



Federal Compliance Filing by Institutions

Effective September 1, 2019–August 31, 2020

Institutions should answer the questions below. The [Federal Compliance Overview](#) provides information about the applicable HLC policies and provides an explanation of each requirement.

Note that some federal requirements are related to and accounted for in the Criteria for Accreditation or Assumed Practices. Those related Criteria and Assumed Practices have been identified for cross-referencing purposes. Cross-references are also provided to the Code of Federal Regulations. Because HLC may, in some cases, require more of its institutions than the federal regulations, it is important that institutions write to HLC's requirements to ensure their compliance not only with the federal regulations but with HLC's expectations. Lastly, although cross-references to the Code of Federal Regulations are provided here, an institution is always responsible to ensure that it is familiar with the full and current text of those regulations, as they may from time to time be updated.

Submission Instructions

This form and any required appendices should be uploaded to the Assurance System no later than the institution's lock date, unless otherwise noted. Instructions for uploading the documents are provided in the Assurance System. The necessary supporting documentation should be directly responsive to specific documentation requested. While there is no minimum expectation with respect to length, the completed Federal Compliance worksheet, including all appendices, should not exceed 250 pages.

Institution name: **Baker College**

1. Assignment of Credits, Program Length and Tuition

Provide web addresses to the following:

- Policy (or set of policies) and procedures for assignment of Credit Hour for all **types** of courses, disciplines, programs, credential levels, formats, regardless of modality.
- Course or program credit assignment procedures. (Note: The Federal Compliance reviewer will contact the institution's Accreditation Liaison Officer after the Federal Compliance materials are received to request a sample of course and program materials. The purpose of the representative

sample of materials is to enable the Federal Compliance reviewer to make a preliminary determination as to whether an institution adheres to its Credit Hour policy.)

Provide the web address to relevant policy/policies:

Link: [Baker College's Credit Hour Policy and Procedure](#)

Provide the web address to relevant procedure(s):

Link: [Baker College's Credit Hour Policy and Procedure](#)

Describe the process the institution utilizes to verify length of academic period and compliance with credit hour requirements through course scheduling.

Baker College offers both on-ground synchronous course options and online asynchronous course options. For both options, the College strictly adheres credit hour requirements, with the on-ground courses maintaining standardized course starts times. For the online asynchronous options, a specific meeting date and time are not required by its asynchronous nature. For both options, integrity is maintained through course description and credit hour comparisons, which is conducted through an audit process.

The College maintains the roles of schedule builders. The scheduler builders compare the scheduled courses with the course descriptions for that academic year to ensure the required credit hours are being met. In the case of discrepancy, the schedule builders contact the program's dean and the process owner of the catalog to verify the correct requirements.

For on-ground options, the schedule builders then perform a manual audit to ensure classes are meeting at the correct start times and running for the accurate minimum and required time. If changes need to be made, the schedule builders will contact the program official and changes are made accordingly.

On-ground Guidelines Used -- Course Times / Dates:

For consistency, all on-ground course offerings are required to follow the same scheduling standards, including consistent start times unless exceptions have been approved (without compromise of required class meeting time).

- Standard start times for Fall and Spring semesters are 8:00am, 9:30am, 11:00am, 1:00pm, 2:30pm, 5:00pm, 6:30pm, 8:00pm. Standard start times for summer semester are: 8:00am, 10:00am, 12:00pm, 2:00pm, 4:00pm, 6:00pm, 8:00pm, (**Note:** Exceptions approved by Program Deans are allowed).
- All lab-based courses will have the lab follow the lecture with a 15-minute break prior to the lab start time. This will vary when multiple labs for the same lecture are needed.
- Course meetings of 150 minutes or less will not have a break scheduled. Course meetings exceeding 150 minutes will have a 15 minute break scheduled.
- Most courses will meet one or two days per week. For example, two-day courses will be Monday / Wednesday or Tuesday / Thursday.
- Holidays will NOT cause time to be added to sections. Virtual (Canvas) assignments will be used, but not included in the schedule, to make up holiday time.
- Section begin and end dates cannot overlap with other semesters (excluding High School courses). Dates outside of the standard semester begin and end dates must be approved by the Director of Academic Affairs on each campus.

For more information see Federal Requirements 34 CFR §§602.16(a)(1)(viii), 602.24(f), 600.2, and 668.8(k) and (l).

Related HLC Requirements: Core Component 3.A. and Assumed Practice B.1.

2. Institutional Records of Student Complaints

Provide the web address to the institution's complaint policy.

Link: [Baker College's Complaint Policy](#)

Provide the web address to the institution's complaint procedure.

Link: [Baker College's Complaint Procedure](#)

For more information see Federal Requirement 34 CFR §§602.16(a)(1)(ix) and 668.43(b).

Related HLC Requirements: Core Component 2.A and Assumed Practice A.3, A.4.

3. Publication of Transfer Policies

Provide the web address to the institution's transfer policies.

Link: [Baker College's Transfer Policies](#)

Provide the web address where the public can access a list of institutions with which the institution has established articulation agreements. Note that you do not need to provide the full articulation agreements themselves, only the list of agreements that you make public. This list should include the name and location of the agreement partner, the extent to which the institution accepts credit for courses offered by the partner or offers courses for which credits are accepted by the partner, and any credit limitations.

Link: [Articulation Agreements \(Partnerships\)](#)

Provide the web address where current and prospective student can ascertain the institution's transfer requirements in addition to what will and will not transfer.

Link: [Transfer Requirements and Information](#)
[Transfer Course Equivalency Tool](#)

For more information see Federal Requirements 34 CFR §§668.5, 668.8, 668.43(a)(11) and 668.43(a)(12).

Related HLC Requirements: Core Component 2.A and Assumed Practice A.5.D.

4. Practices for Verification of Student Identity

Does the institution have students enrolled in distance or correspondence courses, as defined in federal definitions?

Yes

No (If no, please move on to Title IV Program Responsibilities)

How does the institution verify the identity of students enrolled in these courses?

Baker College students enrolled in an online course are required to log in to a secure access site using their unique Baker College user ID, password, and Unique Identifier Number (UIN) credentials to access the course. These credentials are established during the admissions process and are required to access all online course resources and materials, as well as registration and financial aid information.

How does the method of verification make reasonable efforts to protect student privacy?

Per Baker College's Acceptable Uses Policy for Baker College Information Technology Resources, users cannot access Baker College resources without the proper authority, which includes attempting to evade or circumvent user authentication and/or misrepresenting one's identity or affiliation. Additionally, this policy states all passwords must be kept secure and separate, and students are never to share them with any other person, nor use auto-login features within browsers. If users violate the acceptable use policy they are subject to disciplinary action, as well as have use limited, suspended, or terminated depending on the infraction. In cases where a student password needs to be reset, the student has to provide answers to private security questions such as date of birth and last four digits of their social security number.

Are there any additional costs (e.g., fees associated with test proctoring) charged directly to the student because of this method?

Yes

No

If yes, how are the additional costs disclosed to students prior to enrollment in a distance or correspondence course?

N/A

Provide the web address where the public can access information regarding the additional costs.

Link: N/A

For more information see Federal Requirement 34 CFR §602.17(g).

Related HLC Requirement: Core Component 2.A.

5. Title IV Program Responsibilities

Institutions that do not receive Title IV funding should skip this section and go to item 6, Publication of Student Outcome Data.

This requirement has several components the institution must address. The institution staff compiling this information should work with the financial aid office and the chief financial officer or comptroller. For more information see Federal Requirement 34 CFR §602.16(a)(1)(x).

General Program Responsibilities

- a. What is the current status of the institution's Title IV program (e.g., recertified on date x, provisionally certified on date x, etc.)?

Baker College was recertified on February 1, 2017 and is scheduled to expire December 31, 2020 (with a recertification application scheduled for September 30, 2020).

- b. When was the institution's most recent Title IV program review?

Date: July 13, 2015

- c. Has the institution been audited or inspected by the Office of the Inspector General of the U.S. Department of Education since the last comprehensive evaluation by HLC?

Yes

No

Provide the most recent Title IV program review, or other inspection or audit report since the last comprehensive evaluation by HLC, as **Appendix A**.

- d. List any limitation, suspension or termination actions imposed on the institution by the U.S. Department of Education (hereafter referred to as "the Department") since the last comprehensive evaluation by HLC and the reason for such actions. (Use N/A for not applicable.)

None (N/A)

- e. List any fines, letters of credit or heightened cash monitoring imposed on the institution by the Department since the last comprehensive evaluation by HLC and the reason for such actions. (Use N/A for not applicable.)

None (N/A)

- f. What response and corrective actions have the institution taken in regard to these Department actions? (Use N/A for not applicable.)

N/A

- g. What are the consequences of these actions by the Department for the institution's short- and long-term financial health? (Use N/A for not applicable.)

N/A

h. What are the findings from the OMB Circular A-133 portion of the institution's three most recent audited financial statements, which identifies material weaknesses in the processing of financial aid?

1. 2018-19 = None (N/A)
2. 2017-18 = None (N/A)
3. 2016-17 = None (N/A)

i. In which of the following Title IV federal financial aid programs does the institution participate? Select all that apply:

- Pell Grant
- Federal Family Education Loan
- Federal Direct Stafford Loan
- Direct PLUS Loan
- Federal Supplemental Educational Opportunity Grant
- Federal Work Study
- Perkins Loans
- Academic Competitiveness Grant

Provide action letters issued by the Department that explain its rationale for any actions described in D, E and H (if applicable) and provide any reports issued by the institution, if available, demonstrating improvement as **Appendix B**.

For more information see Federal Requirement 34 CFR §668.16.

Financial Responsibility Requirements

a. What were the outcomes of the three most recent Department reviews of the institution's composite ratios and financial audits?

1. 2016/17 = 2.6
2. 2015/16 = 2.8
3. 2014/15 = 3.0

Note: All three are unqualified opinions (no findings).

b. Have there been any fines, penalties, letters of credit or other requirements imposed by the Department as a result of these reviews?

- Yes
- No

Note: HLC also annually analyzes each institution's financial ratios to determine whether there might be financial concerns. The peer review team checks with the institution and the HLC staff to determine whether HLC or the Department has previously raised concerns about the institution's finances based on these ratios.

c. What actions has the institution taken or does it plan to take in response to any concerns raised by HLC or the Department? Please insert narrative below. (Use N/A for not applicable.)

None (N/A)

Provide any action letters issued by the Department that explain its rationale for any actions it may have taken (if applicable) and evidence of institutional improvement as **Appendix C**.

For more information see Federal Requirements 34 CFR §§668.15, 668.23, 668.171, 668.173, and 668.174.

Related HLC Requirements: Core Components 5.A, 2.B; Assumed Practice D.

Campus Crime Information, Athletic Participation and Financial Aid, and Related Disclosures

Title IV responsibilities include the legal obligation to disclose information to students and to the public about campus crime, athletic participation and financial aid.

a. What administrator or office on campus is responsible for ensuring that these disclosures are regularly compiled and published and that the data are accurate?

Campus Safety Office

b. Has the institution been the subject of any federal investigation related to any of the required disclosures for Title IV responsibilities?

Yes

No

If yes, does the institution have any findings from the Department regarding these disclosures?

Yes

No

If yes, explain any findings related to any of the required disclosures for Title IV and corrective action plans the institution may have to remedy the findings.

c. Provide the web address where this information is made available to the public.

Link: [Baker College's Annual Security Report](#)

(Note: Website where public can access the [Baker College's Annual Security Report](#)).

For more information see Federal Requirements 34 CFR §§668.41, 668.42, 668.43, 668.44, 668.46, and 668.49.

Student Right to Know/Equity in Athletics

Title IV responsibilities require that institutions provide to students and the public graduation/completion rates for the student body by gender, ethnicity, receipt of Pell grants and other data as well as information about the process for withdrawing as a student, cost of attendance, policies on refund and return of Title IV financial aid, current academic programs and faculty, names of applicable accrediting agencies, description of facilities for disabled students, and the institution’s policy on enrollment in study abroad. In addition, certain institutions need to disclose their transfer-out rate. Also, institutions with athletic programs are required to disclose athletic participation rates and financial support data.

a. What administrator or office on campus is responsible for ensuring that these disclosures are regularly compiled and published and that the data are accurate?

Vice President of Financial Aid

b. Has the institution been the subject of any federal investigation related to any of the required disclosures for Student Right to Know/Equity in Athletics?

Yes

No

If yes, does the institution have any findings from the Department regarding these disclosures?

Yes

No

If yes, explain any findings related to any of the required disclosures for Student Right to Know/Equity in Athletics and corrective action plans the institution may have to remedy the findings.

c. Provide the web address where this information is made available to the public.

Link: [Consumer Disclosure Information -- Available to Public](#)
[Disclosure Regarding Financial Aid](#)

For more information see Federal Requirements 34 CFR §§668.41, 668.45, 668.48, and 668.8.

Related HLC Requirement: Assumed Practice A.6.

Satisfactory Academic Progress Policy

The institution is required to have a Satisfactory Academic Progress policy for determining whether an otherwise eligible student is making satisfactory academic progress in his or her educational program and may receive assistance under Title IV, HEA programs.

a. Is such a policy readily available to students?

Yes

No

b. Does it satisfy federal requirements?

Yes

No

c. Does the institution have any findings from the Department regarding this policy?

Yes

No

If yes, explain any findings related to any of the required disclosures for Satisfactory Academic Progress and corrective actions that may have been required by the Department related to these findings.

d. Provide the web address where this information is made available to the public.

[Financial Aid Disclosures](#)

[Consumer Disclosure Information -- Available to Public](#)

For more information see Federal Requirement 34 CFR §668.34.

Related HLC Requirements: Criterion 3.A; Assumed Practice A.5.

6. Publication of Student Outcome Data

Student outcome data, as defined in federal definitions, should be made available to the public through the institution's website—for instance, linked to the institution's home page, included within the top three levels of the website or easily found through a search of related terms on the website—and should be clearly labeled as such. Any technical terms in the data should be defined, and any necessary information on the method used to compile the data should be included. Data may be provided at the institutional or department level or both, but the institution must disclose student outcome data that address the broad variety of its programs, (both undergraduate and graduate, as applicable) including outcome data from each program level.

Are student outcome data published on the institution's website following the specifications above?

Yes

No

Provide a link to the webpage(s) that contains the student outcome data.

Link(s): [Consumer Disclosure Information -- Available to the Public](#)
[Academic Program Improvement and Outcomes](#)

For more information see Federal Requirement 34 CFR §602.16(a)(1)(i).

Related HLC Requirement: Assumed Practice A.6.

7. Standing With State and Other Accrediting Agencies

List any relationships the institution has with any specialized, professional or institutional accreditor or with any governing or coordinating bodies in states in which the institution has a presence. Note whether the institution or any of its programs is on a sanction, is provisionally approved or has lost status with any state agency or accrediting body.

[List of Specialized Accreditations for Baker College](#)

Note: All programs with specialized accreditation are in good standing.

Provide the web address where students and the public can find information about the institution's standing with state agencies and accrediting bodies.

Link: [Specialized Accreditations](#)

For more information see Federal Requirements 34 CFR §§602.28, 668.41 and 668.43.

Related HLC Requirements: Core Component 2.B; Assumed Practices A.7, C.4.

List of Appendices

Please read each section of this document carefully for instructions on the information and material to be included in these appendices.

Title IV Program Responsibilities

- Appendix A..... General program responsibilities: Most recent program review or other inspection or audit reports since last comprehensive evaluation.
- Appendix B..... General program responsibilities: Action letters issued by the Department that explain its rationale for any Department actions any reports issued by the institution, if available, demonstrating improvement.
- Appendix C Financial responsibility requirements: Action letters issued by the Department that explain its rationale for any actions it may have taken (if applicable) and evidence of institutional improvement.



September 22, 2016

James F. Cummins
 President
 Baker College
 1050 West Bristol Road
 Flint, MI 48507-5508

Certified Mail Return Receipt Requested
 Domestic Return Receipt
 7012 1640 0000 0217 2890

RE: **Final Program Review Determination**
 OPE ID: 00467300
 PRCN: 2015-4-05-29055

Dear President Cummins:

The U.S. Department of Education's (Department's) Chicago/Denver School Participation Division issued a program review report on December 23, 2015 covering Baker College's (Baker) 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 2013-14 and 2014-15 award years. Baker's final response was received on January 21, 2016. A copy of the program review report (and related attachments) and Baker's response are attached. Any supporting documentation submitted with the response is being retained by the Department and is available for inspection by Baker upon request. Additionally, this Final Program Review Determination (FPRD), related attachments, and any supporting documentation may be subject to release under the Freedom of Information Act (FOIA) and can be provided to other oversight entities after this FPRD is issued.

Purpose:

Final determinations have been made concerning all of the outstanding findings of the program review report. The purpose of this letter is to: (1) close the review and (2) notify Baker 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. 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 Baker's failure to comply with the requirements of the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act (*Clery Act*) and the Department's regulations at 34 C.F.R. §§668.41, 668.46, and

668.49 and the Drug-Free Schools and Communities Act (*DFSCA*) and Part 86 of the Department's General Administrative Regulations. Because *Clery Act* and *DFSCA* findings do not result in financial liabilities, such findings may not be appealed. If an adverse administrative action is initiated, additional information about Baker's appeal rights will be provided under separate cover.

Protection of Personally Identifiable Information (PII):

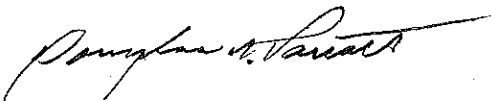
PII is any information about an individual which can be used to distinguish or trace an individual's identity (some examples are name, social security number, date and place of birth). The loss of PII can result in substantial harm, embarrassment, and inconvenience to individuals and may lead to identity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

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 Tammi Sawyer at 312-730-1531. Questions relating to any appeal of the FPRD should be directed to the address noted in the Appeal Procedures section of this letter.

Sincerely,



Douglas Parrott
Division Director

Enclosure:

Final Program Review Determination Report (and appendices)

cc: Linda Katrinic, Financial Aid Administrator
Michigan Department of Licensing and Regulatory Affairs
North Central Assoc of Colleges and Schools, the Higher Learning Commission
Department of Defense
Department of Veterans Affairs
Consumer Financial Protection Bureau

Prepared for

Baker College

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

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OPE ID 00467300

PRCN 2015-4-05-29055

Prepared by

U.S. Department of Education

Federal Student Aid

School Participation Division – Chicago/Denver

Final Program Review Determination

September 22, 2016

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A. Institutional Information

Baker College
1050 West Bristol Road
Flint, MI 48507-5508

Type: Private, Nonprofit

Highest Level of Offering: Doctorate Degree

Accrediting Agency: North Central Association of Colleges and Schools – The Higher Learning Commission

Current Student Enrollment: 31, 327 (Summer 2015)

% of Students Receiving Title IV, HEA funds: 86.3% (Summer 2015)

Title IV, HEA Program Participation (Source: PCNet):

	<u>2013-14</u>
William D. Ford Federal Direct Loan (Direct Loan) Program	\$188,081,336
Federal Pell Grant	\$76,216,218
Federal Supplemental Education Opportunity Grant (FSEOG)	\$2,005,969
Federal Work Study (FWS)	\$1,597,291

Default Rate – Direct Loan: 2011: 17.6%
(Source: PCNet) 2010: 19.1%
2009: 18.8%

B. Scope of Review

The U.S. Department of Education (the Department) conducted a program review at Baker College (Baker) from July 13, 2015 to July 17, 2015. The review was conducted by Tammi Sawyer, Erica Haynes, and Mary Murray.

The focus of the review was to determine Baker'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 Baker'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 31 files was identified for review from the 2013-14 and 2014-15 (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. In addition, 1 additional file was selected in 2013-14 due to the fact the original sample contained a student that was enrolled for 2013-14 but did not receive Title IV, HEA program funds from the 2013-14 award year. Appendix A lists the names and partial social security numbers of the students whose files were examined during the program review. A program review report was issued on December 23, 2015.

Disclaimer:

Although the review was thorough, it cannot be assumed to be all-inclusive. The absence of statements in the report concerning Baker'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 Baker 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 1

Baker has taken the corrective actions necessary to resolve finding 1 of the program review report. Therefore, this finding may be considered closed. Findings requiring further action by Baker 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 Baker's response to the finding, and the Department's final determination for that finding. A copy of the program review report issued on December 23, 2015 is attached as Appendix B.

Finding 2: Crime Awareness Requirements Not Met – Multiple Violations

Citation Summary: The Jeanne Clery Disclosure of Campus Security 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 enumerated in 34 C.F.R. § 668.46 (b). 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).

Noncompliance Summary: Baker violated multiple provisions of the Clery Act. Baker failed to compile and publish accurate and complete crime statistics and provide evidence that the institution distributes the ASR/AFSR to students that enrolled after the annual ASR/AFSR has been released to students and staff.

Required Action Summary: Baker was required to develop and implement new policies and procedures that would govern the preparation, publication and distribution of its ASR/AFSR. In addition, Baker is also 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.

Baker's Response: In its official response, Baker concurred with the finding and stated that it was unable to provide evidence that the 2014 ASR/AFSR was distributed to students who enrolled after the annual distribution. In support of its claims, Baker provided documentation that email notifications were sent to all students and staff on September 29, 2015. In addition, Baker stated that in January, 2016, email notifications were sent to all students and staff who did not receive the initial fall notification. Baker also indicated that its online admissions application and all job postings now include a statement and link to the ASR. Furthermore, Baker stated that it has developed new policies to ensure quarterly email notifications are sent to all students and employees who did not receive the annual distribution email.

Baker agreed with the Department's findings that several crime statistics posted in the CSSDACT did not match the statistics reported on the 2014 ASR. Baker indicated that it has resolved all statistical errors and claimed that crime statistics are listed accurately in the 2015 ASR, which includes its 2012, 2013, and 2014 crime data. Finally, Baker stated that it established policies to ensure that the data is accurate and is reported consistently for posting in the CSSDACT and future ASRs .

Final Determination: Finding 2 cited Baker for multiple violations of the *Clery Act* and the Department's regulations, as outlined in the Noncompliance section above. Specifically, the review team found that Baker failed to distribute the 2014 ASR/AFSR to students that enrolled after the annual ASR/AFSR has been released to students and staff. Baker also failed to compile and disclose accurate and complete crime statistics in both its 2014 ASR as well as its data submissions to the Department's online campus crime statistics database, (CSSDACT), as evidenced by the numerous discrepancies summarized above. As a result, Baker was required to develop and implement policies and procedures that will govern the production and distribution of its ASR/AFSR and ensure that all facets of the process are carried out in a manner that meets Federal regulations. Baker also 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*. In addition, Baker was required to review the identified discrepancies in its crime statistics, reconcile those discrepancies, and make necessary corrections to that information in the 2015 ASR and the 2015 CSSDACT survey response. In its response, Baker concurred with this finding and asserted that necessary actions were taken to address the deficiencies as identified and submitted documents in support of its claims.

The Department carefully examined all available information including Baker's narrative response and supporting documentation. Based on that review and Baker'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, for the most part, satisfactorily addressed by Baker's 2015 ASR and its new and revised internal policies and procedures. As such, the Department has determined that Baker's remedial action plan meets minimum requirements. For these reasons, the Department has accepted Baker's response and considers this finding closed for purposes of this program review. Nevertheless, the officials and directors of Baker are put on notice that they must take all necessary action to address the deficiencies and weaknesses identified by the Department as well as those that were detected during the preparation of the responses to the program review report and as may otherwise be needed to ensure that these violations do not recur.

Baker 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 production and distribution of an accurate and complete ASR is the most basic requirement of the *Clery Act* and is fundamental to

its campus safety goals. Baker asserted that it has taken adequate remedial actions and that by doing so, that it is now in compliance with the *Clery Act* as required by its Program Participation Agreement (PPA). Nevertheless, Baker's management must understand that the violation 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, Baker 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.

Because of the serious consequences of such violations, the Department strongly recommends that Baker officials re-examine its campus safety and general Title IV policies and procedures on at least an annual basis to ensure that they continue to reflect current College practices and are compliant with Federal requirements. To that end, Baker officials are encouraged to consult the Department's "Handbook for Campus Safety and Security Reporting" (2016) as a reference guide on *Clery Act* compliance. The Handbook is online at: www.ed.gov/admins/lead/safety/handbook.pdf. The Department also provides a number of other *Clery Act* training resources. Baker officials can access these materials at: www.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, Baker's 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 sexual assault, dating violence, domestic violence, and stalking. VAWA also requires institutions to include new policy, procedural, and programmatic disclosures regarding sexual assault prevention, response, and adjudication in their ASRs. All institutions were already obligated to make a documented good-faith effort to comply with the statutory requirements of VAWA and to include all new required content in the 2014 ASR. Because the Department issued Final Rules on the VAWA amendments before November 1, 2014, the new regulations went into full effect on July 1, 2015, per the Department's Master Calendar. Baker is advised to ensure that its sexual assault prevention and response policies and procedures comply with the VAWA requirements. College officials may view the Final Rule at: <http://ifap.ed.gov/fregisters/attachments/FR102014FinalRuleViolenceAgainstWomenAct.pdf>.

Finding 3: Drug and Alcohol Abuse Prevention Program (DAAPP) Requirements Not Met

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 (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 and the institution must conduct a biennial review to determine the effectiveness of its DAAPP. 34 C.F.R. §§86.3, 86.100 and 86.103.

Noncompliance Summary: Baker violated multiple provisions of the DFSCA and the Department's Part 86 regulations. The institution failed to develop and implement a materially complete DAAPP. Baker also violated DFSCA's annual DAAPP disclosure distribution requirement by failing to deliver program information to all employees and students who are enrolled for any academic credit each year. In addition, Baker failed to provide evidence that the institution conducted a Biennial Review of the effectiveness of its drug and alcohol abuse prevention program.

Required Action Summary: Baker was required to publish a materially-completed annual DAAPP disclosure and develop detailed policies and procedures that would ensure that the DAAPP disclosure is distributed in accordance with DFSCA. In addition, Baker was required to conduct a biennial review to measure the effectiveness of its DAAPP.

Baker's Response: In its official response, Baker concurred with the finding and stated that although Baker originally provided a list of local, state, and federal sanctions, it concurred that more detailed information could have been provided. Baker claimed that it created a new DAAPP which provides more information about local, state, and federal sanctions.

Baker also concurred with the finding that Baker failed to provide evidence that the DAAPP was distributed to students who enrolled after the annual distribution and have created new policies to ensure that this violation will not reoccur. Baker provided documentation that on both September 29, 2015 as well as January 13, 2016 email notifications were sent to all students and staff who did not receive the initial fall notification. Baker indicated that its online admissions application and all job postings now include a statement and link to the ASR. Baker stated that it has also developed new policies to ensure quarterly email notifications are sent to all students and employees who did not receive the October 1st email.

Furthermore, Baker agreed with the finding that it failed to provide evidence of the biennial review and have gathered documentation from all campuses regarding the programs offered. Baker claimed that it has held several meetings to establish a plan to help ensure that the DAAPP is improved as well as the process for future biennial reviews. Baker indicated that it conducted a biennial review on January 21, 2016. During Baker's internal review, Baker stated that it established new prevention programs that will be administered to all students and employees.

Finally, Baker certified that it understands its DAAPP and *DFSCA* requirements and that future violations will not recur.

Final Determination: Finding 3 of the program review report cited Baker for multiple violations of the *DFSCA* and the Part 86 Regulations, as outlined in the Noncompliance section above. Specifically, the review team found that Baker failed to develop and implement a compliant DAAPP. Reviewers determined that Baker's DAAPP for 2014 did not include an adequate description of the individual local, state and Federal sanctions associated with the use, distribution, and sale of illegal drugs. Baker also violated the *DFSCA's* annual DAAPP disclosure distribution requirement by failing to deliver program information to all employees and students who are enrolled for any academic credit in 2014. Finally, Baker failed to conduct a biennial review in 2014 to assess the effectiveness of its DAAPP and the consistency of its disciplinary processes and as a consequence, was also unable to produce the required report of findings, recommendations, and supporting documentation.

These separate and distinct violations necessarily follow from each other because the biennial review is primarily a study of the effectiveness of the DAAPP. Therefore, Baker 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, Baker 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, Baker 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 all available information including Baker's narrative response and supporting documentation. Based on the Department's review and Baker's admissions, 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 Baker's new DAAPP, new annual disclosure, biennial review report, and new internal policies and procedures. As such, the Department determined that Baker'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 the College are put on notice that Baker 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.

In this regard, Baker is specifically advised that it must continue to develop its DAAPP. Baker must also ensure that it actively distributes accurate and complete program materials to all students and employees on an annual basis in accordance with the

Department's regulations and its own procedures. In addition, Baker must ensure that its next biennial review is a comprehensive assessment of the DAAPP's effectiveness. The review must include a substantive evaluation of the goals and objectives of Baker's substance abuse programs and must examine the strengths and weaknesses of the program as well as the efficacy of the policies and procedures that underlie it. The review process must not merely be or become a conclusory ratification of existing policy. Baker is further advised that its next report must contain substantially more information about the actual conduct of the review and that all findings and recommendations must be supported by valid evidentiary data. Each report must also be approved by the Baker's President and/or its board. Finally, Baker must implement procedures and provide sufficient oversight to ensure that future reviews are conducted on the required schedule.

Baker is once again 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. Baker asserted that it has taken adequate remedial actions and that by doing so, is now in compliance with the *DFSCA* as required by its PPA. Nevertheless, Baker officials must understand that the Department deems compliance with the *DFSCA* is essential to maintaining a safe and healthy learning environment. This is true for all institutions regardless of their size, location, or organizational structure. Data compiled by the Department shows that the use of illicit drugs and alcohol abuse is highly correlated to increased incidents of violent crimes 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 programs that may have been in place during the review period. For these reasons, Baker 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.

Finally, the Department strongly recommends that Baker re-examine its drug and alcohol 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 *DFSCA*. Please be advised that the Department may request information on a periodic basis to test the effectiveness of Baker's new policies and procedures.

D. Appendices

Appendix A, Student Sample, contain personally identifiable information and will be emailed to Baker as an encrypted WinZip file using Advanced Encryption Standard, 256-bit. The password needed to open the encrypted WinZip file(s) will be sent in a separate email.

Appendices B and C are attached to this report.

Not Applicable (N/A)

Not Applicable (N/A)