



April 8, 2015

Dr. Guthrie Veech, President
St. Louis Christian College
1360 Grandview Drive
Florissant, MO 63033-6499

Shipment via United Parcel Service
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RE: Final Program Review Determination
OPE ID: 01258000
PRCN: 201340728377

Dear Dr. Veech:

The U.S. Department of Education's (Department) School Participation Division – Kansas City issued a program review report on November 4, 2013 covering St. Louis Christian College's (SLC), 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 2012-2013 and 2013-2014 award years. SLC's final response was received on November 3, 2014. A copy of the program review report (and related attachments) and SLC's response are attached. Any supporting documentation submitted with the response is being retained by the Department and is available for inspection by SLC 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 notify SLC of the Department's final determinations and to notify SLC of a possible adverse action. Due to the serious nature of Findings 1, 2 and 3, this FPRD is being referred to the Department's Administrative Actions and Appeals Service Group (AAASG) for its consideration of possible adverse administrative action pursuant to 34 C.F.R. § 668, Subpart G. Such action may include a fine, or the limitation, suspension or termination of the eligibility of the institution.

This FPRD contains one or more findings regarding SLC's failure to comply with the requirements of the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act (*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, 668.46, and 668.49*. Because *Clery Act* findings do not result in financial liabilities, such findings may not be appealed. If an adverse

administrative action is initiated, additional information about SLC's appeal rights will be provided under separate cover.

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 program review 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 the report's Appendices.

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. SLC has provided assurances that the appropriate corrective actions have been taken to resolve and prevent future occurrences of all findings. If the institution has any questions regarding this letter, please contact Mr. Rick Moore at 816-268-0421 or via email at richard.moore@ed.gov.

Sincerely,



Ralph A. LoBosco
Division Director

Enclosure: Protection of Personally Identifiable Information
 Final Program Review Determination
 Program Review Report
 SLC's Response

cc: Chris Cable, Dean of Students
 Cathi Wilhoit, Financial Aid Director
 Missouri Coordinating Board for Higher Education
 Association for Biblical Higher Education

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, flash drive, 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



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St. Louis Christian College

**OPE ID: 01258000
PRCN 201340728377**

**Prepared by:
U.S. Department of Education
Federal Student Aid
School Participation Division – Kansas City**

Final Program Review Determination

April 8, 2015

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PRCN: 201340728377
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A. Institutional Information

St. Louis Christian College
1360 Grandview Drive
Florissant, MO 63033-6499

Type: Private, Non-profit

Highest Level of Offering: Bachelor's Degree, Four year

Accrediting Agency: Association for Biblical Higher Education

Current Student Enrollment: 311 for 2012-2013

% of Students Receiving Title IV: 73.9%

Title IV Participation (Source: G5, PEPS, Institutional Disbursement Records)

	<u>2011-2012</u>
Federal Pell Grant	\$746,448.00
William D. Ford Federal Direct Loan	\$1,794,870.00
Federal Supplement Education Opportunity Grant (FSEOG)	\$18,391.00
Federal Work Study	\$15,264.00

Default Rate FFEL/DL:	2010	10.0%
	2009	9.7%
	2008	7.2%

B. Scope of Review

The U.S. Department of Education (the Department) conducted a program review at St. Louis Christian College (SLC) from August 26th, 2013 to August 29th, 2013. The review was conducted by Rick Moore, Bridget Johnston and Holly Wolfe-Walkenbach.

The focus of the review was to determine SLC's compliance with the statutes and federal regulations as they pertain to the institution's administration of Title IV, HEA programs. The review consisted of, but was not limited to, an examination of SLC'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 2012-2013 and 2013-2014 (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. The Program Review report appendix lists the names and partial social security numbers 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 SLC'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 SLC 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

SLC has taken the corrective actions necessary to resolve findings 4, 5, 6, 7, 8 and 9 of the program review report. Therefore, these findings may be considered closed.

Resolved Finding with Comments

The following program review findings have been resolved by the institution and may be considered closed. These findings are included here solely for the purpose of discussing resolution of the finding.

Finding 1: Crime Awareness Requirements Not Met – Failure to Publish and Distribute an Annual Security Report/Multiple Violations

Citation Summary: The Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act (Clery Act) and the Department's regulations require that all institutions that receive Title IV, HEA funds must, by October 1 of each year, publish and distribute to its current students and employees, a comprehensive Annual Security Report (ASR) that contains, at a minimum, all of the statistical and policy elements enumerated in 34 C.F.R. §668.46(b). 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. §485(f) of the HEA; 34 C.F.R. §668.46(b).

The ASR must be published and actively distributed as a single document. Acceptable means of delivery include regular 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). These regulations also require institutions to provide a notice containing this information to all prospective students and employees. 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).

An institution's ASR must 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 hates 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).

The ASR also must include several policy statements. 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 ASR itself. Institutions are also required to disclose alcohol and drug policies and educational programs. Policies pertaining to sexual assault education, prevention, and adjudication must also be disclosed. Institutions also must provide detailed policies of the issuance of timely warnings, emergency notifications, and evacuation procedures. As noted above, all required statistics and policies must be included in a single comprehensive document.

Each institution must also submit its crime statistics to the Secretary for inclusion in the Department's "Campus Safety and Security Data Analysis Cutting Tool." 34 C.F.R. §668.41(e)(5).

Noncompliance Summary: *SLC violated multiple provisions of the Clery Act's campus safety requirements. Specifically, the College failed to prepare and publish a materially-complete ASR and distribute it to all current students and employees in the required manner.*

Department officials were able to confirm that SLC did in fact develop some of the required campus safety policies and procedures and also directed students and staff to the crime statistics submitted to the Department, as required by the Clery Act; however, this material was never incorporated into a single publication containing all of the campus crime statistical data and policy disclosures required by 34 C.F.R. §668.46(b). The ASR distribution violation logically follows from SLC's persistent failure to publish an ASR as required by the Clery Act and the institution's Program Participation Agreement (PPA). In fact, College officials were unable to provide any documentation or even verbal assurances that the institution had ever actively distributed its ASRs to students and employees in the required manner. Moreover, SLC also failed to actively notify prospective students and employees about the availability of ASR as required by the Clery Act, thereby resulting in an additional violation.

Taken together, the violations have caused the Department to find that SLC has systemically failed to develop and implement a Clery Act-compliant campus safety program and that such failures have persisted since the Clery Act (and its forerunner, the Student-Right-To-Know and Campus Security Act of 1990) was enacted.

Required Action Summary: *As a result of the above violations, SLC was required to develop and implement new policies and procedures that will govern the preparation, publication, and distribution of a modified 2013 ASR and all future reports to ensure that all facets of the process are carried out in a manner that meets Federal regulations. The procedures were required to specially articulate how prospective students and employees will be notified of the report's availability. Using its new policies as a guide, SLC was required to prepare and publish an accurate and complete a modified 2013 ASR (in draft form) that included all of the statistical disclosures and policy, procedure and programmatic information required under 34 C.F.R. §668.46(b). A copy of the institution's new policies and procedures and its draft ASR were required to accompany SLC's response to the program review report. Once the new ASR is evaluated by the review team for accuracy and completeness, SLC was required to actively distribute it to all current students and employees in accordance with 34 C.F.R. §668.41(e)(1).*

Finally, upon review of the draft ASR, SLC 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 SLC understands its Clery Act obligations and that it will take all necessary corrective actions to ensure that the violation does not recur.

SLC's Response: In its response, SLC concurred with the finding and stated that remedial action was taken as directed in the program review report. In support of its claims, SLC submitted copies of a draft 2012 ASR that was never distributed and its initial 2013 ASR. In addition, the College submitted copies of its new and revised internal policies and procedures regarding campus safety operations and *Clery Act* compliance.

Final Determination: Finding 1 of the program review report cited SLC for multiple *Clery Act* violations. Specifically, SLC did not produce and distribute complete 2011 and 2012 ASRs. Department officials were able to confirm that SLC did in fact develop some of the required campus safety policies and procedures and also directed students and staff to the crime statistics submitted to the Department, as required by the *Clery Act*; however, this material was never incorporated into a single publication containing all of the campus crime statistical data and policy disclosures required by 34 C.F.R. §668.46(b). As a result of this failure, the College was unable to actively distribute such a report to enrolled students and current employees or actively notify prospective students and employees of its availability. These violations were identified during a site visit that

began on August 26, 2013. At that time, SLC's 2013 ASR was not yet due and was not available. The 2013 report was issued several weeks later and was examined by the review team in advance of issuing the program review report. The Department's report was issued on November 4, 2013. The review team identified several omissions and other deficiencies. As a result, the "required action" section of the finding directed the College to revise and enhance the contents of the report and produce a modified 2013 ASR. The SLC also was required to review and revise its internal policies and procedures related to campus safety and *Clery Act* compliance and submit the draft report and its revised internal guidance to the Department for review. In its response, the College concurred with the finding, stated that remedial action was taken, and submitted documents in support of its claims.

The Department carefully reviewed all available information including SLC's initial response and its draft 2012 ASR and its initial and modified 2013 ASRs. Based on that review, the Department has determined that SLC did not produce a 2012 ASR and therefore could not distribute this required report to enrolled students and current employees. As such, the violations identified in the initial finding are sustained. The Department also determined that SLC continued to violate the *Clery Act* throughout 2013 as a result of its failure to produce an accurate and complete 2013 ASR. Also, as part of the Department's ongoing efforts to work with the College, the review team reached out to institutional officials again in November 2014 to assess SLC's progress on remedial actions as reflected in its 2014 ASR. While the review team's analysis of the 2014 ASRs evidenced some improvements, significant *Clery Act* deficiencies were identified. Specifically, SLC failed to include the following required elements of a compliant sexual assault awareness, prevention, and response program in the 2014 ASR:

- Procedures students should follow if a sex offense occurs, including procedures concerning who should be contacted, the importance of preserving evidence for the proof of a criminal offense, and to whom the alleged offense should be reported;
- A clear statement that institutional personnel will assist the student in notifying these authorities, if the student requests in notifying these authorities, if the student requests the assistance of these personnel;
- A clear statement to students that the institution will change a victim's academic situation after an alleged sex offense and of the options for those changes, if those changes are requested by the victim and are reasonably available;
- A clear statement that the accuser and the accused are entitled to the same opportunities to have other present during a disciplinary proceeding;
- A clear statement that both the accuser and the accused must be informed of the outcome of any institutional disciplinary proceeding brought alleging a sex offense
- Information about sanctions that may be imposed following a final determination of an institutional disciplinary proceeding regarding rape, acquaintance rape, or other forcible or non-forcible sex offenses;

- A statement advising where law enforcement agency information provided by a State under section 170101(j) of the Violent Crime Control and Law Enforcement Act of 1994 (42 U.S.C. §14071(j)), concerning registered sex offenders may be obtained, such as the law enforcement office of the institution, a local law enforcement agency with jurisdiction for the campus, or a computer network address.
- A statement of policy regarding missing student notification procedures; and,
- SLC's emergency evacuation and response procedures. The 2014 ASR advised interested parties to see another publication for information that addressed some of the *Clery Act* requirements in this area. An institution must include information in the ASR that is specifically required by Federal regulations and may then advise readers to see other publications for additional information on its emergency management program.

As noted above, the Kansas City School Participation Division has made a concerted, good-faith effort to assist SLC toward full compliance with the *Clery Act*; however, as indicated by the persistent violations noted above, these efforts were not successful. For these reasons, the Department has determined that this finding is now closed for purposes of this program review and is referred to the Department's Clery Act Compliance Team (CACT). The CACT will oversee the College's development and implementation of its final remedial actions regarding this finding. As part of that referral, the College is directed to take immediate action to finally and fully address the noted deficiencies and submit credible evidence to substantiate its claims of remedial action.

Specifically, upon receipt of this FPRD, SLC must immediately conduct a full review and then make all necessary revisions to the 2014 ASR to specifically address the ongoing violations outlined above. Once these deficiencies are corrected, the College must actively distribute the revised 2014 ASR to all enrolled students and current employees. This distribution must be completed within 30 days of SLC's receipt of this FPRD. It is the Department's understanding that SLC has chosen to produce its ASR and its annual fire safety report (AFSR) as a single document. The College is reminded that if it elects to continue this practice, all required statistical and policy disclosures must be included therein and the cover page must clearly indicate that both reports are included in the single publication. Within 35 days of receipt of this FPRD, the College must submit copies of the following: 1) the initial and revised 2013 and 2014 ASRs; 2) the initial and revised 2013 and 2014 AFSRs; and 3) credible evidence showing that each reports of these reports was actively distributed to each mandatory recipient. Suitable evidence of distribution may include a copy of an e-mail used to transmit the report or other similar documentation. These materials must be submitted via electronic mail to Mr. Rick Moore at richard.moore@ed.gov and to the CACT at clery@ed.gov.

SLC's submission must reference the Program Review Control Number noted on the cover letter in the subject line of its e-mail submission. If any of the requested records were not produced or do not exist, SLC officials must clearly communicate that fact to

the Department in writing via electronic mail. In this context, SLC officials are advised that no new documents are to be created at this time for the purpose of demonstrating compliance with any *Clery Act* requirement for past periods (except for the required revisions to the 2014 ASR/AFSR). The College is also advised that a failure to respond to this request for document production will result in a referral for the imposition of administrative actions in addition to any referrals that may be made to address the original violations identified in Findings 1 and 2 of the program review report.

Although this finding is now closed, SLC is 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” a violation of this type once it occurs. SLC was required to initiate all necessary remedial measures; however, the institution failed to do so, as required by the terms and conditions of its Program Participation Agreement (PPA). SLC’s failure to take adequate remedial action calls its ability and/or willingness to properly administer the Title IV, FSA Programs into serious question. By way of the aforementioned referral, the Department is renewing its order that SLC finally take the necessary steps to demonstrate full compliance with the *Clery Act*. Notwithstanding this requirement, the institution is advised that remedial actions including those undertaken pursuant to the Department’s instructions above 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.

In light of the serious consequences associated with compliance failures of this type, the Department strongly recommends that SLC re-examine its campus security 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. As part of these periodic reviews, SLC officials are encouraged to consult the Department’s “Handbook for Campus Safety and Security Reporting” (2011) as a reference guide for *Clery Act* compliance. The Handbook is online at:

www2.ed.gov/admins/lead/safety/handbook.pdf.

The Department also provides a number of other *Clery Act* training resources. SLC can access these materials at:

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, SLC management is also 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. VAWA also requires institutions to include new policy, procedural, and programmatic disclosures regarding sexual assault prevention and response in their ASRs. Institutions are already obligated to make a documented good-faith effort to comply with the statutory requirements of VAWA and were required to include all new required content in the 2014 ASR. The Department issued Final Rules on the VAWA amendments on October 20, 2014 and therefore, these regulations will go into effect on July 1, 2015, per the Department's Master Calendar. College officials may access the text of the Final Rule at:

<http://ifap.ed.gov/fregisters/attachments/FR102014FinalRuleViolenceAgainstWomenAct.pdf>.

Finding 2: Fire Safety Requirements Not Met – Failure to Publish and Distribute an Annual Fire Safety Report/Multiple Violations

Citation: As of October 1, 2010, the Clery Act and the Department's regulations require that all institutions that receive Title IV, HEA funds and maintain an on-campus student housing facility must, by October 1 of each year, prepare, publish and distribute to its current students and employees through appropriate publications and mailings, an Annual Fire Safety Report (AFSR) that contains, at a minimum, all of the statistical and policy elements described in 34 C.F.R. §668.49(b). These institutions must disclose fire statistics for each on-campus student residential facility for the three most-recent calendar years. An institution's statistics must accurately and completely identify the number of on-campus fires and the cause of each fire, the number of persons who sustained fire-related injuries that resulted in treatment at a medical facility (including on-campus health centers), the number of fire-related deaths, and the dollar value of property damage caused by such fires. 34 C.F.R. §668.49(c).

In addition, the AFSR must include several fire safety information disclosures covering topics such as the type(s) of fire safety systems that are used in each student housing facility, the number of fire drills that were conducted during the previous calendar year, any institutional policies, procedures, and programs regarding: 1) the use and/or possession of portable electrical appliances; 2) smoking and the use/presence of open flames in student housing facilities; 3) evacuation procedures to be followed in the case of a fire; 4) fire safety education and training programs; 5) the institutional official(s) and departments to whom students and employees should report the occurrence of fires so that those incidents can be included in the institution's annual fire statistics; and, 6) any plans for future improvements to the institution's fire safety program. 34 C.F.R. §668.49(b).

evaluated by the review team for accuracy and completeness, SLC will be required actively distribute it to all current students and employees in accordance with 34 C.F.R. §668.41(e)(1). Finally, SLC will be 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 SLC understands its Clery Act fire safety obligations and that it will take all necessary corrective actions to ensure that this violation does not recur.

SLC's Response: In its response, SLC concurred with the finding and stated that remedial action was taken as directed in the program review report. In support of its claims, SLC submitted copies of a draft 2012 ASSR that was never distributed and its initial 2013 ASR/AFSR. In addition, the College submitted copies of its new and revised internal policies and procedures regarding fire safety operations. SLC also represented that the ASR and AFSR will be produced as a single publication that will contain all required campus crime and fire safety disclosures.

Final Determination: Finding 2 of the program review report cited SLC for not producing an AFSR for 2011 and 2012 as well as for its corresponding failure to distribute such reports to students and employees. The Department notes that SLC did submit fire statistics to the Department and merely directed students and parents to the Department's online database for information. As a result of these violations, SLC was required to review and revise its internal policies and procedures related to *Clery Act* compliance and develop and implement new policies and procedures to ensure that all future AFSRs are produced and distributed, as required. Then using its new policies and procedures as a guide, the College was required to produce an accurate and complete 2013 AFSR. In its response, the College concurred with the finding, stated that remedial action was taken, and submitted documents in support of its claims.

The Department carefully reviewed all available documentation including SLC's response and supporting documents. The review team's examination showed that the identified violations were, for the most part, satisfactorily addressed by the College's inaugural AFSR and new internal policies and procedures. Based on that review and SLC's admission of noncompliance, the violations identified in the finding are sustained, namely that SLC did not produce a 2011 or 2012 AFSR. The Department also determined that SLC's remedial action plan met minimum requirements. For these reasons, the Department has accepted SLC's response and considers this finding to be closed for the purposes of this program review. For the record, the Department takes notice of SLC's representation that the College was not aware that it had to comply with the fire safety requirement prior to the program review. Nevertheless, SLC is advised that it must continue to develop its fire safety program and must also take any additional action that may be needed to fully address the deficiencies and weaknesses identified by the Department as well as any deficiencies that were detected during the preparation of

the SLC's response to the Department's report and as may otherwise be needed to ensure that these violations do not recur. In this regard, the Department calls attention to the fact that the 2013 AFSR did not include all required disclosures. For example, the report did not contain any information about fire or other safety drills. To address the Department's ongoing concerns, SLC must produce the records requested (or fully explain their absence) as part of the referral to the CACT described under Finding 1.

Although the finding is now closed, SLC is 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 fire safety program and to publish and distribute an AFSR containing accurate and complete fire statistics, policies and procedures are fundamental goals of the *Clery Act*. SLC was required to initiate remedial measures and as a result of its efforts do far, has begun to address the conditions that led to these violations. SLC has stated that it has brought its overall campus fire safety program into compliance with the *Clery Act* as required by its PPA. Nevertheless, SLC is advised that its remedial actions, whether already completed or planned for the future, 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.

Finding 3: Required Drug and Alcohol Abuse Prevention Program Requirements Not Met - Multiple Violations

Citation: 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: *SLC violated multiple provisions of the DFSCA and the Department's Part 86 regulations. The College failed to develop and implement a comprehensive DAAPP.*

Specifically, SLC's DAAPP does not contain the following required component:

1. *A fully developed description of any drug or alcohol counseling, treatment, or rehabilitation or re-entry programs that are available to students and employees.*

In addition, SLC was also unable to provide any assurances or produce any documentation that the DAAAP was ever distributed on an annual basis to all employees and all students enrolled for academic credit.

Regarding the distribution aspects of this violation, the College chose to publish its DAAPP disclosure information in its "Guide to Student Life." The College asserted that all perspective students and financial aid applicants are supposed to receive a "Financial Aid Information" brochure that directs students to the Guide for DAAPP information; however, College officials were unable to verify that this undocumented policy and process is routinely followed and actually results in the required dissemination.

Furthermore, the College was unable to provide any evidence or assurances that the disclosure information had ever been actively distributed to students who did not apply for financial aid on an annual basis. Moreover, the College could not provide any evidence or assurances that the annual DAAPP information has ever been actively distributed to employees in any form. Taken together, these facts indicate a general failure on the part of SLC to comply with the annual DAAPP disclosure distribution requirement,

Finally, SLC failed to conduct a biennial review of the effectiveness of its DAAPP and of the consistency of sanctions imposed for violations of its disciplinary standards and codes of conduct and therefore, also failed to prepare a biennial review report of findings. In fact, the institution was unable to produce suitable records to show that a biennial review was ever conducted at SLC. Based on the violations outlined above, the Department finds that SLC has substantially failed to implement the DFSCA during its participation in the Title IV, FSA programs.

Required Action Summary: *SLC was required to take all necessary corrective actions to address the violations identified above and all others identified during the preparation of its response to this program review report. In addition, SLC must, at a minimum, take the following actions:*

- Develop and implement a substantive drug and alcohol abuse prevention program and publish a materially-complete DAPP disclosure that includes all of the required elements and summarizes the program. A copy of this draft document must accompany the College's response to this program review report;*
- Develop procedures for ensuring that the DAAPP disclosure is distributed to every current student who is enrolled for academic credit as well as every employee of SLC on an annual basis. SLC was required to submit a copy of its new and revised DAAPP policies with its response to this program review report. Once the new DAAPP disclosure is evaluated by the review team for accuracy and completeness, SLC will be required to actively distribute the document in the manner set forth in the "Citation" section above and its own policy. Once the new DAAPP disclosure is distributed, SLC will be 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 DFSCA. This certification must also affirm that SLC understands its DFSCA obligations and that it has taken all necessary corrective actions to ensure that these violations do not recur;*
- Conduct a biennial review to measure the effectiveness of its existing drug and alcohol programs and its new DAAPP. SLC 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 approved by the College's chief executive and/or its Board;

- *SLC must also submit copies of the two most-recent biennial review reports that the College has produced (if any) with its response to this program review report. If no such reports were ever produced, College officials must clearly state that fact. In this context, SLC officials are specifically advised that no new documents are to be created for the purpose of demonstrating compliance with the biennial review report requirement for past periods; and,*
- *SLC must establish policies and procedures to ensure that all subsequent biennial reviews are conducted in a timely manner and are fully documented and to take all other necessary action to ensure that this violation does not recur. A copy of these policies and procedures must accompany the College's submission of its biennial review report.*

SLC Response: In its response, SLC concurred with the finding and stated that remedial action was taken as directed in the program review report. In support of its claims, SLC submitted an updated DAAPP and its new annual disclosure. In addition, College officials represented that program materials were distributed to all students and staff in December 2013. Finally, SLC provided a plan that will govern the conduct of its first biennial review.

Final Determination: Finding 3 cited SLC for multiple violations of the *DFSCA* and 34 C.F.R. Part 86. Specifically, the review team found that SLC failed to include all required policy statements in its drug and alcohol abuse prevention program (DAAPP). Specifically, the program did not include any information about counseling or treatment options offered by SLC or that are available in the near-campus community. In addition, SLC failed to produce an annual disclosure that summarized the program and therefore, was unable to distribute such program materials, as required. Finally, SLC failed to conduct a biennial review of the DAAPP's effectiveness at any point prior to the on-site program 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 are communicated to all members of the campus community. As a result of these violations, SLC was required to enhance its DAAPP, produce and distribute an annual disclosure, and conduct a substantive biennial review as soon as initial program data was available. In its response, the College concurred with the finding, described the remedial actions taken in an attempt to address the violations, and submitted documents in support of its claims.

The Department carefully examined SLC's narrative response and supporting documentation. The review team's examination showed that the identified violations were, for the most part, satisfactorily addressed by the College's response and its revised DAAPP, new annual disclosure, new biennial review plan, and its new internal policies and procedures. Based on the Department's review and SLC's admission of noncompliance, the violations identified in the initial finding are sustained. The Department also determined that the College's remedial action plan meets minimum requirements. For these reasons, the Department has accepted the response and considers this finding to be closed for purposes of this program review. Notwithstanding this closure, the officials and directors of SLC are put on notice that the College must take all other action 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 the Department's report and as may otherwise be needed to ensure that these violations do not recur.

In this regard, SLC officials are reminded that the College must continue to develop its DAAPP and must immediately conduct a biennial review in accordance with its new policies and procedures. The Department is aware that SLC requires students to sign a pledge that they will not ingest illegal substances during their enrollment; however, the College must understand that it is still required to comply with these Federal regulations as a condition of its participation in the Title IV programs and that compliance with these requirements cannot be achieved merely through the execution of lifestyle covenants by students or employees.

Regarding the biennial review requirement, SLC's report of findings and recommendations must include specific information about the actual conduct of the review including details about the research methods used during the evaluation. The report also must identify the official(s) who conducted the review and address how the College analyzed whether or not its disciplinary standards and codes of conduct regarding drug use and alcohol abuse were enforced consistently. Care also must be taken to ensure that all findings and recommendations are supported by valid evidentiary data. Finally, the report must indicate that it was approved by the College's President and/or its board. SLC's review must be completed by May 15, 2015 and its report be submitted to the Department by June 1, 2015. These documents must be transmitted via electronic mail to Mr. Moore at richard.moore@ed.gov and to the CACT at clery@ed.gov.

Although this finding is now closed, SLC is specifically reminded that the exceptions identified above constitute serious and persistent 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. SLC asserted that it has taken adequate remedial actions and by doing so, has taken steps to finally comply with the *DFSCA* as required by its PPA. Notwithstanding the remedial efforts taken thus far, SLC officials must understand that compliance with the *DFSCA* is 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. *DFSCA* violations deprive students and employees of important information regarding the educational, financial, health, and legal consequences of alcohol abuse and illicit drug use and deprive institutions of important information about the effectiveness of any drug and alcohol policies or programs that may have been in place during the review period. For these reasons, SLC is advised that its 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 additional remedial measures as a result.

In light of the serious consequences associated with compliance failures of this type, the Department strongly recommends that SLC re-examine its DAAPP policies and procedures on at least an annual basis and revise them as needed to ensure that they continue to reflect current institutional policy and are in full compliance with the *DFSCA*. Please be advised that the Department may request information on a periodic basis to test the effectiveness of the College's new policies and procedures.