line with the auditor's findings. Included in this assessment is OSFM's assessment of the vulnerability of the population and the number and type of citizen complaints. See Appendix A for OSFM's full response.

**LLA Additional Comments:** OSFM's official response found in Appendix A stated that we discovered "only 16 structures that were not inspected within the last year according to regulations. This amounts to less than one-fourth of one percent of all structures under OSFM jurisdiction." However, due to the unreliability of OSFM's data system (discussed on pages 10-11 of the report), we could not test the entire population of structures for which OSFM is responsible. As a result, we had to review a sample of paper files and found that OSFM did not inspect 16 (13%) of the 122 structures we examined. See Appendix A for OSFM's full response.

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## **OSFM needs to monitor fire prevention bureaus to ensure they are conducting all required inspections.**

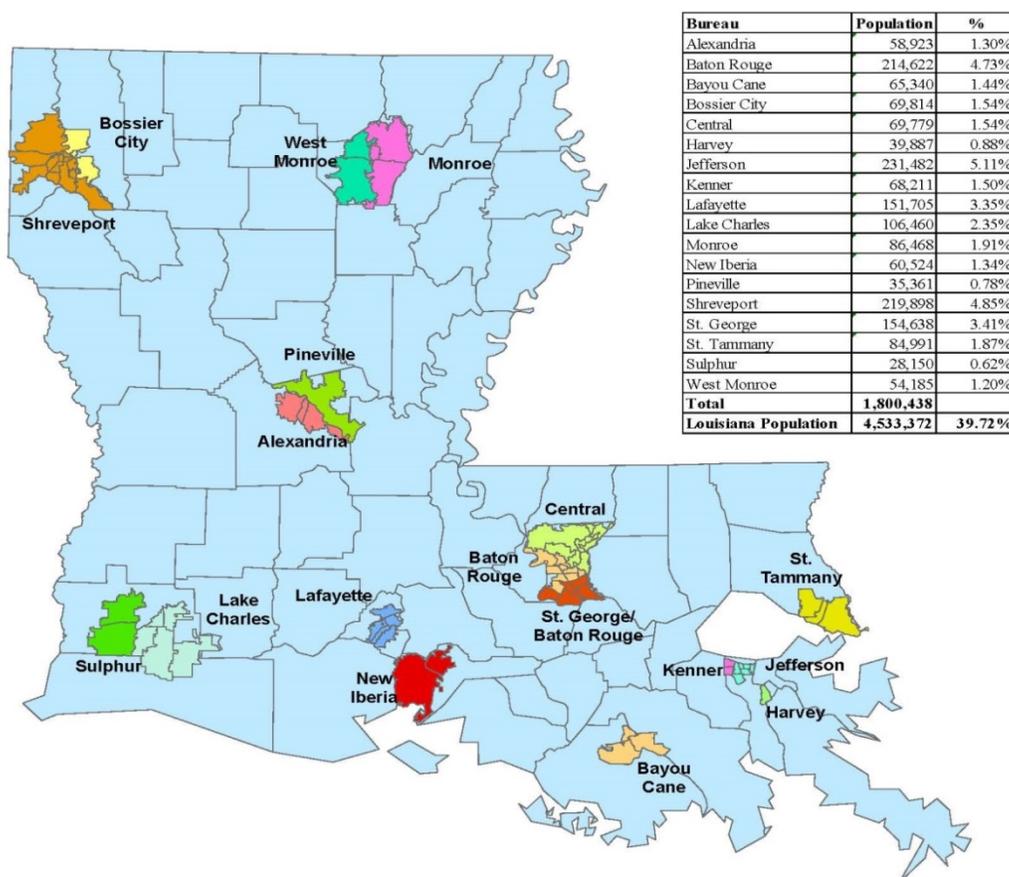
Even though state law<sup>9</sup> gives OSFM the authority to monitor fire prevention bureaus (bureaus), OSFM does not exercise this authority to ensure the bureaus are conducting all required inspections. As of June 2014, 18 of 47 fire prevention bureaus in Louisiana were certified by OSFM to perform functions that the office would otherwise need to perform. These functions include regularly inspecting all schools<sup>10</sup> and conducting final inspections on businesses, hotels, apartments, and industrial and storage facilities within its district. The 18 certified fire prevention bureaus cover 40% of the state's population, or approximately 1.8 million Louisiana citizens. Exhibit 2 shows the location and number of citizens each of the certified bureaus serve.

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<sup>9</sup> R.S. 40:1563(C)(2)(f)

<sup>10</sup> OSFM will inspect any schools within the Recovery School District and any charter schools in a bureau's district. In addition, a bureau may also request that OSFM inspect a school within its jurisdiction if it is unable to do so.

**Exhibit 2**  
**Certified Fire Prevention Bureaus That Conduct Inspections**  
**By Location and Total Population**  
**As of June 2014**



**Note:** The St. George bureau overlaps with the Baton Rouge bureau.

**Source:** Prepared by legislative auditor's staff using ArcGIS basemap and bureau territory information.

State law<sup>11</sup> requires fire prevention bureaus to submit copies of inspection reports to OSFM and requires that OSFM revoke a bureau's certification for failing to submit these inspection reports for six consecutive months. During calendar year 2013, OSFM only received inspection reports from one of the 18 certified fire prevention bureaus but did not revoke the certification for any of them. These inspection reports are the only monitoring tool OSFM has to ensure bureaus are conducting required inspections. However, OSFM stated it did not review the reports it did receive. Because OSFM did not revoke the certifications of fire prevention bureaus that did not submit their inspection reports, these bureaus may be less likely to submit these reports. As a result, OSFM cannot ensure that fire prevention bureaus are conducting their required inspections.

<sup>11</sup> R.S. 40:1563(C)(3)

**Recommendation 2:** After warning the bureaus, OSFM should begin to revoke the certifications of fire prevention bureaus that do not submit required inspection reports, as these reports are the only monitoring tools OSFM has to ensure fire prevention bureaus are conducting their required inspections.

**Recommendation 3:** OSFM should review the inspection reports it receives from fire prevention bureaus to ensure bureaus are conducting required inspections and use the information that is gained from the reports to ensure safety.

**Summary of Management's Response:** OSFM concurs with these recommendations. See Appendix A for OSFM's full response.

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**OSFM needs to conduct timely re-inspections to ensure violations identified during inspections are corrected.**

If a violation is identified during an inspection, it is OSFM's policy to give the structure owner 45 days to correct the violation. However, this time period may be increased or decreased at the discretion of the district supervisor or OSFM manager. We evaluated the inspections of 400 structures and found that OSFM cited 385 violations involving 149 structures during calendar years 2011 through 2013. We found that OSFM did not always conduct a re-inspection to determine if violations were corrected before the next annual inspection. Specifically, OSFM did not follow up on 81 (21%) of the violations or re-inspect the 33 different structures with these violations to determine if the violations were corrected before the next annual inspection. Exhibit 3 shows the actual violations cited and the number of which OSFM did not follow up.

<b>Exhibit 3 Number of Violations/No Follow-Up Calendar Years 2011 through 2013*</b>				
<b>Violation</b>	<b>Description**</b>	<b>Number of Violations</b>	<b>Number Without Follow-Up</b>	<b>Percentage Without Follow-Up</b>
Americans with Disabilities Act	Minimum standards for accessibility in public accommodations and commercial facilities	6	3	50.0%
Building construction	Smoke barrier, fire barrier, fire wall	11	3	27.3%
Exit	Emergency or exit lighting, locking systems, exit sign	144	28	19.4%
Fire protection system	Fire alarm, sprinkler system, hood suppression system, fire extinguisher, smoke detector, fixed system	149	40	26.8%
Mechanical systems	Equipment, self-closing cover, ventilation, wiring	43	3	7.0%
Occupant responsibility	Plan review, fire drills, maintenance, no smoking signage, fire watch, illegal storage of combustible or flammable materials	32	4	12.5%
<b>Total</b>		<b>385</b>	<b>81</b>	<b>21.0%</b>
<b>Source:</b> Prepared by legislative auditor's staff using OSFM inspection reports.				
*This date is through October 1, 2013, because OSFM gives inspectors 45 days to follow up with violations.				
**These descriptions are examples of code violation areas identified in the inspection reports.				

According to OSFM management, inspectors are not always able to conduct re-inspections because of other required responsibilities they are required to perform. As stated previously, these responsibilities include conducting final inspections, arson investigations, amusement ride inspections, and firework inspections. In addition, OSFM management stated they prioritize the re-inspections they conduct based on the type of violation, such as if the violation is an immediate threat to life safety. However, OSFM could not provide to us whether or not it prioritized the re-inspections it did conduct for the structures in our review. Without conducting re-inspections in a timely manner, OSFM cannot ensure that violations are corrected, which could pose safety issues to the public.

**Recommendation 4:** OSFM should conduct timely re-inspections to ensure violations are corrected.

**Summary of Management's Response:** OSFM concurs with this recommendation. See Appendix A for OSFM's full response.

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**OSFM needs to develop and implement a penalty and enforcement structure for violations identified during inspections to deter structure owners from repeatedly violating life safety codes.**

State law<sup>12</sup> gives OSFM the authority to issue fines of up to \$1,000 for violations of the life safety code. However, OSFM is not using this authority to ensure structure owners comply with applicable codes and regulations. For example, while OSFM stated that it issues penalties for licensing violations,<sup>13</sup> it has not developed a penalty structure or process for enforcing monetary penalties for violations it cites during inspections. As a result, OSFM did not assess any monetary penalties on any violations it cited during inspections from calendar years 2011 through 2013.<sup>14</sup> In addition, we found that OSFM does not currently track violations cited during inspections, so inspectors cannot easily determine repeat violations and management cannot track violation trends for each structure to determine if a penalty is warranted.

According to OSFM management, the office does not issue monetary penalties for violations cited during inspections because it prefers to promote voluntary compliance by working with structure owners to address violations. To promote compliance, OSFM management stated that it issues attorney letters to structure owners with more than two consecutive deficiencies of the same violation. However, we found that of the 149 structures with violations, 47 (32%) had repeat violations over multiple re-inspections during calendar years 2011 through 2013 but had never received a letter. For example, we found one structure that was re-inspected nine times for the same violation but was never issued a monetary penalty or an attorney letter. Without an effective and consistent enforcement process, structure owners may not be deterred from repeatedly violating life safety codes.

**Recommendation 5:** OSFM should develop and implement a penalty and enforcement structure for violations identified during inspections and repeat violators.

**Recommendation 6:** OSFM should track violations cited during inspections to identify repeat violations and to determine when penalties are warranted.

**Summary of Management's Response:** OSFM concurs with this recommendation. See Appendix A for OSFM's full response.

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<sup>12</sup> R.S. 40:1563.4(A)

<sup>13</sup> Licensing violations include violations involving fire protection contractors, such as for fire extinguishers, automatic fire sprinkler systems, fire alarm systems, etc.

<sup>14</sup> We obtained eight structures from OSFM's legal department with some type of enforcement action because of violations and complaints. Two of these structures resulted in a cease and desist order, and none resulted in a financial penalty.

**OSFM needs to comprehensively track the number of complaints and impairment notifications received, investigated, and resolved to ensure that complaints are addressed timely.**

OSFM has not developed comprehensive procedures that include a method to track complaints and impairments and timeframes for addressing and resolving different types of issues identified on complaints and impairment notifications.<sup>15</sup> Complaints are life safety and equipment issues reported by citizens, and impairment notifications are generally reported by a licensed contractor on issues that may jeopardize the life safety of the structure's occupants. These life safety issues include life safety equipment deficiencies involving fire alarms, sprinklers, fire extinguishers, etc. According to OSFM's data system, it received 4,235 complaints and impairment notifications during calendar years 2011 through 2013. However, because the data within OSFM's data system is unreliable,<sup>16</sup> we reviewed 116 files (29 from each of the four districts) containing 34<sup>17</sup> complaints and 95 impairments. Exhibit 4 summarizes the complaints and impairments in our review that OSFM received during calendar years 2011 through 2013.

<b>Exhibit 4 Number and Description of Complaints/Impairments Calendar Years 2011 through 2013</b>		
<b>Violation</b>	<b>Description*</b>	<b>Number of Complaints/ Impairments</b>
Exit	Emergency or exit lighting, locking systems, exit sign	2
Fire protection system	Fire alarm, sprinkler system, hood suppression system, fire extinguisher, smoke detector, fixed system	109
Mechanical systems	Equipment, self-closing cover, ventilation, wiring	3
Occupant responsibility	Plan review, fire drills, maintenance, no smoking signage, fire watch, illegal storage of combustible or flammable materials	14
Other	Unknown violations	1
<b>Total</b>		<b>129</b>
<b>Source:</b> Prepared by legislative auditor's staff using OSFM complaint reports.		
*These descriptions are examples of code violation areas identified in the complaint files.		

**OSFM does not comprehensively track information such as the number of complaints and impairments received, investigated, and resolved in all four OSFM districts.** Of the 129 complaints and impairments we reviewed, we found that OSFM did not follow up on 16 (12%) of them, including four complaints and 12 impairments. In addition, OSFM could not provide us with how long it took from the time of the complaint or impairment

<sup>15</sup> R.S. 40:1575(A) states that OSFM may inspect any structures except the interiors of private and one- or two-family dwellings due to complaints.

<sup>16</sup> See page 10 for more information on this issue.

<sup>17</sup> If the documentation was unclear whether or not the potential issue reported to OSFM was a result of a citizen complaint or an impairment notification, we counted it as a complaint.

notification to investigate 62 (48%) of them because it does not comprehensively track this information. In addition, we found that each district tracks complaints and impairment notifications differently. For example, some use spreadsheets and others use email. Developing a comprehensive tracking system may help management monitor complaints and impairment notifications received, whether each district is investigating reported issues consistently and effectively, and whether these issues are investigated timely. Of the seven states we surveyed, five (Alaska, Florida, Tennessee, Texas, and Virginia) use a database to comprehensively track complaints. In addition, two (Tennessee and Texas) have set timeframes for addressing complaints.

**OSFM has not developed comprehensive procedures that include timeframes for investigating and resolving different types of complaints and impairments.** For the complaints and impairments that OSFM did resolve in our review, it took on average 28 days from the filing to resolution. However, without established timeframes, OSFM management does not know how long it should take to investigate and resolve each type of complaint and impairment or if this length of time is sufficient. For example, OSFM's impairment notification form states, "An inspector from this office or the local fire prevention bureau will be sent to verify the impairments and to order corrections to be made if they have not been corrected." It does not give any timeframe for actually following up on these impairments.

**Recommendation 7:** OSFM should comprehensively track information such as the number of complaints and impairments received, investigated, and resolved in all four districts. OSFM should then use this information to establish timeframes and deadlines for when complaints and impairments should be investigated and resolved.

**Summary of Management's Response:** OSFM concurs with this recommendation. See Appendix A for OSFM's full response.

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### **OSFM needs to ensure that its data system contains accurate information to effectively manage its inspection, enforcement, and complaint processes.**

OSFM uses its current data system, MAPPER, to track structures requiring an inspection, inspections completed, and complaints. However, we found that OSFM management does not ensure inspectors and administrative staff enter accurate inspection information into MAPPER. Examples of the issues we found include:

- The data in MAPPER did not match the information found in the actual paper inspection reports for 153 (38%) of the 400 structures we reviewed. In addition, 22 (6%) of these structures had inspection results that were never entered in MAPPER.
- Of the 1,434 inspection reports we reviewed on the 400 structures, 156 (11%) had the wrong scheduled inspection date entered and 107 (8%) had an incorrect event number. OSFM uses the event number to track inspections.

These issues limit OSFM management's ability to ensure required inspections are conducted, violations are corrected, and complaints are resolved in a timely manner. OSFM started the process of obtaining a new data system for all inspectors and fire prevention bureaus in 2008. OSFM anticipates that this system will enhance the efficiency and accountability for inspections and complaints by enabling management and inspectors to more accurately capture and track inspections, violations, and re-inspections. In addition, this new system will track when a complaint is received, investigated, and resolved.

Funding for the new system was secured in 2011. Testing began at the end of calendar year 2014, and the system is supposed to be finalized by May 2015. However, without ensuring that the information entered into the new system is accurate, OSFM will not be able to use this system to effectively manage its inspection, enforcement, and complaint processes and to ensure structures are in compliance with applicable codes and regulations.

**Recommendation 8:** OSFM should ensure the information needed to effectively manage its inspection, enforcement, and complaint processes is entered accurately and timely into the data system being used to track this information.

**Summary of Management's Response:** OSFM concurs with this recommendation and stated that their new data management system is on schedule to be functioning by May of this year (2015) and will completely revolutionize OSFM's inspection, enforcement, and complaint processes in line with the recommendations of the LLA. See Appendix A for OSFM's full response.



## **APPENDIX A: MANAGEMENT'S RESPONSE**





BOBBY JINDAL  
GOVERNOR

## Office of Louisiana State Fire Marshal Code Enforcement and Building Safety

Department of Public Safety and Corrections  
Public Safety Services



H. BUTCH BROWNING  
STATE FIRE MARSHAL

January 21, 2015

Mr. Daryl G. Purpera, CPA, CFA  
Louisiana Legislative Auditor  
Post Office Box 94397  
Baton Rouge, LA 70804-9397

RE: Response to Audit Report of the Office of State Fire Marshal dated January 14, 2015

The Office of State Fire Marshal (hereinafter "OSFM") appreciates and recognizes the great efforts of your staff exercised during this audit. I would like to thank your staff for their constant professionalism during this process.

The following is the OSFM's Response to the Louisiana Legislative Auditor's (hereinafter LLA") January 13, 2015 Report which focused on the OSFM's inspection, enforcement, and complaint processes:

### **Response to Recommendation 1**

OSFM concurs with the auditor's risk-based assessment recommendation and already has adopted a risk-based strategy in line with the auditor's findings. Specifically, the fire marshal considers the urgency of the request for inspection. Included in this assessment is the fire marshal's assessment of the vulnerability of the population and the number and type of citizen complaints. OSFM continues working to strengthen processes to ensure that buildings are in compliance with applicable codes and regulations.

OSFM has worked diligently over the past seven years to modernize its computer system (detailed below), which will make inspections easier to monitor and track in line with the recommendations of the auditor.

OSFM has jurisdiction over 25,868 structures. As stated in the report, the auditor discovered only 16 structures that were not inspected within the last year according to regulations. This amounts to less than one-fourth of one percent of all structures under OSFM jurisdiction. We are confident that OSFM's modernized computer system will remedy even these few inspections.

### **Response to Recommendations 2-8**

In March of 2008, the current administration undertook a holistic evaluation of OSFM to identify inefficiencies in operations. This survey of personnel and stakeholders

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BOBBY JINDAL  
GOVERNOR

## Office of Louisiana State Fire Marshal Code Enforcement and Building Safety

Department of Public Safety and Corrections  
Public Safety Services



H. BUTCH BROWNING  
STATE FIRE MARSHAL

produced nearly 1000 responses and led to a complete reorganization and regionalization of OSFM. A subsequent 2012 OSFM performance review study revealed that these efforts increased productivity within OSFM by 35% while the office also experienced a 25% reduction in staff. A primary contributor to these efficiency gains is the office's employee cross-training programs that now enable a single OSFM employee to perform up to nine different OSFM functions.

The final measure in OSFM's efficiency plan is implementation of a modernized data management system. This system is the culmination of a \$2.8 million grant awarded in 2011. It is on schedule to be functioning by May of this year and will completely revolutionize OSFM inspection, enforcement, and complaint processes in line with the recommendations of the LLA.

For example, OSFM's updated data management system will enable fire prevention bureaus to submit electronic inspection reports and streamline OSFM's review of these reports. Currently, this process is conducted using paper reports, presenting problems for review and storage. Further, the new computer system will be able to track and manage violations, penalties, and appeal statuses- functions the current OSFM system is incapable of managing. Ultimately, the scheduled implementation in May 2015 of the modernized data management system will accomplish the relevant recommendations suggested in the report.

Sincerely,

H. Butch Browning  
Louisiana State Fire Marshal



Louisiana Legislative Auditor  
Performance Audit Services

Checklist for Audit Recommendations  
Office of State Fire Marshal

**Instructions to Audited Agency:** Please check the appropriate box below for each recommendation. A summary of your response for each recommendation will be included in the body of the report. The entire text of your response will be included as an appendix to the audit report.

RECOMMENDATIONS	AGREE	DISAGREE
<p><b>Recommendation 1:</b> OSFM should develop a risk-based strategy, which should include time frames for inspecting schools, universities, state buildings, and licensed outpatient facilities, to ensure it conducts timely inspections. (p. 5 of the report)</p>	X	
<p><b>Recommendation 2:</b> After warning the bureaus, OSFM should begin to revoke the certifications of fire prevention bureaus that do not submit required inspection reports as these reports are the only monitoring tools OSFM has to ensure fire prevention bureaus are conducting their required inspections. (p. 6 of the report)</p>	X	
<p><b>Recommendation 3:</b> OSFM should review the inspection reports it receives from fire prevention bureaus to ensure bureaus are conducting required inspections. (p. 6 of the report)</p>	X	
<p><b>Recommendation 4:</b> OSFM should conduct timely re-inspections to ensure violations are corrected. (p. 7 of the report)</p>	X	
<p><b>Recommendation 5:</b> OSFM should develop and implement a penalty and enforcement structure for violations identified during inspections and repeat violators. (p. 8 of the report)</p>	X	
<p><b>Recommendation 6:</b> OSFM should track violations cited during inspections to identify repeat violations and to determine when penalties are warranted. (p. 8 of the report)</p>	X	
<p><b>Recommendation 7:</b> OSFM should comprehensively track information such as the number of complaints and impairments received, investigated, and resolved in all four districts. OSFM should then use this information to establish timeframes and deadlines for when complaints and impairments should be investigated and resolved. (p. 9 of the report)</p>	X	
<p><b>Recommendation 8:</b> OSFM should ensure the information needed to effectively manage its inspection, enforcement, and complaint processes is entered accurately and timely into the data system being used to track this information. (p. 10 of the report)</p>	X	



## APPENDIX B: SCOPE AND METHODOLOGY

We conducted this performance audit under the provisions of Title 24 of the Louisiana Revised Statutes of 1950, as amended. The purpose of this audit was to determine whether OSFM has developed sufficient processes to ensure buildings are in compliance with applicable codes and regulations. Our audit focused on OSFM's inspection, enforcement, and complaint processes and covered the time period from calendar year 2011 through 2013. The audit objective was to answer the following question:

### **Has OSFM developed sufficient processes to ensure that buildings are in compliance with applicable codes and regulations?**

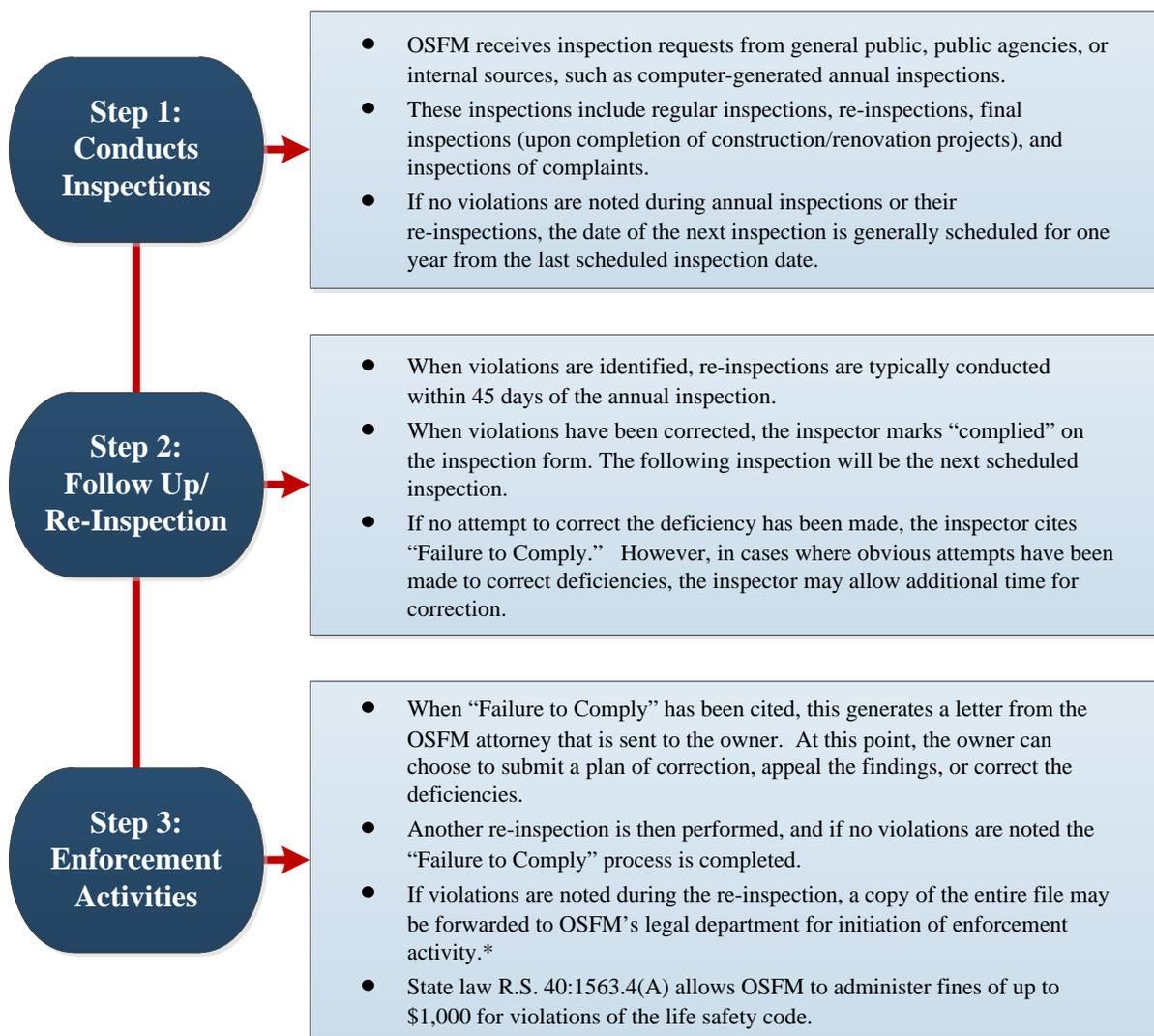
We conducted this performance audit in accordance with generally-accepted government auditing standards issued by the Comptroller General of the United States. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objective. We believe the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objective. To answer our audit objective, we reviewed internal controls relevant to the audit objective and performed the following audit steps:

- Researched and reviewed relevant federal and state legal statutes, agency policies, and regulations to determine inspection criteria.
- Researched and reviewed relevant federal and state legal statutes, agency policies, and regulations to determine enforcement and complaint criteria.
- Interviewed OSFM program staff and accompanied fire inspectors on routine inspections.
- Obtained active structure and event data from OSFM's MAPPER system for calendar years 2011 through 2013 and analyzed it for data reliability.
- Due to the unreliability of the MAPPER data, we obtained paper copies of inspection records for 400 randomly-selected structures (100 from each of the four districts) for calendar years 2011 through 2013. Using these inspection reports, we created a database of conducted inspections, including structure information, violations cited, and re-inspections conducted.
- Analyzed inspection data from the 400 selected structures to determine compliance with inspection requirements.

- Used Audit Command Language (ACL) to determine the number and types of inspections conducted for the selected structures and the number and percentage of structures that did and did not have required inspections during calendar years 2011 through 2013.
- Analyzed inspection records to determine the number of structures with at least one violation during calendar years 2011 through 2013 to identify whether inspections with violations had a re-inspection.
- Interviewed OSFM staff and reviewed policies and procedures to determine OSFM's enforcement process for addressing violations identified during inspections. Interviewed the Baton Rouge Fire Department staff to gain an understanding of the responsibilities of the fire prevention bureaus.
- Used ArcGIS to develop a map of Louisiana showing the area each certified fire prevention bureau has jurisdiction over and the population each serves from U.S. Census Bureau data.
- Conducted research to determine other states' inspection, enforcement, and complaint processes by surveying seven other states recommended by OSFM (Alaska, Arkansas, Georgia, Tennessee, Texas, Florida, and Virginia).

## APPENDIX C: OSFM'S INSPECTION AND ENFORCEMENT PROCESSES

OSFM is responsible for the inspection of all institutional occupancies requiring a state or federal license, detention centers, colleges, universities, health care facilities, state buildings, and schools, where applicable.



\*Enforcement activities include, but are not limited to, cease and desist orders, misdemeanor summons, search warrants, and incarceration.

**Source:** Prepared by legislative auditor’s staff using OSFM’s internal policies and procedures, state law, and OSFM’s MAPPER handbook.



## APPENDIX D: INSPECTION CRITERIA

Facility Type	Inspection Requirement
School	Annually-OSFM Internal Goal
State building	Annually-OSFM Internal Goal
University	Annually-OSFM Internal Goal
Day care center	Annually- (LAC, Title 67, Pt III., §7303 (C)(2))
Detention center (Jail)	Twice a year- (LAC, Title 55, Pt V., §1701)
Licensed outpatient facilities	Annually-OSFM Internal Goal
Healthcare facilities*	Depends on type of facility- (Centers for Medicare and Medicaid Services Fiscal Year 14 Policy) Annually - OSFM Internal Goal
Group home	Annually- (LAC, Title 48, Pt 1, §8803(C)(4))
Substance abuse	Annually- (LAC, Title 48, Pt 1, §7423 (D)(1)(a))
<p>*CMS requirements vary according to the type of health care facility, but it is OSFM practice to inspect health care structures annually.  <b>Source:</b> Prepared by legislative auditor's staff using state law, CMS policy, and OSFM internal goals and policies.</p>	

# Inspection, Enforcement, and Complaint Processes

## Office of State Fire Marshal

### What We Found (Cont.)

- **OSFM needs to conduct timely re-inspections to ensure violations identified during inspections are corrected.** Of the 385 violations we reviewed involving 149 structures, OSFM did not follow up on 81 (21%) of the violations or re-inspect the 33 different structures with these violations to determine if the violations were corrected before the next annual inspection.
- **OSFM needs to develop and implement a penalty and enforcement structure for violations identified during inspections to deter structure owners from repeatedly violating life safety codes.** Of the 149 structures with violations, 47 (32%) had repeat violations over multiple re-inspections but received no enforcement action from OSFM. Penalties may deter structure owners from repeatedly violating life safety codes.
- **OSFM needs to comprehensively track the number of complaints and impairment notifications received, investigated, and resolved to ensure that complaints are addressed timely.** Of the 129 complaints/impairments we reviewed, we found that OSFM did not follow up on 16 (12%) of them, including four complaints and 12 impairments. In addition, OSFM could not provide us with how long it took from the time of the complaint or impairment notification to investigate 62 (48%) of them because it does not comprehensively track this information.

Number and Description of Complaints/Impairments Calendar Years 2011 through 2013		
Violation	Description*	Number of Complaints/Impairments
Exit	Emergency or exit lighting, locking systems, exit sign	2
Fire protection system	Fire alarm, sprinkler system, hood suppression system, fire extinguisher, smoke detector, fixed system	109
Mechanical systems	Equipment, self-closing cover, ventilation, wiring	3
Occupant responsibility	Plan review, fire drills, maintenance, no smoking signage, fire watch, illegal storage of combustible or flammable materials	14
Other	Unknown violations	1
<b>Total</b>		<b>129</b>

\* These descriptions are examples of code violation areas identified in the complaint files.  
**Source:** Prepared by legislative auditor's staff using OSFM complaint reports.

- **OSFM needs to ensure that its data system contains accurate information to effectively manage its inspection, enforcement, and complaint processes.** OSFM uses its current data system, MAPPER, to track structures requiring an inspection, inspections completed, and complaints. However, we found that OSFM management does not ensure inspectors and administrative staff enter accurate inspection information into MAPPER.