



August 26, 2015

Dr. Sharon L. Hirsh
President
Rosemont College of the Holy Child Jesus
1400 Montgomery Avenue
Rosemont, PA 19010

UPS Tracking Number
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Dear Dr. Hirsh:

RE: **Final Program Review Determination**
OPE ID: 00336000
PRCN: 201410328463

The U.S. Department of Education's (Department's) School Participation Team - Philadelphia issued a program review report on April 7, 2014, covering Rosemont College of the Holy Child Jesus' (Rosemont'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 2012-2013 and 2013-2014 award years. Rosemont's final response was received on June 30, 2014. A copy of the program review report (and related attachments) and Rosemont's response are attached. Any supporting documentation submitted with the response is being retained by the Department and is available for inspection by Rosemont 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.

Final determinations have been made concerning all of the outstanding findings of the program review report. The purpose of this letter is to close the review and notify Rosemont of a possible adverse action.

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.

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

U.S. Department of Education
School Participation Division – Philadelphia
100 Penn Square East, Suite 511
Philadelphia, PA 19107
www.StudentAid.gov

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.

This FPRD contains one or more findings regarding Rosemont'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.

Personally Identifiable Information

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. The appendix was encrypted and sent separately to the institution via e-mail.

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 Ms. Deborah Marsh at (215) 656-8640.

Sincerely,



Nancy Paula Gifford
Division Director

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

cc: Deborah Cawley, Director of Enrollment Services and Financial Aid Compliance
Middle States Commission on Higher Education
PA Department of Education

Prepared for
Rosemont College of the Holy Child Jesus

OPE ID: 00336000
PRCN: 201410328463

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

Final Program Review Determination
August 26, 2015

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A. Institutional Information

Rosemont College
1400 Montgomery Avenue
Rosemont, PA 19010

Type: Private, Non-Profit

Highest Level of Offering: Master's Degree or Doctoral Degree

Accrediting Agency: Middle States – Higher Education

Current Student Enrollment: 958 students (Fall 2013 term)

% of Students Receiving Title IV, HEA funds: 53 % (Fall 2013 term)

Title IV, HEA Program Participation:

Title IV Award Program	2011-2012 Award Year	2012-2013 Award Year
Federal Pell Grant	\$ 1,314,916	\$ 1,287,182
Federal Direct William D. Ford (Direct Loan)	\$ 9,660,263	\$ 10,151,772
Federal Perkins Loan	\$ 94,311	\$ 78,450
Federal Supplemental Educational Opportunity Grant (FSEOG)	\$ 72,631	\$ 66,939
Federal Work-Study	\$ 65,956	\$ 62,631

FFEL/DL Cohort Default Rates (CDR):

2009 – 8.1 %

2010 – 8.3 %

2011 – 7.6 %

Federal Perkins Loan CDR:

2010 – 28.6 %

2011 – 37.0 %

2012 – 34.7 %

B. Scope of Review

The U.S. Department of Education (the Department) conducted a program review at Rosemont College of the Holy Child Jesus (Rosemont) from November 12, 2013, to November 20, 2013. The review was conducted by Ms. Nancy Della Vecchia and Ms. Deborah Marsh.

The focus of the review was to determine Rosemont's compliance with the statutes and regulations as they pertain to the institution's administration of the Title IV, HEA programs. The review consisted of, but was not limited to, an examination of Rosemont'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. A program review report was issued on April 7, 2014, and a copy of the program review report issued to the institution is attached as Appendix A.

Disclaimer:

Although the review was thorough, it cannot be assumed to be all-inclusive. The absence of statements in the report concerning Rosemont'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 Rosemont 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

Finding # 2: Failure to Conduct Exit Counseling

Finding # 3: Failure to Monitor Student Status

Finding # 4: Failure to Identify Federal Funds to Bank

Rosemont College of the Holy Child Jesus (Rosemont) has taken the necessary corrective action to resolve findings # 2 – 4 of the program review report. Therefore, these findings may be considered closed. A copy of Rosemont's written response related to the resolved findings is attached as Appendix B.

Findings requiring further action by Rosemont are discussed below.

Findings with Final Determinations

The program review report findings requiring further action are summarized below. At the conclusion of each finding is a summary of Rosemont's response to the finding and the Department's final determination for that finding.

Finding # 1: Student Credit Balance Deficiencies

Citation Summary: When an institution disburses Title IV program funds by crediting a student's account and the total amount of all Title IV funds credited exceeds the amount of tuition and fees assessed the student, the institution must pay the resulting credit balance to the student as soon as possible but no later than 14 days after the balance has occurred. 34 C.F.R. § 668.164(e).

An institution is permitted to hold credit balances when a student has voluntarily authorized the institution to retain a credit balance to assist the student in managing those funds for the remainder of the academic year. The authorization must be voluntary or optional, and the student or parent must have the option to cancel or modify the authorization at any time. 34 C.F.R. § 668.165(b)(2). Title IV credit balance funds retained on the basis of an authorization must be paid by the end of the last payment period in the award year for which they were awarded or, for loan funds, by the end of the loan period. If a student or parent cancels the authorization to hold Title IV funds, the institution must pay those funds directly to the student or parent as soon as possible but no later than 14 days after the institution receives the cancellation notice. 34 C.F.R. § 668.165(b)(4)(iii).

Noncompliance Summary: Rosemont retained federal Title IV credit balances for a period of more than 14 days on student ledger accounts. Rosemont also failed to obtain a signed, written student credit balance authorization to hold federal Title IV funds for students # 2, 4, 7, 8, 10, 12, 13, 17, & 21.

Required Action Summary: The Department required Rosemont to compile a file review in a spreadsheet for all students who received a Title IV credit balance and enrolled for the 2012-2013 and 2013-2014 award years. The Department required Rosemont to include a copy of the front and back of each Title IV credit balance check, a copy of each student's account statement or ledger, and a copy of the students' signed, written authorizations to hold the credit balances, if applicable with its response to the program review report. Additionally, the Department required Rosemont to review its Title IV credit balance policies and procedures and submit a copy of its revised policies and procedures with its response to the program review report.

Rosemont's Response: Rosemont compiled a file review and submitted its final response to the program review report on June 30, 2014. The results of the file review were provided in hardcopy and electronic copy. A total of 436 students were identified in

the file review for the 2012-2013 award year and a total of 396 students were identified in the file review for the 2013-2014 award year. For each student, Rosemont provided the Department with a copy of the negotiated credit balance check, student ledger, and credit authorization form if it was submitted by the student to the school.

Rosemont also included a copy of its revised policies and procedures with its response to the program review report.

Final Determination: The Department analyzed Rosemont's response. The Department reviewed a sample of 50 students from the file review for the 2012-2013 and 2013-2014 award year. For the 2012-2013 award year, Rosemont paid credit balances timely for 48 of 50 student sampled by the Department. For 2 of 50 students sampled by the Department for the 2012-2013 award year, credit balances were paid 1 and 2 days late. For the 2013-2014 award year, Rosemont paid credit balances timely for 48 of 50 students sampled by the Department. For 2 of 50 students sampled by the Department for the 2013-2014 award year, credit balances were paid 1 day late.

The Department reviewed Rosemont's revised policies and procedures for issuing and processing Title IV credit balance checks. Rosemont must follow its revised policies and procedures to ensure that Title IV credit balances are paid timely.

Finding #5: Drug and Alcohol Abuse Prevention Program Requirements Not Met – DAAPP Distribution and Biennial Review Violations

Citation Summary: The Drug-Free Schools and Communities Act (DFSCA) and Part 86 of the Department's General Administrative Regulations requires each participating institution of higher education (IHE) to certify that it has developed and implemented a drug and alcohol abuse education and prevention program. 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, the IHE must distribute written information about its drug and alcohol abuse prevention program (DAAPP) to all students, faculty and staff. The distribution plan must make provisions for delivering the material to students who enroll on a date after the initial distribution and for employees who are hired at different times throughout the year. The information must include:

- 1) A written statement about its standards of conduct that prohibits the unlawful possession, use or distribution of illicit drugs and alcohol by students and employees;
- 2) A written description of legal sanctions imposed under federal, state and local laws for unlawful possession or distribution of illicit drugs and alcohol;
- 3) A description of the health risks associated with the use of illicit drugs and the abuse of alcohol;

- 4) A description of any drug or alcohol counseling, treatment, rehabilitation or re-entry programs that are available to students and employees; and,
- 5) 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.

In addition, each IHE must conduct a biennial review in order to measure the effectiveness of its drug prevention program and to ensure consistent treatment in its enforcement of its disciplinary sanctions. The IHE must prepare a report of findings, maintain its biennial review report and supporting materials and make them available to the Department and interested parties upon request. 34 C.F.R. §§ 86.3, 86.100 and 86.103.

Noncompliance Summary: The Department indicated that Rosemont violated multiple requirements of the DFSCA and the Department's Part 86 regulations, including failing to annually deliver a materially-complete DAAPP disclosure to all employees of the institution and to distribute the DAAPP to its students and employees.

Further, the Department indicated that Rosemont failed to conduct a biennial review of the effectiveness of its DAAPP. The institution failed to indicate the consistency of sanctions imposed for violations of its disciplinary standards and codes of conduct. Additionally, the institution failed to produce a Biennial Review report of the findings.

Failure to comply with the biennial review requirements 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.

Required Action Summary: The Department required Rosemont to perform the following corrective actions:

- Review and revise its existing drug and alcohol program materials and develop new program content as needed to ensure that a comprehensive DAAPP is produced which includes all of the required elements found in the DFSCA;
- Publish a complete annual DAAPP disclosure that summarizes the program;
- Develop detailed policies and procedures to ensure that the DAAPP disclosure was distributed annually to every student who enrolls for any academic credit and to all employees. This policy must be provided for active delivery to every member of the campus community regardless of when they enroll or were hired and irrespective of the duration of enrollment or employment. The Department required Rosemont to provide a copy of its new DAAPP and new distribution policy with the program review response.

- Distribute the new DAAPP disclosure and provide documentation evidencing the distribution as well as a statement of certification attesting to the fact that the materials were distributed in accordance with the DFSCA. This certification must also affirm that the institution understands all of its DFSCA obligations and that it has taken all necessary remediate actions to ensure that these violations do not recur;
- Conduct a biennial review to measure the effectiveness of its DAAPP and prepare a report of findings. Rosemont's report must include a description of the research methods and data analysis tools that were used to determine the effectiveness of the program and the consistency of its enforcement strategy. The report must identify the responsible official(s) and office(s) that conducted the biennial review. Finally, the Biennial Review report must be approved by Rosemont's chief executive and/or its' Board.
- Establish policies and procedures to ensure that all subsequent biennial reviews are conducted in a timely manner and fully documented and take the necessary actions to ensure that this violation does not recur. The Department required Rosemont to provide a copy of its new policies and procedures with its new Biennial Review report and its response to the program review report.

Rosemont's Response: In its official responses dated June 30, 2014, and October 21, 2014, Rosemont concurred with the finding and stated that remedial action was taken as directed in the program review report. Specifically, Rosemont officials stated that it revised institutional policies to improve its processes for production of DAAPP materials and the distribution of these materials to required recipients. Per the response, Rosemont also developed new policies to govern the conduct of assessments to evaluate the effectiveness of the DAAPP. In support of its claims, Rosemont management submitted the requested Certification Statement to affirm that the College comprehends its obligations and that it will comply going forward. Furthermore, Rosemont submitted additional evidence of a subsequent evaluation of its drug program meant to address the institution's systemic failure to conduct biennial reviews.

Final Determination: Finding #5 of the program review report cited Rosemont for multiple violations of the DFSCA and the Part 86 Regulations. Specifically, Rosemont failed to develop and implement a comprehensive DAAPP that includes all required program components. Additionally, Rosemont did not produce a DAAPP disclosure statement that summarized the DAAPP, and as a consequence, Rosemont was unable to actively distribute the required program materials to all current employees and to all students enrolled for one or more academic credits. Finally, the review team determined that Rosemont persistently failed to conduct biennial reviews to assess the effectiveness of its DAAPP, a program that it did not have. Consequently, Rosemont could not

produce the required report of findings and recommendations or supporting documentation.

These separate and distinct violations necessarily follow from one another since the Biennial Review report 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 ensures that program requirements and standards of conduct are communicated clearly to all members of the campus community. As a result of these violations, Rosemont was required to review and revise its existing policies and procedures as needed to ensure that these violations do not recur. In its official response, Rosemont concurred with the findings listed in the noncompliance section above, asserted that adequate corrective action was taken, and submitted various documents in support of its claims.

The Department carefully examined all available information including Rosemont's narrative response and supporting documentation. Based on that review and Rosemont's admissions, each of the violations noted in the noncompliance section of the initial finding are sustained. The review team's examination also indicated that the identified violations were, for the most part, satisfactorily addressed by Rosemont's new DAAPP materials and evidence showing that initial program materials were distributed. The response also included copies of an initial assessment of the program's effectiveness and of Rosemont's new and revised internal policies and procedures. As such, the Department has determined that Rosemont's remedial actions meet minimum requirements. For these reasons, the Department has accepted the Rosemont's response and considers this finding closed for purposes of this program review. Nevertheless, the directors and officials of Rosemont are put on notice that they must take any additional actions that may be necessary to address the deficiencies identified by the Department, as well as any other deficiencies or weaknesses detected by the institution during the preparation of its response and/or as may otherwise be needed to ensure that these violations do not recur.

In this regard, Rosemont is advised that it must continue to develop its DAAPP. Rosemont must also ensure that it distributes accurate and complete DAAPP materials to all students and employees on an annual basis in accordance with the Department's regulations and Rosemont's new procedures. Moreover, Rosemont is admonished to conduct substantive biennial reviews going forward and to continuously refine its investigative process. Institutional officials must take care to ensure that each review is a probative inquiry into the actual effectiveness of Rosemont's drug and alcohol programs and that these examinations are not merely a conclusory ratification of existing policy. Finally, the College must produce detailed reports that clearly state the methods used and outcomes reached during each review. Each report must also be approved by the Rosemont's President and/or its Board.

Although this finding is closed for program review purposes, Rosemont is reminded that the exceptions identified above constitute serious violations of the *DFSCA* that by their nature cannot be cured. There is no way to truly “correct” a violation of this type once it occurs. Rosemont asserted that it has taken adequate remedial actions and is now in compliance with the *DFSCA* as required by its Program Participation Agreement (PPA). Nevertheless, Rosemont officials must understand that the Department considers compliance with the *DFSCA* to be essential to maintaining a safe and healthy learning environment. Rosemont 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 Rosemont re-examine its drug and alcohol abuse prevention 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 the institution’s new policies and procedures.

Finding #6: Crime Awareness Requirements Not Met – Reporting Discrepancies in Crime Statistics Published in the Annual Security Report and those Reported to the Department’s Campus Crime Statistics Database

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 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 Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act (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 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 must also 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).

In addition, 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).

Finally, each institution must also submit its crime statistics to the Secretary for inclusion in the Department’s online campus crime statistics database called the “Campus Safety and Security Data Analysis Cutting Tool.” 34 C.F.R. §668.41(e)(5).

Noncompliance Summary: Rosemont failed to publish accurate and complete crime statistics in its ASR and/or Rosemont submitted inaccurate and incomplete data to the Department’s online campus crime statistics database, also known as the “Campus Safety and Security Data Analysis Cutting Tool (CSSDACT).” This finding is based on the crime statistics that Rosemont College submitted to the Department, which did not match those that were published in “Rosemont College Department of Public Safety 2012 Annual Security and Fire Safety Report.” One or both data sets were flawed. An institution must identify and resolve all data discrepancies before its ASR is published and before its annual statistical survey is locked by the Department’s online campus crime statistics database. An institution’s campus crime statistics must be fully reconciled and accurately disclosed in the ASR and the CSSDACT.

The review team compared the crime statistics in the Rosemont College’s ASR to those that were submitted to the CSSDACT and identified the following discrepancies:

Crime Statistics – On-Campus

Year	Category	Number Reported on ASR	Number Reported to OPE
2012	Forcible Sex Offenses	1	0

Crime Statistics – On-Campus Student Housing Facilities

Year	Category	Number Reported on ASR	Number Reported to OPE
2011	Forcible Sex Offenses	0	1
2012	Forcible Sex Offenses	1	0

Disciplinary Referrals

Drug Abuse Violations

Year	Category	Number Reported on ASR	Number Reported to OPE
2010	Public Property	0	2

Weapons: Carrying, Possessing, Etc.

Year	Category	Number Reported on ASR	Number Reported to OPE
2012	On Campus	1	0
2012	Residential Facilities	1	0

Any failure to disclose accurate and complete crime statistics in the ASR and/or submit them to the CSSDACT violates the Clery Act. Such discrepancies of an institution's crime statistics confuses users of the ASR and the Department's online campus crime statistics database and deprives the campus community and the public of important campus crime information.

Required Action Summary: As a result of this violation, the Department required Rosemont to review and improve its existing internal policies, procedures, internal controls and training programs to ensure that all crime statistics are disclosed accurately and completely, both in its ASR, AFSR and in its data submission to the Department's CSSDACT. In addition, the Department required Rosemont to develop and implement any new policies and procedures that are needed to ensure that all of Rosemont's campus security operations will be carried out in accordance with the Clery Act going forward. As part of this internal review, Rosemont was required to review the crime statistics that were included in the institution's ASR and its corresponding CSSDACT data submission as well as those statistics that will be published in the 2013 ASR and CSSDACT submission and verify that all statistics are accurate and complete. If additional reporting

errors are identified during this internal review, the Department required Rosemont to take immediate action to correct those data discrepancies by amending its ASR and/or its CSSDACT data submission. Finally, the Department required Rosemont must submit a copy of all of its new and revised ASR, policies and procedures, as well as a list of any additional statistical discrepancies that were identified during the internal review with its response to this program review report. The Department noted that after the institution's ASR is evaluated by the review team for accuracy and completeness, Rosemont will be required to actively distribute it to all current students and employees in accordance with 34 C.F.R. §668.41(e).

As noted above, the exceptions identified in this finding 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. Rosemont will be given an opportunity to publish and distribute accurate and complete campus crime and fire safety statistics and in doing so, will begin to bring its overall campus safety program into compliance with the Clery Act as required by its Program Participation Agreement (PPA). Nevertheless, Rosemont 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.

Based on an evaluation of all available information including Rosemont's response, the Department will determine if additional actions will be required and will advise Rosemont College accordingly in the FPRD.

Rosemont's Response: In its official responses dated June 30, 2014, and October 21, 2014, , Rosemont concurred with the finding and stated that remedial action was taken as directed in the program review report. In support of these corrective action claims, Rosemont officials submitted documentation that purported to substantiate the statistical discrepancies in the College's calendar year 2010-2012 crime statistics were fully reconciled, pursuant to the Department's instructions. Per the response, the revised crime statistics were also included in a modified 2013 ASR and that the data submitted to the CSSDACT was also advised.

In addition, Rosemont management claimed that the College reviewed and revised its internal procedures and processes and that new institutional remedies were put in place to ensure that these violations do not recur. As part of these reforms, Rosemont asserted that a review panel was formed to oversee the compilation of campus crime statistics, the distribution of the ASR, and other aspects of Rosemont's *Clery Act* compliance program.

Final Determination: Finding #6 of the program review report cited Rosemont for failure to publish accurate, complete and fully reconciled crime statistics in its 2012 and 2013 ASRs and its data submissions to the CSSDACT for calendar years 2010-2012. The specific statistical discrepancies identified by the review team appear in the noncompliance section above. As a result of these violations, the College was required to

review and revise its internal policies and procedures related to the *Clery Act* compliance and develop and implement new policies and procedures to ensure that these violations do not recur. In its response, Rosemont concurred with the finding and submitted evidence supporting its claim that corrective action was taken to address the violations identified by the review team.

The Department carefully examined all available information including Rosemont's response and supporting documentation. Based on that review of Rosemont's admissions, each of the violations noted in the noncompliance section of the initial finding are sustained. The review team's examination also showed that the identified violations were satisfactorily addressed by Rosemont's revised crime statistics and the inclusion of this data in the modified 2013 ASR and its revised CSSDACT data submissions. As such, the Department determined that the remedial action plan meets minimum requirements. For these reasons, the Department has accepted Rosemont's response and considers this finding to be closed for purposes of this program review. Nevertheless, the officials and directors of Rosemont are put on notice that Rosemont 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 its response and/or as may be needed to otherwise ensure that these violations do not recur.

Although the finding is closed for program review purposes, Rosemont 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. The requirement to disclose accurate, complete and fully reconciled campus crime statistics in the ASR and in its reporting to the CSSDACT are among the most foundational requirements of the *Clery Act*. Reporting discrepancies of the type documented above creates confusion for students, employees, parents and other users of this data including the researchers and the media. Rosemont asserted that it has taken adequate remedial actions, and by doing so, it is now in compliance with the *Clery Act* as required by its PPA. Nevertheless, Rosemont's management must understand that the violations documented by the program review deprived students and employees of important campus safety and crime prevention information to which they are entitled. For these reasons, Rosemont 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.

The Department strongly recommends that Rosemont re-examine its campus security, drug and alcohol 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, Rosemont officials are encouraged to consult the Department's "Handbook for Campus Safety and Security Reporting" (2011) as a reference guide on *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. The Department also provides a number of other *Clery Act* training resources. Rosemont officials 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, Rosemont management is 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 requires institutions to include new policy, procedural, and programmatic disclosures regarding sexual assault prevention and response in their ASRs. All 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. Because the Department issued Final Rules on the VAWA amendments on October 20, 2014, these regulations went 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>.

D. Appendices

The following appendices are attached to this report:

- Appendix A - Program Review Report dated April 7, 2014;
- Appendix B - Rosemont's Program Review Written Response;
- Appendix C – Rosemont's Drug and Alcohol Abuse Prevention Program (DAAPP) and policies and procedures;
- Appendix D – Rosemont's Substance Abuse Policy;
- Appendix E - Biennial Review Report (June 2014);
- Appendix F - Annual Security Report (ASR) and Annual Fire Safety Report (AFSR) (Revised), which includes updated crime statistics for Finding # 6; and
- Appendix G - Email from Campus Security Officer at Rosemont dated October 14, 2014.

Appendix A, the institution's Program Review Report, includes the Student Sample, which contains personally identifiable information. The FPRD will be emailed to Rosemont as an encrypted WinZip file using Advanced Encryption Standard, 256-bit, and the FPRD sent by email will include Appendix A. The password needed to open the encrypted WinZip file(s) will be sent in a separate email. Appendix A will not be included in the hardcopy of the FPRD, which will be sent by mailed to the institution.