



**FYI**

January 18, 2017

Mr. Terrence LaPier  
President  
Cambridge Institute of Allied Health & Technology  
5150 Linton Boulevard  
Suite 340  
Delray Beach, Florida 33484-6543

UPS Tracking Number  
1ZA87964NY90763685

Dear Mr. LaPier:

RE: **Final Program Review Determination**  
OPE ID: 04083400  
PRCN: 201620429246

Dear Mr. LaPier:

The U.S. Department of Education's (Department's) School Participation Division – Atlanta issued a program review report on April 18, 2016 covering Cambridge Institutes of Allied Health and Technology's (CIAHT) administration of programs authorized by Title IV of the Higher Education Act of 1965, as amended, 20 U.S.C. §§ 1070 et seq. (Title IV, HEA programs), for the 2015 and 2016 award years. CIAHT's final response was received on July 22, 2016. A copy of the program review report (and related attachments) and CIAHT's response are attached. Any supporting documentation submitted with the response is being retained by the Department and is available for inspection by CIAHT upon request. Additionally, this Final Program Review Determination (FPRD), related attachments, and any supporting documentation may be subject to release under the Freedom of Information Act (FOIA) and can be provided to other oversight entities after this FPRD is issued.

**Purpose:**

Final determinations have been made concerning all of the outstanding findings of the program review report. The purpose of this letter is to: (1) identify liabilities resulting from the findings of this program review report, (2) provide instructions for payment of liabilities to the Department, (3) notify the institution of its right to appeal, and (4) close the review. Due to the serious nature of one or more of the enclosed findings, this FPRD is being referred to the Department's Administrative Actions and Appeals Service Group (AAASG) for its consideration of possible adverse action. Such action may include a fine, or the limitation, suspension or termination of the eligibility of the institution. Such action may also include the revocation of the institution's program participation agreement (if provisional), or, if the institution has an application pending for renewal of its certification, denial of that application. If AAASG initiates any action, a separate notification will be provided which will include information on institutional appeal rights and procedures to file an appeal.

**Federal Student Aid**  
U.S. DEPARTMENT OF THE U.S. DEPARTMENT OF EDUCATION  
School Participation Division – Atlanta  
61 Forsyth Street Room 18T40  
Atlanta, Georgia 30303-8918  
[www.FederalStudentAid.gov](http://www.FederalStudentAid.gov)

This FPRD contains one or more findings regarding CIAHT's failure to comply with the requirements of the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act (the Clery Act) in Section 485(f) of the HEA, 20 U.S.C. § 1092(f), and the Department's regulations in 34 C.F.R. §§ 668.41 and 668.46. Since a Clery Act finding does not result in a financial liability, such a finding may not be appealed.

This FPRD contains one or more findings regarding CIAHT's failure to comply with the requirements of the Drug-Free Schools and Communities Act Amendments of 1989 as reflected in Section 120 of the HEA, 20 U.S.C. § 1011(i), and the Department's regulations in 34 C.F.R. Part 86. Since such a finding does not result in a financial liability it may not be appealed at this time.

The total liabilities due from the institution from this program review are \$9,968.

This final program review determination contains detailed information about the liability determination for all findings.

**Protection of Personally Identifiable Information (PII):**

PII is any information about an individual which can be used to distinguish or trace an individual's identity (some examples are name, social security number, date and place of birth). The loss of PII can result in substantial harm, embarrassment, and inconvenience to individuals and may lead to identity theft or other fraudulent use of the information. To protect PII, the findings in the attached report do not contain any student PII. Instead, each finding references students only by a student number created by Federal Student Aid. The student numbers were assigned in Appendix A, Student Sample.

**Appeal Procedures:**

This constitutes the Department's FPRD with respect to the liabilities identified from the April 18, 2016 program review report. If CIAHT wishes to appeal to the Secretary for a review of financial liabilities established by the FPRD, the institution must file a written request for an administrative hearing. Please note that institutions may appeal financial liabilities only. The Department must receive the request no later than 45 days from the date CIAHT receives this FPRD. An original and four copies of the information CIAHT submits must be attached to the request. The request for an appeal must be sent to:

Susan Crim, Director  
Administrative Actions and Appeals Service Group  
U.S. Department of Education  
Federal Student Aid/PC  
830 First Street, NE - UCP3, Room 84F2  
Washington, DC 20002-8019



CIAHT's appeal request must:

- (1) indicate the findings, issues and facts being disputed;
- (2) state the institution's position, together with pertinent facts and reasons supporting its position;
- (3) include all documentation it believes the Department should consider in support of the appeal. An institution may provide detailed liability information from a complete file review to appeal a projected liability amount. Any documents relative to the appeal that include PII data must be redacted except the student's name and last four digits of his / her social security number (please see the attached document, "Protection of Personally Identifiable Information," for instructions on how to mail "hard copy" records containing PII); and
- (4) include a copy of the FPRD. The program review control number (PRCN) must also accompany the request for review.

If the appeal request is complete and timely, the Department will schedule an administrative hearing in accordance with § 487(b)(2) of the HEA, 20 U.S.C. § 1094(b)(2). The procedures followed with respect to CIAHT's appeal will be those provided in 34 C.F.R. Part 668, Subpart H. Interest on the appealed liabilities shall continue to accrue at the applicable value of funds rate, as established by the United States Department of Treasury, or if the liabilities are for refunds, at the interest rate set forth in the loan promissory note(s).

**Record Retention:**

Program records relating to the period covered by the program review must be retained until the later of: resolution of the loans, claims or expenditures questioned in the program review; or the end of the retention period otherwise applicable to the record under 34 C.F.R. §§ 668.24(e)(1), (e)(2), and (e)(3).

The Department expresses its appreciation for the courtesy and cooperation extended during the review. If the institution has any questions regarding this letter, please contact Jon Finkelstein at 404-974-9341. Questions relating to any appeal of the FPRD should be directed to the address noted in the Appeal Procedures section of this letter.

Sincerely,



Chris Miller  
Division Director

Enclosure:

Protection of Personally Identifiable Information  
Program Review Report (and appendices)  
Final Program Review Determination Report (and appendices)

cc:     Brittney Freeman, Financial Aid Administrator  
          FL Commission for Independent Education - Florida Department of Education  
          Accrediting Bureau of Health Education Schools  
          Department of Defense  
          Department of Veterans Affairs  
          Consumer Financial Protection Bureau

## PROTECTION OF PERSONALLY IDENTIFIABLE INFORMATION

Personally Identifiable Information (PII) being submitted to the Department must be protected. PII is any information about an individual which can be used to distinguish or trace an individual's identity (some examples are name, social security number, date and place of birth).

PII being submitted electronically or on media (e.g., CD-ROM, floppy disk, DVD) must be encrypted. The data must be submitted in a .zip file encrypted with Advanced Encryption Standard (AES) encryption (256-bit is preferred). The Department uses WinZip. However, files created with other encryption software are also acceptable, provided that they are compatible with WinZip (Version 9.0) and are encrypted with AES encryption. Zipped files using WinZip must be saved as Legacy compression (Zip 2.0 compatible).

The Department must receive an access password to view the encrypted information. The password must be e-mailed separately from the encrypted data. The password must be 12 characters in length and use three of the following: upper case letter, lower case letter, number, special character. A manifest must be included with the e-mail that lists the types of files being sent (a copy of the manifest must be retained by the sender).

Hard copy files and media containing PII must be:

- sent via a shipping method that can be tracked with signature required upon delivery
- double packaged in packaging that is approved by the shipping agent (FedEx, DHL, UPS, USPS)
- labeled with both the "To" and "From" addresses on both the inner and outer packages
- identified by a manifest included in the inner package that lists the types of files in the shipment (a copy of the manifest must be retained by the sender).

PII data cannot be sent via fax.

Prepared for

Cambridge Institute of  
Allied Health and  
Technology

**Federal Student Aid**  
AN OFFICE of the U.S. DEPARTMENT of EDUCATION

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the AMERICAN MIND

OPE ID 04083400  
PRCN 201620429246

Prepared by  
U.S. Department of Education  
Federal Student Aid  
School Participation Division - Atlanta

## Final Program Review Determination January 18, 2017

Federal Student Aid, Atlanta School Participation Division  
61 Forsyth Street, Suite 18T40  
Atlanta, Georgia 30303-8918  
[www.FederalStudentAid.gov](http://www.FederalStudentAid.gov)

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**A. Institutional Information**

Cambridge Institute of Allied Health and Technology  
5150 Linton Boulevard  
Suite 340  
Delray Beach, Florida 33484-6543

Type: Proprietary

Highest Level of Offering: Associates

Accrediting Agency: Accrediting Bureau of Health Education Schools

Current Student Enrollment: 393 (2015-2016)

% of Students Receiving Title IV: 84% (2015-2016)

Title IV, HEA Program Participation Postsecondary Education Participants System (PEPS):

	2014-2015
Federal Direct Loan Program (FDLP)	\$ 3,215,412
Federal Pell Grant Program	\$ 1,104,562
Federal Supplemental Educational Opportunity Grant	\$ 15,436
Total:	\$ 4,335,410

Default Rate FFEL/DL:	2013 - 7.9%
	2012 - 5.7%
	2011 - 8.3%



## **B. Scope of Review**

The U.S. Department of Education (the Department) conducted a program review at Cambridge Institute of Allied Health and Technology (CIAHT) from February 22, 2016 to February 26, 2016. The review was conducted by Jon Finkelstein and Daniel Castellanos.

The focus of the review was to determine CIAHT's compliance with the statutes and federal regulations as they pertain to the institution's administration of Title IV programs. The review consisted of, but was not limited to, an examination of CIAHT's policies and procedures regarding institutional and student eligibility, individual student financial aid and academic files, attendance records, student account ledgers, and fiscal records.

A sample of 30 files was identified for review from the 2015 and 2016 (year to date) award years. The files were selected randomly from a statistical sample of the total population receiving Title IV, HEA program funds for each award year. Appendix A lists the names of the students whose files were examined during the program review.

### **Disclaimer:**

Although the review was thorough, it cannot be assumed to be all-inclusive. The absence of statements in the report concerning CIAHT's specific practices and procedures must not be construed as acceptance, approval, or endorsement of those specific practices and procedures. Furthermore, it does not relieve CIAHT of its obligation to comply with all of the statutory or regulatory provisions governing the Title IV, HEA programs.

## **C. Findings and Final Determinations**

### **Resolved Findings**

CIAHT has taken the corrective actions necessary to resolve findings 4-20 of the Program Review Report. Therefore, these findings are closed. Findings requiring further action by CIAHT are discussed below.

### **Findings with Final Determinations**

The Program Review Report finding requiring further action is summarized below. At the conclusion of the finding is a summary of CIAHT's response to the finding, and the Department's final determination for the finding. A copy of the Program Review Report issued on April 18, 2016 is attached as Appendix B.

### **Finding 1: Return to Title IV (R2T4) Calculation Errors**

**Citation Summary:** 34 C.F.R. § 668.22 (a) states when a recipient of Title IV grant or loan assistance withdraws from an institution during a payment period of enrollment in which the

recipient began attendance, the institution must determine the amount of Title IV grant or loan assistance that the student earned as of the student's withdrawal date.

34 C.F.R. § 668.22 (e)(2) states the percentage of Title IV grant or loan assistance that has been earned by the student is equal to the percentage of the payment period or period of enrollment that the student completed as of the student's withdrawal date.

34 C.F.R. § 668.22 (f) states for purposes of paragraph (e)(2)(i) of this section, the percentage of the payment period or period of enrollment completed is determined—

(i) In the case of a program that is measured in credit hours, by dividing the total number of calendar days in the payment period or period of enrollment into the number of calendar days completed in that period as of the student's withdrawal date; and

(ii)(A) In the case of a program that is measured in clock hours, by dividing the total number of clock hours in the payment period or period of enrollment into the number of clock hours scheduled to be completed as of the student's withdrawal date.

(B) The scheduled clock hours used must be those established by the institution prior to the student's beginning class date for the payment period or period of enrollment and must be consistent with the published materials describing the institution's programs, unless the schedule was modified prior to the student's withdrawal.

(C) The schedule must have been established in accordance with requirements of the accrediting agency and the State licensing agency, if such standards exist.

34 C.F.R. § 668.22 (f) (2)(i) states where classes end on a Friday and do not resume until Monday following a one-week break, both weekends (four days) and the five weekdays would be excluded from the return calculation. The first Saturday, the day after the last class, is the first day of the break. The following Sunday, the day before classes resume, is the last day of the break. If classes were taught on either weekend for the programs that were subject to the scheduled break, those days would be included rather than excluded.

34 C.F.R. § 668.22 (g) states that the institution must return, in the order specified in paragraph (i) of this section, the lesser of—

(i) The total amount of unearned title IV assistance to be returned as calculated under paragraph (e)(4) of this section; or

(ii) An amount equal to the total institutional charges incurred by the student for the payment period or period of enrollment multiplied by the percentage of title IV grant or loan assistance that has not been earned by the student, as described in paragraph (e)(3) of this section.



(2) For purposes of this section, “institutional charges” are tuition, fees, room and board (if the student contracts with the institution for the room and board) and other educationally-related expenses assessed by the institution.

34 C.F.R. § 668.22 (b) (2) states an institution must document a student's withdrawal date determined in accordance with paragraph (b)(1) of this section and maintain the documentation as of the date of the institution's determination that the student withdrew, as defined in paragraph (l)(3) of this section.

(e)(2)(i) of this section, the percentage of the payment period or period of enrollment completed is determined—

(i) In the case of a program that is measured in credit hours, by dividing the total number of calendar days in the payment period or period of enrollment into the number of calendar days completed in that period as of the student's withdrawal date; and

(ii)(A) In the case of a program that is measured in clock hours, by dividing the total number of clock hours in the payment period or period of enrollment into the number of clock hours scheduled to be completed as of the student's withdrawal date.

**Noncompliance Summary:** During the course of the review, seven students were identified with R2T4 calculation errors. Five of these students were identified from files that were requested in addition to the standard sample of 15 students from each award year. Three of the seven students identified had a miscalculation of the number of scheduled hours in a clock hour program. Four of the seven students identified had a miscalculation of the number of days in the payment period (scheduled break of five days or more). The student numbers (outside sample) are the randomly assigned numbers generated from the Department's statistical sample. Detailed information regarding each student is presented below.

**Student 6:** This student was enrolled in the Radiologic Technology Program (99 credit hours). The student withdrew during the spring 2015 semester. CIAHT completed the R2T4 with 112 days in the payment period. The correct number of days in the payment period was 107. The miscalculation resulted in a deflated earned aid percentage which led to an incorrect return amount.

**Student E1:** This student was enrolled in the Practical Nursing Program (1350 clock hours). The program consists of a series of courses with a designated number of clock hours per course. The student withdrew during the fourth course (Fundamentals of Nursing II) of the first payment period. The last date of attendance (LDA) was 8/28/2014. CIAHT calculated scheduled hours using the scheduled completion date of the fourth course (186 scheduled hours). The correct scheduled hour calculation is based on the student's LDA. The correct scheduled hours were 144. The miscalculation resulted in an inflated earned aid percentage which led to an incorrect return amount.

**Student E2:** This student was enrolled in the Practical Nursing Program (1350 clock hours). The program consists of a series of courses with a designated number of clock hours per course. The student withdrew during the third course (Fundamentals of Nursing Practice Clinical Rotation I) of the first payment period. The last date of attendance (LDA) was 2/10/2015. CIAHT calculated scheduled hours using the scheduled completion date of the third course (230 scheduled hours). The correct scheduled hour calculation is based on the student's LDA. The correct scheduled hours were 160. The miscalculation resulted in an inflated earned aid percentage which led to an incorrect return amount.

**Student 27 (2015-2016 Sample):** This student was enrolled in the Diagnostic Medical Sonography Program (113 credit hours). The student withdrew during the winter 2015 semester. CIAHT completed the R2T4 with 110 days in the payment period. The correct number of days in the payment period was 109. The miscalculation resulted in a deflated earned aid percentage which led to an incorrect return amount.

**Student E3:** This student was enrolled in the Practical Nursing Program (1350 clock hours). The program consists of a series of courses with a designated number of clock hours per course. The student withdrew during the second course (Fundamentals of Nursing I) of the first payment period. The last date of attendance (LDA) was 8/6/2015. CIAHT calculated scheduled hours using the scheduled completion date of the third course (155 scheduled hours). The correct scheduled hour calculation is based on the student's LDA. The correct scheduled hours were 104. The miscalculation resulted in an inflated earned aid percentage which led to an incorrect return amount.

**Student E4:** This student was enrolled in the Radiologic Technology Program (99 credit hours). The student withdrew during the winter 2015 semester. CIAHT completed the R2T4 with 110 days in the payment period. The correct number of days in the payment period was 109. The miscalculation resulted in a deflated earned aid percentage which led to an incorrect return amount.

**Student E5:** This student was enrolled in the Diagnostic Medical Sonography Program (113 credit hours). The student withdrew during the winter 2015 semester. CIAHT completed the R2T4 with 110 days in the payment period. The correct number of days in the payment period was 109. The miscalculation resulted in a deflated earned aid percentage which led to an incorrect return amount.

**Required Action Summary:** CIAHT was required to conduct a file review of students who withdrew during the 2014-2015 and 2015-2016 award years (excluding students included in the noncompliance section of this finding) to identify additional incorrect R2T4 calculations.

**MC's Response:** MC completed the file reviews (2014-2015 and 2015-2016) that were requested by the Department. One of the students identified in the Program review report (student 27) was disputed by CIAHT. The Department reviewed the student's records and agrees with CIAHT's determination. A total of eight students from the 2013-2014, 2014-2015 and 2015-



2016 award years were identified with R2T4 calculation errors.

CIAHT's response stated the following –

*“The institution agrees with the finding with the exception of student #27. We respectfully submit that the original calculation for student #27 was correct. The remaining errors resulted from the incorrect calculation of the scheduled hours for the clock hour calculations and from the incorrect configuration of a term break for the credit hour calculations. The spring break during the January 2015 term failed to include the preceding and the following weekend days resulting in a 4 day miscalculation. The term configuration was corrected during the site visit and the other terms were checked for accuracy.*

*The policies and procedures for calculation of the scheduled hours for clock hour calculations were updated for clarity and the staff received training on these updates. Additionally, the College's Campus Nexus software system automation now calculates the scheduled hours to be used based on the scheduling information listed in the system. The staff now confirms this number by printing and comparing the student's detailed attendance records.”*

**Final Determination:** The Department reviewed the results of the file review conducted by CIAHT in response to this finding. The students that were determined to have had inaccurate R2T4 calculations are listed in Appendix D.

In addition to the ineligible Pell and Direct Loan awards, CIAHT is also required to repay the Cost of Funds (COF) on the ineligible Federal Pell Grant and Direct Loan disbursements. The COF is the expense the Department incurred as a result of CIAHT retaining ineligible funds. The rate of interest is based on when the funds should have been returned to the Department. The COF is calculated through the date of the Program Review Report (April 18, 2016). A copy of the COF calculation is included in Appendix E (Pell) and Appendix F (Direct Loan) of this report. Liability totals for ineligible Pell and Direct Loan disbursements is presented in the table below.

Title IV Program	Fund Liability	Cost of Funds	Total
Pell	\$2,280.53	\$18.62	\$2,299.15
Subsidized Direct Loan	\$1,633	\$16	\$1,649
Unsubsidized Direct Loan	\$5,954	\$66	\$6,020

The Pell and Direct loan disbursement record for each student identified in this finding (Appendix D) must be adjusted in the Common Origination and Disbursement (COD) system based on the adjusted amount identified in Final Determination section of this finding. Adjustments in COD must be completed prior to remitting payment to the Department. Payment cannot be accepted via G5. Once the Department receives payment the Department will apply the principal payment to the applicable G5 award. The interest will be applied to the

general program account. Further instructions are provided in the Payment Section of this report. A copy of the adjustment to each student's COD record must be sent to Jon Finkelstein within 45 days of the date of this letter.

CIAHT will be liable for any additional Title IV, HEA funds owed as a result of inaccurate R2T4 calculations for withdrawn students. A full accounting of the total liability will be discussed in the Summary of Liabilities section of this report. Instructions for repayment of this liability are included in the Repayment section of this report.

### **Finding 2: Failure to Comply with Drug and Alcohol Abuse Prevention Program Requirements**

**Citation Summary:** *The Drug-Free Schools and Communities Act (DFSCA) and Part 86 of the Department's General Administrative Regulations require each institution of higher education (IHE) to certify that it has developed and implemented a drug and alcohol abuse prevention program (DAAPP). The program must be designed to prevent the unlawful possession, use, and distribution of drugs and alcohol on campus and at recognized events and activities.*

*The DAAPP disclosure must include all of the following elements:*

- *A written statement about an institution's standards of conduct that prohibits the unlawful possession, use or distribution of illicit drugs and alcohol by students and employees;*
- *A written description of legal sanctions imposed under federal, state, and local laws and ordinances for unlawful possession or distribution of illicit drugs and alcohol;*
- *A description of the health risks associated with the use of illicit drugs and alcohol abuse;*
- *A description of any drug or alcohol counseling, treatment, and rehabilitation/re-entry programs that are available to students and employees; and,*
- *A statement that the IHE will impose disciplinary sanctions on students and employees for violations of the institution's codes of conduct and a description of such sanctions.*

*The DAAPP disclosure must be actively distributed to all employees and students enrolled for academic credit (except for continuing education credits) on an annual basis. The distribution plan must make provisions for providing the DAAPP disclosure annually to students who enroll at a date after the initial distribution and for employees who are hired at different points throughout the year.*

*In addition, each IHE must conduct a biennial review to determine the effectiveness of its DAAPP and to ensure consistent enforcement of applicable drug and alcohol-related statutes,*



*ordinances, and institutional policies against students and employees found to be in violation. The IHE must also produce a report of findings, maintain its supporting materials, and provide them to the Department upon request. 34 C.F.R. §§ 86.3 and 86.100.*

***Noncompliance Summary:*** *CIAHT violated multiple provisions of the DFSCA. First, the Institute failed to implement a comprehensive DAAPP. Specifically, CIAHT's program information did not include the following required components:*

- *A written description of legal sanctions imposed under Federal, state, and local laws and ordinances for unlawful possession or distribution of illicit drugs and alcohol.*
- *A detailed description of the health risks associated with the use of illicit drugs and the abuse of alcohol. Directing stakeholders to the National Institute on Drug Abuse website link ([www.drugabuse.gov](http://www.drugabuse.gov)) fails to meet this requirement.*
- *A written description of any drug or alcohol counseling, treatment, and rehabilitation/re-entry programs that is available to students. The current list provided by CIAHT is primarily composed of national organizations. Additional local organizations within easy access of students and employees must be included.*
- *Distribution on an annual basis to every current student who is enrolled for academic credit as well as every employee of CIAHT. Current procedures only ensure that the policy is distributed with the receipt of the school catalog upon initial enrollment, and*
- *Completion of a compliant biennial review to measure the effectiveness of its existing drug and alcohol programs and its new DAAPP. CIAHT must describe the research methods and data analysis tools that will be used to determine the effectiveness of the program. In addition, the report must identify the responsible official(s) who conducted the review. Finally, the report must be presented to and approved by the Institute's President and/or its Board;*

*The review team identified these deficiencies based on a detailed examination of several CIAHT websites and publications. Although some drug and alcohol policy information was found in each of these websites and publications, none of these websites and/or documents included a materially-complete DAAPP that met Federal requirements.*

*Based on these violations, the Department's review indicates that CIAHT has persistently failed to comply with the DFSCA during its participation in the Title IV, FSA programs.*

*Failure to comply with the DFSCA's DAAPP requirements deprives students and employees of important information regarding the health consequences of the use of illicit drugs and the abuse of alcohol and the availability of treatment/counseling options. Such failures may contribute to increased drug and alcohol abuse as well as an increase in drug and alcohol-related violent crime at CIAHT.*

**Required Action Summary:** *As a result of these violations, CIAHT was required to take all necessary corrective actions to address the violations and to otherwise insure that they do not recur. At a minimum, CIAHT was required to perform the following:*

- *Develop and implement a comprehensive DAAPP that includes all of the required elements found in the DFSCA and the Department's Part 86 regulations and publish a materially-complete disclosure that summarizes the program.*

*As noted above, the exceptions identified in this finding constitute very serious and persistent violations of the DFSCA that by their nature cannot be cured. CIAHT will be given an opportunity to take remedial action and in doing so, finally begin to bring its drug and alcohol programs into compliance with the DFSCA as required by its Program Participation Agreement. Nevertheless, CIAHT is advised that these remedial measures cannot and do not diminish the seriousness of these violations nor do they eliminate the possibility that the Department will impose an adverse administrative action and/or require additional corrective measures as a result.*

**CIAHT's Response:** In its official response dated July 22, 2016, CIAHT concurred with the finding stating that remedial action was taken as directed in the Program Review Report. In support of its claims, the Institute submitted an enhanced DAAPP and documentation indicating that institutional officials conducted a biennial review on July 11, 2016. In addition, the Institute submitted the requested Certification Statement wherein Institute officials represent that the institution understands its DFSCA obligations and that the annual disclosure was distributed in the required manner.

**Final Determination:** Finding 2 cited CIAHT for multiple violations of the DFSCA and Part 86 of the Department's General Administrative Regulations, as outlined in the Noncompliance section above. Specifically, the review team found that CIAHT failed to develop and implement a comprehensive DAAPP that addressed all required subject areas. In addition, CIAHT did not produce a DAAPP disclosure statement that summarized its program and as a result, failed to actively distribute required program materials to enrolled students and current employees in 2015 and 2016. Finally, the review team also confirmed that CIAHT persistently failed to conduct biennial reviews to assess the effectiveness of its DAAPP and as a consequence, was also unable to produce the required report of findings, recommendations, and supporting documentation. This violation was specifically noted for 2015 and 2016 but clearly persisted for several years prior to the review.

These separate and distinct violations necessarily follow from each other because the biennial review is primarily a study of the DAAPP's effectiveness. Therefore, an institution cannot conduct a proper biennial review until it has a fully-functional DAAPP in place and program requirements and standards of conduct are communicated clearly to all members of the campus community. As a result of these violations, CIAHT was required to develop and implement a complete DAAPP and produce and distribute an annual disclosure. Then, CIAHT was required to conduct a substantive biennial review as soon as initial program data was available. In its response, CIAHT concurred with the finding, described the remedial actions taken so far, and submitted documents in support of its claims.



The Department carefully examined CIAHT's narrative response and supporting documentation. Based on the Department's review and CIAHT's admission of noncompliance, the violations identified in the initial finding are sustained. The review team's examination also showed that the identified violations were, for the most part, satisfactorily addressed by the Institute's new DAAPP program materials, initial biennial report, and new internal policies and procedures. For these reasons, the Department has accepted the response and considers this finding to be closed for purposes of this program review. Nevertheless, the officials and directors of CIAHT are advised that they must take all other action that may be necessary to address the deficiencies identified by the Department as well as any additional deficiencies and weaknesses that were detected during the preparation of the Institute's response, and/or as may be needed to otherwise ensure that these violations do not recur.

In this regard, CIAHT is specifically advised that it must continue to develop its DAAPP. Going forward, CIAHT must also ensure that it actively distributes accurate and complete program materials to every student and employee on an annual basis in accordance with the Department's regulations and its own procedures. Moreover, CIAHT must ensure that its next biennial review is a comprehensive and substantive assessment of the DAAPP's effectiveness. The review must include an evaluation of the goals and objectives of CIAHT's substance abuse programs. CIAHT officials must also carefully consider the strengths and weaknesses of the program as well as the efficacy of the policies and procedures that underlie it. Care must be taken to ensure that the review process does not become a conclusory ratification of existing policy. The content of the Institute's reports must be sufficiently detailed and all findings and recommendations must be supported by valid evidence. Each report must be approved by CIAHT's President and/or its board. Finally, CIAHT must implement procedures and provide sufficient oversight to ensure that future reviews are conducted on the required schedule.

CIAHT is reminded that the exceptions identified above constitute very serious violations of the *DFSCA* that by their nature cannot be cured. There is no way to truly "correct" violations of this type once they occur. CIAHT has stated that it has brought its overall drug and alcohol abuse program into compliance with the *DFSCA* as required by its Program Participation Agreement (PPA). While this is an important first step, CIAHT officials must understand that the Department deems *DFSCA* compliance to be essential to maintaining a safe and healthy learning environment. Data compiled by the Department shows that the use of illicit drugs and alcohol abuse is highly correlated to increased incidents of violent crime on campus. The compliance failures documented by the Department deprived students and employees of important information regarding the educational, financial, health, and legal consequences of alcohol abuse and illicit drug use. Moreover, CIAHT's failure to conduct biennial reviews deprived its community of important information about the effectiveness of any drug and alcohol programs that may have been in place during the review period. For these reasons, CIAHT is advised that its remedial actions cannot and do not diminish the seriousness of these violations, nor do they eliminate the possibility that the Department will impose an adverse administrative and/or require additional corrective actions as a result.



Finally, the Department strongly recommends that CIAHT re-examine its drug and alcohol program policies and procedures on an annual basis to ensure that they continue to reflect current institutional practices and are compliant with Federal requirements. Please be further advised that the Department may request information on a periodic basis to test the effectiveness of CIAHT's new *DFSCA* policies and procedures.

**Finding 3: Crime Awareness Requirements Not Met – Campus Security Policies Inadequate**

**Citation Summary:** *The Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act (the Clery Act) and the Department's regulations require that all institutions that receive Title IV, HEA funds must, by October 1<sup>st</sup> of each year, publish and distribute to its current students and employees through appropriate publications and mailing, a comprehensive Annual Security Report (ASR) that contains, at a minimum, all of the statistical and policy elements described in 34 C.F.R. §668.46(b).*

*The ASR must be prepared and actively distributed as a single document. Acceptable means of delivery include U.S. Mail, hand delivery, or campus mail distribution to the individual or posting on the institution's website. If an institution chooses to distribute its report by posting to an internet or intranet site, the institution must, by October 1 of each year, distribute a notice to all students and employees that includes a statement of the report's availability and its exact electronic address, a description of its contents, as well as an advisement that a paper copy will be provided upon request. 34 C.F.R. §668.41(e)(1). The Department's regulations also require participating institutions to provide a notice to all prospective students and employees that includes a statement about the ASR's availability, its contents, and its exact electronic address if posted to a website. This notice must also advise interested parties of their right to request a paper copy of the ASR and to have it furnished upon request. 34 C.F.R. §668.41(e)(4).*

*The Clery Act and the Department's regulations require institutions to include statistics for incidents of crimes reported during the three most recent calendar years. The covered categories include criminal homicide (murder and non-negligent manslaughter), forcible and non-forcible sex offenses, robbery, aggravated assaults, burglary, motor vehicle theft, and arson. Statistics for certain hate crimes as well as arrest and disciplinary referral statistics for violations of certain laws pertaining to illegal drugs, illegal usage of controlled substances, liquor, and weapons also must be disclosed in the ASR. These crime statistics must be published for the following geographical categories: 1) on campus; 2) on-campus student residential facilities; 3) certain non-campus buildings and property; and, 4) certain adjacent and accessible public property. 34 C.F.R. §668.46(c)(1). When applicable, an institution must also compile and publish crime statistic disclosures for each of its campuses. 34 C.F.R. §668.41(e)(4).*

*Several policy statements must be included in the ASR. These disclosures are intended to inform the campus community about the institution's security policies, procedures, and the availability of programs and resources as well as channels for victims of crime to seek recourse. In general, these policies include topics such as the law enforcement authority and practices of campus police and security forces, incident reporting procedures for students and employees, and*



*policies that govern the preparation of the report itself. Institutions are required to disclose alcohol and drug policies and educational programs, as well as policies pertaining to sexual assault education, prevention, and adjudication. Institutions must also provide detailed policies of the issuance of timely warnings, emergency notifications, and evacuation procedures. All required statistics and policies must be included in a single comprehensive document, known as an ASR. With the exception of certain drug and alcohol program information, cross-referencing to other publications is not sufficient to meet the publication and distribution requirements of the Act. §485(f) of the HEA; 34 C.F.R. §668.46(b).*

*Finally, each institution must also submit its crime statistics to the Department for inclusion in the Office of Postsecondary Education's (OPE) "Campus Safety and Security Data Analysis Cutting Tool." 34 C.F.R. §668.41(e)(5).*

**Noncompliance Summary:** *CIAHT violated multiple provisions of the Clery Act. The most serious of these violations pertain to the institution's persistent failure to prepare and publish a materially complete ASR and the resultant failure to actively distribute such a report to all enrolled students and current employees. For the ASR's reviewed, CIAHT only provided a small narrative section in the school catalog (i.e., pages 6 and 78 of the 2015-2016 Delray Beach Institutional Catalog). This narrative did not satisfy the vast majority of the regulatory requirements of the Clery Act. The narrative did not include crime reporting statistics - students and employees were referred to The National Center for Education Statistics. The narrative was deficient on nearly all policy statements and distribution was limited to an email advising students and employees that an updated institutional catalog was available (no mention of an ASR). The Department's review indicates that this compliance failure has persisted since the Clery Act (and its forerunner, the Student-Right-To-Know and Campus Security Act of 1990) was enacted. As a result of this systemic failure, the Department finds that CIAHT has failed to ever publish an ASR and has failed to meet the ASR active distribution and notification requirements.*

*Failure to publish an accurate and complete ASR and to actively distribute it to current students and employees in accordance with federal regulations deprives the campus community of important security information.*

**Required Action Summary:** *As a result of this finding, CIAHT was required to review and revise its existing policies and procedures that govern the preparation, publication, and distribution of its ASR. The institution was also required to develop and implement new policies and procedures in order to ensure that these violations do not recur, and that going forward, all campus security operations are carried out in accordance with the Clery Act.*

*Using its new and revised policies and procedures as a guide, CIAHT was required to prepare and publish a 2015 ASR that includes all of the statistical disclosures and policy, procedure and programmatic information required under 34 C.F.R. §668.46(b). Once the ASR was evaluated by the Department for accuracy and completeness, CIAHT was required to actively distribute the ASR to all current students and employees in accordance with 34 C.F.R. §668.41(e). Finally, CIAHT was required to provide documentation to the Department evidencing the distribution as well as a statement of certification attesting to the fact that the materials were distributed in*



*accordance with the Clery Act. This certification must also affirm that the CIAHT understands its Clery Act obligations, and that it has taken all necessary actions to ensure that this violation does not recur.*

*In addition, CIAHT was required to provide a copy of an accurate and complete 2015 ASR. The Institute was required to submit a copy of the new and revised policies and procedures as part of its response to the Program Review Report. The ASR was required to contain all of the statistical, policy, procedure and programmatic disclosures required under 34 C.F.R. §668.46(b). In addition, CIAHT was required to provide documentation to the Department evidencing the distribution along with a certification statement attesting to the fact that the materials were distributed in accordance with the Clery Act C.F.R. §668.41(e). This certification must also affirm that the institution understands its Clery Act obligations and that it has taken all necessary corrective actions to ensure that these violations do not recur. Furthermore, CIAHT was required to reevaluate, and revise all aspects of its Sex Offense Policy and Procedure requirement to ensure adequate comprehension.*

*As noted above, the exceptions identified in this finding constitute serious violations of the Clery Act that by their nature cannot be cured. CIAHT was given an opportunity to bring its campus security operations into compliance with the Clery Act as required by its PPA. However, CIAHT is advised that these remedial measures cannot and do not diminish the seriousness of these violations, nor do they eliminate the possibility that the Department will impose an adverse administrative action and/or require additional corrective measures as a result.*

**CIAHT's Response:** In its official response, CIAHT management concurred with the finding and stated that the Institute has reviewed and revised its policies and procedures regarding the production and distribution of the ASR to ensure that all aspects of the process are carried out in accordance with the *Clery Act*. Per the response, CIAHT did produce an accurate and complete 2015 ASR and that this report was actively distributed to required recipients on July 15, 2016.

In addition, CIAHT officials stated that existing policies and procedures were reviewed and revised. CIAHT further asserted that new internal guidance was developed that outline how required disclosure information will be developed and collected for inclusion in future ASRs. CIAHT also stated that the time line established by this new policy will help to ensure the timely collection and distribution of all information and purports to establish an audit trail to document the Institute's compliance efforts. Finally, CIAHT's response represented that the Institute is committed to campus safety and took several steps to improve its Clery compliance with one occurring prior to the Department's visit.

**Final Determination:** Finding 3 cited CIAHT for multiple violations of the *Clery Act*, as outlined in the Noncompliance section above. Specifically, the review team found that the Institute did not produce a complete 2015 ASR. Very limited information about campus safety matters appeared on two pages of the Institute's catalog. The review team noted that no crime statistics were included in this document. Instead, interested parties were advised to retrieve this information from one of the Department's consumer information websites. As a result of these violations, CIAHT was required to create its ASR and produce and distribute an accurate and



complete annual report. In its response, the Institute concurred with the finding and described its initial remedial actions. CIAHT also submitted documents in support of its claims.

The Department carefully reviewed all available documentation including, the Institute's response and supporting documents. Based on that review and CIAHT's admissions, the violations identified in the initial finding are sustained. The Department has also determined that CIAHT's remedial action plan meets minimum requirements. For these reasons, the Department has accepted CIAHT's response and considers this finding to be closed for the purposes of this program review. Nevertheless, the officials and directors of CIAHT are put on notice that they must take all additional actions that may be necessary to address the deficiencies and weaknesses identified by the Department as well as those that were detected during the preparation of the response to this report and as may otherwise be needed to ensure that these violations do not recur.

CIAHT is once again reminded that the exceptions identified above constitute serious violations of the *Clery Act* that by their nature cannot be cured. There is no way to truly "correct" violations of this type once they occur. The requirement to develop and implement a comprehensive public safety and crime prevention program and to publish and distribute an accurate and complete ASR containing accurate and complete campus crime statistics and campus safety policies and procedures are fundamental goals of the *Clery Act*. CIAHT asserted that it has taken adequate remedial action and is now in compliance with the *Clery Act* as required by its PPA. Nevertheless, CIAHT is advised that its remedial actions cannot and do not diminish the seriousness of these violations nor do they eliminate the possibility that the Department will impose an adverse administrative action and/or require additional corrective actions as a result.

Given the consequences of a serious compliance failure, the Department strongly recommends that CIAHT re-examine its campus safety and general Title IV policies and procedures on an annual basis to ensure that they continue to reflect current institutional practices and are compliant with Federal regulations. CIAHT officials are encouraged to consult the Department's "Handbook for Campus Safety and Security Reporting" (2016) as a reference guide on *Clery Act* compliance. The Handbook is online at: [www2.ed.gov/admins/lead/safety/handbook.pdf](http://www2.ed.gov/admins/lead/safety/handbook.pdf). The Department also provides a number of other *Clery Act* training resources. Institute officials can access these materials at: [www2.ed.gov/admins/lead/safety/campus.html](http://www2.ed.gov/admins/lead/safety/campus.html). The regulations governing the *Clery Act* can be found at 34 C.F.R. §§ 668.14, 668.41, 668.46, and 668.49.

Finally, CIAHT is specifically reminded that Section 304 of the Violence Against Women Reauthorization Act of 2013 (VAWA) amended the *Clery Act* to require institutions to compile and disclose statistics for incidents of domestic violence, dating violence, sexual assault, and stalking and to include certain policies, procedures, and programs regarding the prevention of sex crimes in their ASRs. Given the findings in this report, the Institute must take immediate action to get into compliance with this and all other requirements of the *Clery Act*. The Department issued Final Rules on the VAWA amendments to the *Clery Act* on October 20, 2014 and therefore, these regulations went into effect on July 1, 2015, per the Department's Master

Calendar. CIAHT officials may access the text of the Fine Rule at:  
<http://ifap.ed.gov/fregisters/attachments/FR102014FinalRuleViolenceAgainstWomenAct.pdf>**D.**

## **SUMMARY OF LIABILITIES**

The total liabilities by Finding and Title IV program are as follows:

### **Finding 1**

Pell	Subsidized Direct Loan	Unsubsidized Direct Loan	Cost of Funds by Program
\$2,280.53	\$1,633	\$5,954	\$18.62 – Pell \$16 – Subsidized Direct Loan \$66 – Unsubsidized Direct Loan

**Total: \$9,968**

## **E. PAYMENT INSTRUCTIONS**

### **1. General Instructions**

CIAHT owes to the Department \$9,968. Payment must be made by forwarding a check made payable to the “U.S. Department of Education” to the following address within 45 days of the date of this letter:

U.S. Department of Education  
P.O. Box 979026  
St. Louis, MO 63197-9000

Remit checks only. Do not send correspondence to this address.

If the check is sent special delivery (signature/receipt required), the check must be sent to the following address:

U.S. Bank  
1005 Convention Plaza  
St. Louis, MO 63101  
Attn: Govt. Lockbox Tram MO-SL-C2GL  
Re: For Dept. of Ed. 979026  
***Payment must be made via check***

***Payment must be made via check and sent to the above Post Office Box. Payment and/or adjustments made via G5 will not be accepted as payment of this liability. Instead, the school***



***must first make any required adjustments in COD as required by the applicable finding(s) and Section II – Instructions by Title IV, HEA Program (below), remit payment, and upon receipt of payment the Department will apply the funds to the appropriate G5 award (if necessary).***

The following identification data must be provided with the payment:

Amount: \$9,968  
TIN: 274217798  
PRCN: 201620429246  
DUNS: 966883162

If you have any questions regarding interest accruals or payment credits, you may telephone 202-245-8080 and ask to speak to your institution's account representative.

If full payment cannot be made within 45 days of the date of this letter, contact the Debt Management Group at (202) 245-8080 to apply for a payment plan. Interest charges and other conditions apply. Written request may be sent to:

U.S. Department of Education  
OCFO Financial Management Operations  
Debt and Payment Management Group  
550 12<sup>th</sup> Street, SW, Room 6136  
Washington, DC 20202-4661

## **2. COD Adjustments for Closed Award Years**

The disbursement record (Pell and Direct Loan) for each student identified in Finding 1 must be adjusted in the Common Origination and Disbursement (COD) system based on the recalculated amount (principal) identified in the applicable Finding and the Appendices identified below.

Adjustments in COD must be completed prior to remitting payment to the Department.

**Payment cannot be accepted via G5. Once the Department receives payment via FEDWIRE, the Department will apply the principal payment to the applicable G5 award. Interest will be applied to the general program account.**

A copy of the adjustment to each student's COD record must be sent to Jon Finkelstein **within 45 days of the date of this FPRD.**

Finding	Award Year	Program	Amount Principal	Student Level Appendix
1	2014-2015	Pell	\$1339.89	D
1	2015-2016	Pell	\$ 940.64	D
1	2013-2014	Direct Loan	\$2,571	D
1	2014-2015	Direct Loan	\$5,016	D

#### **F. RIGHT TO OFFSET AND RIGHT OF APPEAL**

If within forty-five days of the date of this letter, your institution has neither made payment in accordance with these instructions nor entered into an arrangement to repay the liability under terms satisfactory to the U.S. Department of Education, the Department intends to collect the amount due and payable by administrative offset against payments due to your organization from the Federal Government. Your institution may object to the collection by offset only by challenging the existence or amount of the debt.

Your institution makes this challenge by timely appealing this determination under the procedures described in the "Appeal Procedures" section of the cover letter which accompanies this FPRD. The Department will use those procedures to consider any objection to offset. No separate appeal opportunity will be provided. If a timely appeal is filed, the Department will defer offset until completion of the appeal, unless the Department determines that offset is necessary as provided in 34 C.F.R. § 30.28. This debt may also be referred to the Department of the Treasury for further action as authorized by the Debt Collection Improvement Act of 1996.