



February 28, 2023

Dr. Tonjua Williams  
President  
St. Petersburg College  
6021 142<sup>nd</sup> Avenue North  
Clearwater, FL 33760-3768

email: [williams.tonjua@spcollege.edu](mailto:williams.tonjua@spcollege.edu)

Re: Final Program Review Determination  
OPE ID: 00152800  
PRCN: 202230430540

Dear Dr. Williams:

The U.S. Department of Education's (Department's) Office of Federal Student Aid issued a program review report on September 21, 2022, covering St. Petersburg College's (SPC's) 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 2020 – 2021 and 2021 – 2022 award years. SPC's final response was received on January 30, 2023. A copy of the program review report (and related attachments) and SPC's response are attached. Any supporting documentation submitted with the response is being retained by the Department and is available for inspection by SPC 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.

This FPRD contains one or more findings regarding SPC'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.

**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. In addition, Appendix C, Institution's Response, also contains PII. The appendices were sent securely via the COD Document Center.

**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 Meg McGinness by email at [margaret.mcginness@ed.gov](mailto:margaret.mcginness@ed.gov) or by phone at (202) 743-7988.

Sincerely,



Chris Miller  
Division Chief  
Atlanta School Participation and Financial Analysis Division

CM/mm

cc: Michael Bennett, Financial Aid Administrator, email: [bennett.michael@spcollege.edu](mailto:bennett.michael@spcollege.edu)  
Florida Department of Education, Division of Florida Colleges  
Southern Association of Colleges and Schools Commission on Colleges  
Department of Defense  
Department of Veterans Affairs  
Consumer Financial Protection Bureau

Prepared for

**St. Petersburg College**

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

**OPE ID 00152800**  
**PRCN 202230430540**

**Prepared by**  
**U.S. Department of Education**  
**Federal Student Aid**  
**Atlanta School Participation and Financial Analysis Division**

**Final Program Review Determination**  
**February 28, 2023**

61 Forsyth Street SW; Suite 18T40; Atlanta, GA 30303  
StudentAid.gov.

*P.L28.2.6.2023*

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**A. Institutional Information**

St. Petersburg College  
6021 142<sup>nd</sup> Avenue North  
Clearwater, FL 33760-3768

Type: Public

Highest Level of Offering: Bachelor's Degree

Accrediting Agency: Southern Association of Colleges and Schools Commission on Colleges

Current Student Enrollment: 24,543 (2021 – 2022)

% of Students Receiving Title IV, HEA funds: 72% (2021 – 2022)

Title IV, HEA Program Participation – PC Net School Funding Report

Federal Pell Grant Program (FPell):	<u>2020 – 2021</u> \$37,361,196
William D. Ford Federal Direct Loan Program (FDL):	\$38,031,284
Federal Supplemental Educational Opportunity Grant (FSEOG):	\$1,712,373
Federal Work-Study (FWS):	\$251,068

Default Rate FDL: 2019 – 3.4%  
2018 – 9.3%  
2017 – 11.5%

Default Rate Perkins: This institution does not participate in the Perkins Loan Program

## **B. Scope of Review**

The U.S. Department of Education (the Department) Office of Federal Student Aid conducted a program review at St. Petersburg College (SPC) from May 16, 2022 to June 2, 2022.

The focus of the review was to determine SPC's compliance with the statutes and regulations as they pertain to the institution's administration of the Federal student aid programs under Title IV of the Higher Education Act of 1965, as amended, U.S.C. §§ 1070 *et seq.* (Title IV programs). The review consisted of, but was not limited to, an examination of SPC's policies and procedures regarding institutional and student eligibility, individual student financial aid and academic files, attendance records, student account ledgers, and fiscal records.

The Department identified a sample of 30 files for review from the 2020 – 2021 and 2021 – 2022 award years. The Department randomly selected the files from a statistical sample of the total population receiving Title IV, HEA program funds for each award year. Appendix A lists the names and social security numbers of the students whose files were examined during the program review.

The Department issued its Program Review Report (PRR) on September 21, 2022. SPC submitted its first written response to the PRR on October 3, a subsequent response on October 27, 2022, and a final response regarding Finding #1 on January 30, 2023. All of the institution's responses are included in Appendix C.

### **Disclaimer:**

Although the review was thorough, it cannot be assumed to be all-inclusive. The absence of statements in the report concerning SPC'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 SPC of its obligation to comply with all of the statutory or regulatory provisions governing the Title IV, HEA programs.

## **C. Final Determinations**

### **Resolved Findings/Findings without Liabilities**

The Department reviewed and accepted SPC's response and the following findings were resolved:

#### **Finding #2 – Inaccurate Enrollment Reporting**

SPC has taken the necessary corrective action to resolve this finding. SPC has corrected the enrollment reporting for student #28 and updated its policies and procedures to ensure that all future enrollment reporting is accurate and timely. Therefore, this finding may be

considered closed. Appendix C contains SPC's written response related to this resolved finding.

**Finding #3: Federal Pell Grant (FPell) Underpayment and Overpayment**

SPC has taken the necessary corrective action to resolve this finding. SPC corrected the amount of FPell disbursed to student #18 and updated the information in the Common Origination and Disbursement (COD) system. SPC also determined that the remaining students cited for this finding were awarded correctly. Those remaining students were either enrolled in courses that they were administratively withdrawn from later in the semester or were enrolled in courses that did not count toward their programs and did not count toward any Title IV awards. SPC provided screenshots from its student information system to verify the remaining students cited in this finding were awarded correctly and provided its updated policies and procedures. Therefore, this finding may be considered closed. Appendix C contains SPC's written response related to this resolved finding.

**Finding #4: Return of Title IV Funds (R2T4) Calculation Error**

SPC has taken the necessary corrective action to resolve this finding. SPC provided a screenshot from its student information system showing that student #28 never started attendance in one course and the student's Pell award was reduced accordingly to a less-than-halftime payment. The R2T4 was calculated correctly, based on these changes. In addition, SPC provided copies of its updated policies and procedures for R2T4 calculations. Therefore, this finding may be considered closed. Appendix C contains SPC's written response related to this resolved finding.

**Finding #5: Coronavirus Indicator not Added to Qualifying Disbursements**

SPC has taken the necessary corrective action to resolve this finding. SPC added the Coronavirus indicator for student #28 to COD. In addition, SPC provided a copy of its revised policies and procedures regarding the application of the Coronavirus Indicator in COD. Therefore, this finding may be considered closed. Appendix C contains SPC's written response related to this resolved finding.

**Finding #6: Entrance and Exit Counseling Deficiencies**

SPC has taken the necessary corrective action to resolve this finding. SPC provided verification of entrance counseling for student #7 from a legacy system that was not available in the student's original file when it was examined during the program review. In addition, SPC attached proof to its response that its 3<sup>rd</sup> party servicer, Iontuition, contacted students #15, #20 and #30 and provided them with exit counseling materials. SPC also provided its updated entrance and exit counseling policies in response to the PRR. SPC will now increase the frequency of emails sent to students with loans who have withdrawn or graduated and will add an additional letter to those students who have not completed exit counseling within a certain timeframe after graduation or withdrawal. Therefore, this finding may be considered closed. Appendix C contains SPC's written response related to this resolved finding.

### **Campus Safety and Security Findings**

The following program review finding has been addressed by the institution and may be considered closed for purposes of the program review.

#### **Finding 1: Failure to Comply with Drug and Alcohol Abuse Prevention Program Requirements**

**Summary of Noncompliance:** 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. On an annual basis, each IHE must provide the following information in writing to all current students (enrolled for any type of academic credit except continuing education units) and all current employees:

- 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 on its property or as part of any of its activities; 34 CFR§86.100(1)
- A written description of the applicable legal sanctions imposed under federal, state, and local laws and ordinances for unlawful possession or distribution of illicit drugs and alcohol;34 CFR§86.100 (2)
- A description of the health risks associated with the use of illicit drugs and alcohol abuse; 34CFR§86.100(3)
- A description of any drug or alcohol counseling, treatment, and rehabilitation/re-entry programs that are available to students and employees; 34CFR§86.100 (4) and,
- A clear 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 sanction, up to and including expulsion or termination of employment and referral for prosecution, for violations of the standards of conduct. For the purposes of this section, please note that a disciplinary sanction may include the required completion of an appropriate treatment program. 34CFR§86.100(5).

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*. SPC failed to meet multiple requirements of the *DFSCA*. As part of the off-site program review, conducted May 16 – June 2, 2022, the review team requested a copy of SPC’s DAAPP and most recent biennial report. The review team identified these violations based on an analysis of SPC’s DAAPP as presented on the Students’ Rights/Health section of the institution’s website and through interviews conducted with institutional officials. While SPC’s DAAPP contains policies entitled, “Drug-free Workplace Procedure,” “Student Code of Conduct Disciplinary Procedures,” and “Community Resources for Alcohol and Substance Abuse Addiction and Recovery,” this information does not sufficiently demonstrate compliance with the *DFSCA*. Specifically, SPC’s DAAPP disclosure did not include:

- A description of the applicable legal sanctions under local, state, or federal law for the illegal possession or distribution of illicit drugs and/or alcohol; 34 CFR§86.100(2) and
- A description of the health risks associated with the use of illicit drugs and the abuse of alcohol; 34 CFR§86.100(3)

In addition, SPC failed to actively distribute an accurate and complete DAAPP to all of its employees and students enrolled for academic credit. While some drug and alcohol information was included in the institution’s online publications, a complete and accurate DAAPP was not actively distributed to students and employees.

Furthermore, SPC has also persistently failed to conduct a biennial review to: 1) assess the effectiveness of its DAAPP; 2) evaluate the consistency of sanctions imposed for violations of its disciplinary standards and codes of conduct related to drugs and alcohol; 3) identify areas requiring improvement or modification; and, 4) produce a report of biennial review findings. The Department’s review indicates that SPC has never fully complied 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 educational, disciplinary, health, and legal consequences of illegal drug use and alcohol abuse. Failure to comply with the

biennial review requirements also deprives the institution of important information about the effectiveness of its own drug and alcohol programs. Such failures may contribute to increased drug and alcohol abuse as well as an increase in drug and alcohol-related violent crime at SPC.

By failing to ever conduct a biennial review, and thereby failing to ever produce a biennial review report, SPC violated the biennial review requirements of the *DFSCA* and the Department's Part 86 General Administrative Regulations.

**Directives From PRR:** As a result of these violations, SPC was required to take all necessary corrective action to resolve each instance of noncompliance. At a minimum, SPC was required to:

- Develop and implement a comprehensive DAAPP that includes all of the required elements enumerated in the *DFSCA* and the Department's Part 86 regulations;
- Develop a policy that will ensure that the DAAPP disclosure is actively distributed on an annual basis to every student who is enrolled for academic credit and to all employees; and
- Develop policies and procedures to ensure that all future biennial reviews are substantive in nature, are conducted in a timely manner, and are fully documented.

Specifically, SPC was required to submit a copy of its new and revised policies and a draft copy of its DAAPP with its response to this PRR. SPC was also required to distribute the new DAAPP disclosure in the required manner and provide documentation evidencing the distribution as well as a certification statement attesting to the fact that the materials were distributed in accordance with the *DFSCA*. This certification statement must also affirm that the institution understands its *DFSCA* obligations and that it has taken all necessary corrective actions to ensure that these violations do not recur.

Furthermore, SPC was required to:

- Conduct a biennial review to evaluate the effectiveness of its existing drug and alcohol programs and its draft DAAPP, to identify necessary improvements, and to assess the consistency of sanctions imposed for violations of its disciplinary standards and codes of conduct;
- Prepare a detailed report of its findings;
- Incorporate the findings of this review into its DAAPP; and,

- Develop and implement policies and procedures that will ensure that each future biennial review of SPC's DAAPP is conducted in a timely manner and is well-documented.

The biennial review report must describe the research methods and data analysis tools used in the assessment. In addition, the report must identify the official(s) who conducted the review. Finally, the report must be approved by the institution's Chief Executive and/or its Board. SPC's persistent failure to conduct a biennial review necessitates that a review commence immediately.

As noted above, the exceptions identified in this finding constitute serious violations of the *DFSCA* that by their nature cannot be cured. SPC will be given an opportunity to develop and implement a comprehensive DAAPP and to conduct a substantive review of its existing drug and alcohol programs and an initial review of its new DAAPP and to otherwise bring operations into compliance with the *DFSCA* for the first time as required by its Program Participation Agreement (PPA). However, the institution 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.

The Department also strongly recommends that SPC re-examine its drug and alcohol prevention and general Title IV policies, procedures, and programs periodically and revise them as needed to ensure that they also continue to reflect current institutional policy and are in full compliance with Federal regulations. Please be advised that the Department may request information on a periodic basis to test the effectiveness of SPC's new DAAPP policies and procedures.

**Final Determination:** Finding #1 of this PRR cited SPC for multiple violations of the *DFSCA* and the Part 86 Regulations. Specifically, SPC failed to develop and implement a comprehensive DAAPP that addressed all required subject areas. In addition, SPC did not produce a DAAPP disclosure statement that summarized its program and as a result, was not able to actively distribute required program materials to enrolled students and current employees. During the review, SPC officials conceded that a DAAPP was not in place and annual disclosures were not distributed prior to the program review. Finally, the review team also confirmed that SPC persistently failed to conduct biennial reviews to regularly assess the effectiveness of its DAAPP and as a consequence, was also unable to produce the required report of findings, recommendations, and supporting documentation. During the review, SPC's staff admitted that no biennial reviews were conducted prior to the Department's 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, the institution was required to develop and implement a complete DAAPP and produce and distribute an annual disclosure. Then, SPC was required to conduct a substantive biennial review as soon as initial program data was available. In its response, SPC concurred with the finding, described the remedial actions taken so far, and submitted documents in support of its claims. Due to the challenges presented by the COVID-19 pandemic including staff changes, SPC was not able to complete its biennial review, but has begun collecting data and will continue to collect data through the Fall 2023 semester. SPC's biennial review team anticipates having enough data to complete its biennial review and report after the Fall 2023 semester. While this appears to be a long time for the production of the first Biennial Review, please keep in mind there will be no extension.

**SPC must complete the following by March 30, 2023:** 1). Distribute the DAAPP disclosure in accordance with Part 86 regulations and its new policy; 2). Provide documentation evidencing that distribution; and 3). Provide a statement of certification attesting to the fact that the materials were distributed as required. This certification is also required to affirm that SPC understands all of its *DFSCA* obligations and that it has taken all necessary corrective action to ensure that these violations do not reoccur.

The above documentation must be sent to Meg McGinness via email at [margaret.mcginness@ed.gov](mailto:margaret.mcginness@ed.gov)

**SPC's submission must reference its PRCN in the subject line of its email message. The institution is also advised that failure to respond to this supplemental request for document production will result in a referral for the imposition of administrative actions in addition to any such referral that may be made to address the original violations identified in Finding #1 in the PRR.**

The Department carefully examined all available information including SPC's narrative response and supporting documentation. Based on the Department's review and the institution's admission of noncompliance, each of the violations identified in the noncompliance section of the initial finding are sustained. The review team's examination also showed that the identified violations were, for the most part, satisfactorily addressed by SPC's new DAAPP, new annual disclosure, biennial review plan, and new internal policies and procedures. As such, the Department determined that SPC'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. Nevertheless, the officials and directors of SPC are advised that the institution 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 those that were detected during the preparation of SPC's response, and/or as may be needed to otherwise ensure that these violations do not recur.

In this regard, SPC is advised that it must continue to develop its DAAPP. SPC must also ensure that it distributes accurate and complete DAAPP materials to all students and employees in accordance with the Department's regulations and the institution's new procedures. SPC is also admonished to commence a substantive biennial review and to continuously refine its investigatory process.

Although this finding is now closed for the purposes of this program review, SPC is 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. SPC asserted that it has taken adequate remedial actions and is now in compliance with the *DFSCA* as required by its PPA. Nevertheless, SPC officials must understand that the Department considers compliance with the *DFSCA* to be essential to maintaining a safe and healthy learning environment. This is true for all institutions. 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 illicit drug use and alcohol abuse and may also deprive institutions of important information about the effectiveness of any drug and alcohol programs that may have been in place during the program review period. For these reasons, SPC is advised that its remedial measures cannot and do not diminish the seriousness of these violations nor do these actions eliminate the possibility that the Department will impose an adverse administrative action and/or additional remedial measures as a result.

Finally, the Department strongly recommends that SPC re-examine its drug and alcohol abuse preventions policies, procedures and programs 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 CC's new policies and procedures.

## **D. Appendices**

Appendix A: Student Sample

Appendix B: Program Review Report

Appendix C: Institution's Response

Appendices A and C contain personally identifiable information (PII) and have been uploaded in the Common Origination and Disbursement (COD) Document Center found at the COD Web Site: <https://cod.ed.gov>. Documents containing personally identifiable information (PII) may be uploaded and submitted securely to this site.