

STATE OF FLORIDA AUDITOR GENERAL

Operational Audit

Report No. 2024-054
November 2023

ST. PETERSBURG COLLEGE



Sherrill F. Norman, CPA
Auditor General

Board of Trustees and President

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The team leader was Joey Chen, CPA, and the audit was supervised by Anna A. McCormick, CPA.

Please address inquiries regarding this report to Jaime N. Hoelscher, CPA, Audit Manager, by e-mail at jaimehoelscher@aud.state.fl.us or by telephone at (850) 412-2868.

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ST. PETERSBURG COLLEGE

SUMMARY

This operational audit of St Petersburg College (College) focused on selected College processes and administrative activities and included a follow-up on findings noted in our report No. 2021-060. Our operational audit disclosed the following:

Finding 1: Required background screenings were not always conducted for College employees.

Finding 2: The College did not always obtain documentation to support the eligibility of dependents enrolled in the College health insurance plan or provide timely cancellation of health insurance coverage for individuals who separated from College employment.

Finding 3: Two management employees had unnecessary information technology (IT) user access to both payroll and human resource (HR) functions, which did not promote an appropriate separation of duties.

Finding 4: Some unnecessary IT user access privileges continued to exist, increasing the risk for unauthorized disclosure of student social security numbers to occur.

BACKGROUND

St. Petersburg College (College) is under the general direction and control of the Florida Department of Education, Division of Florida Colleges, and is governed by State law and State Board of Education rules. A board of trustees (Board) governs and operates the College. The Board constitutes a corporation and is composed of five members appointed by the Governor and confirmed by the Senate. The College President serves as the Executive Officer and the Corporate Secretary of the Board and is responsible for the operation and administration of the College.

The College has campuses in Clearwater, Seminole, St. Petersburg, and Tarpon Springs, Florida. Additionally, credit and noncredit classes are offered in public schools and other locations throughout Pinellas County.

FINDINGS AND RECOMMENDATIONS

Finding 1: Background Screening

State law¹ requires colleges to designate the positions of special trust or responsibility that are subject to a level 2 background screening² and also requires³ personnel who are hired or contracted to fill positions in any charter school to undergo the background screening at least once every 5 years. College

¹ Section 1012.8551, Florida Statutes.

² A level 2 background screening includes fingerprinting for Statewide criminal history records checks through the Florida Department of Law Enforcement (FDLE), national criminal history records checks through the Federal Bureau of Investigation and may include local criminal checks through local law enforcement agencies.

³ Section 1012.32(2)(b)1., Florida Statutes.

procedures⁴ require all College employees to have a level 2 background screening and the College contracted with a third-party vendor to conduct a limited background check⁵ for applicants as a condition of employment.

To evaluate College compliance with required background screenings, we requested College records supporting level 2 background screenings for the 27 employees who worked at the College charter schools⁶ as of December 31, 2022, and 30 of the 452 individuals hired during the 2022 calendar year to work at other College locations. While support for level 2 background screenings was provided for 22 employees, College records only supported certain elements of level 1 background checks for the other 35 employees. The 35 employees included 34 employees (15 College instructors, 7 College charter school employees, and 12 employees from other College departments) hired in the 2022 calendar year and 1 charter school employee hired in the 2008 calendar year.

According to College personnel, they thought the contracted third-party vendor had conducted the level 2 background screenings; however, College-established procedures did not require anyone to verify that the required screenings were done, and the contract did not require the vendor to conduct level 2 background screenings. Absent effective controls to ensure that required level 2 background screenings are timely obtained, and the results promptly verified, there is an increased risk that the College will not comply with State law and College procedures and employ individuals with unsuitable backgrounds.

Recommendation: The College should enhance procedures to ensure that the required background screenings are promptly obtained and evaluated for all employees, and make personnel decisions, as necessary based on evaluations of the screening results. Such enhancements should include added provisions in the third-party vendor contract to require level 2 background screenings and documented verifications that the required screenings were done.

Finding 2: Health Insurance

For the 2022 calendar year, the College offered a health insurance plan for College employees and their dependents and contributed \$15 million toward health insurance premium costs. Pursuant to State law,⁷ retirees who elect to continue participation in the College health insurance plan pay a premium cost of no more than the premium cost applicable to active employees. As of December 31, 2022, the College health insurance plan insured 1,176 employees, 17 retirees, and 821 dependents, including spouses, domestic partners, and qualifying children.

To ensure that only eligible dependents participate in the College health insurance plan, procedures to obtain and verify documentation supporting dependent eligibility are necessary. In addition, procedures

⁴ College Procedure No. P6Hx23-2.08, *Requirements of Records for All Employees*.

⁵ The vendor-provided background checks included employment history checks and the local criminal records checks through local law enforcement agencies but did not include other requirements for level 1 background checks, such as the Statewide criminal correspondence check through the Florida Department of Law Enforcement (FDLE) or checks of the Dru Sjodin National Sex Offender Public Website.

⁶ The Collegiate High Schools (St. Petersburg College Collegiate High School, St. Petersburg Collegiate High School North Pinellas, and St. Petersburg Collegiate STEM High School) are charter schools located on College campuses, entirely staffed by College employees, and included as a department of the College financial reporting entity.

⁷ Section 112.0801, Florida Statutes.

are necessary to ensure that individuals and their dependents are promptly removed from the College health insurance plan when individuals separate from College employment and are no longer eligible to participate.

To enroll dependent participants in the College health insurance plan, the 2022 Employee Benefit Guide (effective January 2022) required College employees to contact the Human Resources (HR) Department within 30 days of a qualifying life event and provide documentation supporting the event (e.g., marriage, birth of a child, or adoption of a child). According to College personnel, in October 2022, examples of acceptable supporting documentation were defined.

As part of our audit, we requested for examination College records supporting verifications of the health insurance participant eligibility for 37 selected dependents enrolled in the College health insurance plan before October 2022 and 16 selected dependents enrolled in November and December 2022. However, College records evidencing College verifications of the eligibility of 36 of the 37 dependents enrolled before October 2022 and the 16 dependents enrolled after October 2022 were not provided. According to College personnel, documentation was not always obtained because acceptable supporting documentation was not defined until October 2022 and the 16 dependents enrolled after October 2022 were dependents of employees hired before October 2022.

We also requested for examination College records supporting timely cancellation of health insurance coverage for the 10 College health insurance plan participants whose employment with the College was discontinued during the 2022 calendar year. We found that all 10 former employees retained health insurance coverage for 1 to 6 months, an average of 3 months, after the end of the last month that they were eligible. While the College generates monthly health insurance enrollment reports from the insurance provider database and uses the reports to calculate the monthly health insurance premium payments, College procedures were not in place to reconcile the monthly premium payments to College payroll records, evidencing employee deductions and contributions and identifying employment separations to promptly remove individuals no longer eligible for insurance. According to College personnel, the College canceled the insurance for 2 of the 10 former employees as of December 31, 2022, in connection with the open enrollment process. The other 8 former employees' insurance was canceled during the period May 2022 through November 2022 and, although we requested, College personnel did not explain what prompted the College to cancel the insurance for these 8 individuals.

Absent effective procedures to ensure that dependents receiving insurance benefits are eligible for those benefits and to reconcile monthly health insurance premiums to payroll records, the risk is increased that the College may pay health insurance premiums for dependents and former College employees who are not eligible for coverage. Claims for ineligible dependents and former employees could increase future health insurance premium costs paid by the College, College employees, and the College's participating retirees.

Recommendation: The College should demonstrate compliance with College procedures by obtaining applicable documents supporting qualifying life events and documenting verification of dependent eligibility. The College should also establish procedures to reconcile monthly health insurance premium payments to payroll records evidencing employee deductions and contributions to help confirm the continued eligibility of health insurance plan participants.

Finding 3: Information Technology User Access Privileges to Business Applications

Access controls are intended to protect data and information technology (IT) resources from unauthorized disclosure, modification, or destruction. Effective access controls provide IT users access to IT resources based on a demonstrated need to view, change, or delete data and restrict IT users from performing incompatible functions or functions outside their areas of responsibilities. Proper assignment and periodic evaluations of assigned IT access privileges help ensure that IT users cannot access or modify IT resources that are unnecessary or incompatible with their assigned duties.

As part of our procedures, in May 2023 we examined College records supporting the access privileges of 39 selected IT users from the 2,632 users with IT access privileges to critical functions in the College business applications for finance, payroll, and human resources (HR). We found that the College had assigned the Chief HR and Talent Officer (HR Director) and the Vice President of Workforce and Corporate Partnerships (Vice President) unnecessary access to both payroll and HR functions, which did not promote an appropriate separation of duties. For example, these employees had the ability to process payroll and add a new employee or change an employee's profile information, including an employee's pay rate, bank, and address information. In addition, College procedures did not require periodic evaluations of assigned IT user access privileges in the College business applications.

In response to our inquiries, College personnel indicated that the unnecessary access of the Vice President was granted in October 2020 so the employee could perform functions of the payroll manager and HR Director positions, which were vacant until May 2021 and June 2021, respectively. Due to oversights, the Vice President continued to have unnecessary access until the College removed the access after our inquiry in June 2023. College personnel also indicated that the HR Director's payroll access was granted when he was hired in June 2021 and that, while he has not used the payroll access, as of September 2023, the College preferred to continue his access. Although the College had certain controls (e.g., payroll and other expense processing controls) that somewhat mitigated the HR Director's unnecessary access, the existence of unnecessary and incompatible access privileges increases the risk for unauthorized transactions to occur without timely detection and correction.

Recommendation: College management should establish procedures to require periodic evaluations of IT user access privileges to ensure that assigned IT access privileges restrict employees from performing functions incompatible with their assigned job responsibilities or outside their areas of responsibilities. In addition, we recommend that the College remove the HR Director's access to IT resources that are unnecessary or incompatible with his assigned duties.

Finding 4: Information Technology User Access Privileges to Sensitive Personal Information

The Legislature has recognized in State law⁸ that social security numbers (SSNs) can be used to acquire sensitive personal information, the release of which could result in fraud against individuals or cause other financial or personal harm. Therefore, public entities are required to provide extra care in maintaining the confidential status of such information. Effective controls restrict employees from accessing sensitive personal information unnecessary for their assigned duties and provide for

⁸ Section 119.071(5)(a), Florida Statutes.

documented, periodic evaluations of employee access privileges to help prevent personnel from accessing sensitive personal information inconsistent with their duties.

According to College personnel, the College collects and uses student SSNs for various purposes, such as to register newly enrolled students, comply with Federal tax reporting requirements and other Federal and State requirements related to financial and academic assistance, and perform other College responsibilities. In addition, employee supervisors and department administrators are required to approve IT user access privileges based on a demonstrated need for that access. As of December 2022, the College IT system contained SSNs for 887,817 students, including 684,773 former, 25,816 current, and 177,228 prospective students, and 138 employees had access to that information.

As part of our audit procedures, we examined College records supporting the access privileges of 26 selected employees to determine the appropriateness and necessity of the access privileges based on the employees' assigned job responsibilities. We found that the 26 employees had a legitimate education purpose for having access to certain student SSNs; however, not all 26 employees needed access to all student SSNs and the College IT system did not have a mechanism to differentiate employee access privileges to former, current, and prospective student SSNs.

We also found that, while State *General Records Schedules*⁹ require retention periods of 5 years for certain records of students who apply for admission but are denied or who did not register, the College had not established a time frame for discarding the information and College records did not demonstrate a cost-benefit or risk analysis to justify maintaining this information indefinitely. Our procedures disclosed that the College had retained sensitive personal information for 86 percent of the prospective students for more than 5 years, including some retained more than 40 years. In response to our inquiry, College personnel indicated that prospective student records were retained indefinitely to support future enrollment and streamline the application or readmission process for students. Notwithstanding this response, the public purpose served for maintaining sensitive personal information of prospective students beyond the required 5 years was not readily apparent.

The existence of unnecessary access privileges increases the risk of unauthorized disclosure of student SSNs and the possibility that sensitive personal information may be used to commit a fraud against College students or others. Similar findings were noted in report Nos. 2021-060 and 2018-081.

Recommendation: To ensure access to confidential and sensitive personal information is properly safeguarded, the College should:

- **Upgrade the College IT system to include a mechanism to differentiate the IT user access privileges to former, prospective, and current student information and limit access to that information based on employee responsibilities.**
- **Document the public purpose served for maintaining prospective student information beyond 5 years, establish a reasonable time frame for maintaining that information, and remove the information when the time frame expires.**

⁹ Florida Department of State, Division of Library and Information Services - *General Records Schedule GS5 For Public Universities and Colleges*, Item #97.

PRIOR AUDIT FOLLOW-UP

The College had taken corrective actions for findings included in our report Nos. 2021-060 and 2018-081 except as noted in Finding 4.

OBJECTIVES, SCOPE, AND METHODOLOGY

The Auditor General conducts operational audits of governmental entities to provide the Legislature, Florida's citizens, public entity management, and other stakeholders unbiased, timely, and relevant information for use in promoting government accountability and stewardship and improving government operations.

We conducted this operational audit from March 2023 through July 2023 in accordance with generally accepted government auditing standards. Those standards require that we plan and perform the audit to obtain sufficient, appropriate evidence to provide a reasonable basis for our findings and conclusions based on our audit objectives. We believe that the evidence obtained provides a reasonable basis for our findings and conclusions based on our audit objectives.

This operational audit focused on selected processes and administrative activities. For those areas, our audit objectives were to:

- Evaluate management's performance in establishing and maintaining internal controls, including controls designed to prevent and detect fraud, waste, and abuse, and in administering assigned responsibilities in accordance with applicable laws, rules, regulations, contracts, grant agreements, and other guidelines.
- Examine internal controls designed and placed in operation to promote and encourage the achievement of management's control objectives in the categories of compliance, economic and efficient operations, reliability of records and reports, and safeguarding of assets, and identify weaknesses in those controls.
- Determine whether management had taken corrective actions for findings included in our report No. 2021-060.
- Identify statutory and fiscal changes that may be recommended to the Legislature pursuant to Section 11.45(7)(h), Florida Statutes.

This audit was designed to identify, for those areas included within the scope of the audit, weaknesses in management's internal controls significant to our audit objectives; instances of noncompliance with applicable laws, rules, regulations, contracts, grant agreements, and other guidelines; and instances of inefficient or ineffective operational policies, procedures, or practices. The focus of this audit was to identify problems so that they may be corrected in such a way as to improve government accountability and efficiency and the stewardship of management. Professional judgment has been used in determining significance and audit risk and in selecting the particular transactions, legal compliance matters, records, and controls considered.

As described in more detail below, for those programs, activities, and functions included within the scope of our audit, our audit work included, but was not limited to, communicating to management and those charged with governance the scope, objectives, timing, overall methodology, and reporting of our audit; obtaining an understanding of the program, activity, or function; identifying and evaluating internal

controls significant to our audit objectives; exercising professional judgment in considering significance and audit risk in the design and execution of the research, interviews, tests, analyses, and other procedures included in the audit methodology; obtaining reasonable assurance of the overall sufficiency and appropriateness of the evidence gathered in support of our audit findings and conclusions; and reporting on the results of the audit as required by governing laws and auditing standards.

Our audit included the selection and examination of transactions and records, as well as events and conditions, occurring during the audit period of March 2023 through July 2023 and selected College actions taken prior and subsequent thereto. Unless otherwise indicated in this report, these records and transactions were not selected with the intent of statistically projecting the results, although we have presented for perspective, where practicable, information concerning relevant population value or size and quantifications relative to the items selected for examination.

An audit by its nature does not include a review of all records and actions of management, staff, and vendors and, as a consequence, cannot be relied upon to identify all instances of noncompliance, fraud, waste, abuse, or inefficiency.

In conducting our audit, we:

- Reviewed applicable laws, rules, Board policies and procedures, and other guidelines, and interviewed College personnel to obtain an understanding of applicable processes and administrative activities and related requirements.
- Reviewed College information technology (IT) policies and procedures to determine whether the policies and procedures addressed certain important IT control functions, such as security, systems development and maintenance, disaster recovery, and incident response and recovery.
- Evaluated College procedures for maintaining and reviewing employee access to IT data and resources. We examined access privileges to the finance and human resources applications during the audit period for 39 of the 2,632 total users to determine the appropriateness and necessity of the access based on the employees' job duties and user account functions and the adequacy with regard to preventing the performance of incompatible duties.
- Evaluated College procedures that prohibit former employees' access to College IT data and resources. From the population of 175 employees who separated from College employment during the audit period, we examined the access privileges for 30 selected former employees to determine whether their access privileges had been timely deactivated.
- Evaluated College procedures for protecting sensitive personal information of students, including social security numbers (SSNs). From the population of 138 employees with access to student SSNs during the audit period, we examined College records supporting the access privileges of 26 selected employees to determine the appropriateness and necessity of the access privileges based on the employees' assigned job responsibilities.
- Evaluated Board policies prohibiting employees from soliciting or accepting gifts in connection with any decision, approval, disapproval, or recommendation affecting the College's purchasing or contracting decisions.
- Examined College records to determine whether student user fees totaling \$18.4 million that were collected during the audit period were properly assessed and authorized, accurately calculated, correctly recorded, and used in accordance with Board policy, statutory, and State Board requirements. Specifically, we examined College records:
 - Supporting selected collections, including laboratory, financial aid, student activity, capital improvement, and technology fees totaling \$17.4 million to determine whether the College

properly assessed and separately accounted for the amounts as required by Section 1009.23, Florida Statutes.

- Supporting 30 selected expenses totaling \$1.6 million of the \$10.3 million total expenses from student activity, capital improvement, and technology fees to determine whether these funds were expended in compliance with the restrictions imposed on the use of these fees.
- To determine whether the distance learning fees totaling \$4.1 million from the 1,297 distance learning courses during the audit period were assessed, collected, and separately accounted for in accordance with Section 1009.23(16)(a) and (b), Florida Statutes.
- From the population of compensation payments totaling \$84.9 million made to 2,569 employees during the audit period, selected payments totaling \$97,182 made to 30 employees and examined College records supporting the payments to determine whether the rate of pay was accurate, employment contracts were valid, employees met the required qualifications, performance evaluations were completed, leave records were accurate, and supervisory personnel reviewed and approved employee reports of time worked.
- Evaluated Board policies and College procedures to ensure that health insurance was provided only to eligible employees, dependents, and retirees and that, upon an employee's separation from College employment, insurance benefits were timely canceled as appropriate based on the Board policies. We also determined whether College procedures were effective for reconciling health insurance costs to employee, retiree, and Board-approved contributions.
- Evaluated Board policies and College procedures for obtaining required personnel background screenings. From the 27 employees who worked at the College charter schools as of December 31, 2022, and the 452 individuals hired during the 2022 calendar year to work at other College locations, we requested for examination College records supporting the required background screenings for all 27 College charter school employees and 30 other selected employees hired during the audit period.
- From the population of 729 industry certifications reported for performance funding that were attained by students during the 2021-22 fiscal year, examined 30 industry certifications to determine whether the College maintained documentation for student attainment of the industry certifications.
- Determined whether the College's unencumbered balance in the general fund was below the threshold established in Section 1011.84, Florida Statutes.
- Inquired whether the College had any expenses or entered into any contracts under the authority granted by a state of emergency, declared or renewed during the audit period.
- Communicated on an interim basis with applicable officials to ensure the timely resolution of issues involving controls and noncompliance.
- Performed various other auditing procedures, including analytical procedures, as necessary, to accomplish the objectives of the audit.
- Prepared and submitted for management response the findings and recommendations that are included in this report and which describe the matters requiring corrective actions. Management's response is included in this report under the heading **MANAGEMENT'S RESPONSE**.

AUTHORITY

Section 11.45, Florida Statutes, requires that the Auditor General conduct an operational audit of each College on a periodic basis. Pursuant to the provisions of Section 11.45, Florida Statutes, I have directed that this report be prepared to present the results of our operational audit.

A handwritten signature in blue ink that reads "Sherrill F. Norman". The signature is fluid and cursive, with a large initial 'S'.

Sherrill F. Norman, CPA
Auditor General

MANAGEMENT'S RESPONSE

St. Petersburg College



Office of the President

727-341-3241

Board of Trustees

Chair-Thomas-Kidwell, Vice-Chair-Jason-Butts, Trustee-Katherine-E.-Cole,

Trustee-Deveron-M.-Gibbons, Trustee-Nathan-Stonecipher, President-Tonjua-Williams

November 10, 2023

To: Auditor General – State of Florida

From: St. Petersburg College

Subject: Operational audit response to tentative audit findings

Finding 1: Background Screening

Recommendation:

The College should enhance procedures to ensure that the required background screenings are promptly obtained and evaluated for all employees, and make personnel decisions, as necessary, based on evaluations of the screening results. Such enhancements should include added provisions in the third-party vendor contract to require level 2 background screenings and documented verifications that the required screenings were done.

Response to Finding 1:

1. **Level II Background Checks Implementation:** We have implemented the Level II Background Check for all new hires, rehires, contributed services (contractors), volunteers, and student employees effective July 1, 2023. This enhanced screening process will ensure higher scrutiny and due diligence in our hiring practices.
2. **Retroactive Level II Background Checks:** To maintain consistency and uphold our commitment to security, all individuals hired between July 1, 2021- June 30, 2023, the college will require them to complete a Level II Background Check within the next 90 days.

Finding 2: Health Insurance

Recommendation:

The College should demonstrate compliance with college procedures by obtaining applicable documents supporting qualifying life events and documenting verification of dependent eligibility. The College should also establish procedures to reconcile monthly health insurance premium payments to payroll records evidencing employee deductions and contributions to help confirm the continued eligibility of health insurance plan participants.

Response to Finding 2:

In response to finding #2, we have or are taking the following action to address the situation and ensure the necessary improvements:

Dependent Verification for all Employee enrolling in Employee Plus Plans:

During our open enrollment period in 2024, we have required all employees selecting the Employee Plus plans to provide dependent verification information by November 12, 2023. Employees must provide this information, or they will automatically be enrolled in the Employee Only plan. This process will help us maintain the integrity of our benefits programs and ensure that only eligible dependents are covered.

Proper Documentation for Qualifying Life Events (QLE) and Dependent Verification:

Effective immediately, employees requesting changes due to Qualifying Life Events (QLE) must provide all supporting documentation and information for dependent verification prior to the change within the system. Changes will only be made with the proper documentation, ensuring the legitimacy of any mid-year benefit changes.

Enhanced Monthly Statement Reconciliation:

Our benefits team will conduct a more rigorous reconciliation of monthly statements with the termination report. This meticulous approach will help us promptly identify discrepancies and address them, ensuring accurate benefit records.

Frequent Data Uploads to Third-Party Administrator:

We have transitioned from bi-monthly to weekly data uploads to our third-party administrator to enhance data accuracy and processing efficiency. This change will enable us to maintain real-time data accuracy and improve the overall administration of our benefit programs.

These steps underscore our unwavering commitment to ensuring the integrity and security of our organization.

Finding 3: Information Technology User Access Privileges to Business Applications**Recommendation:**

College management should establish procedures to require periodic evaluations of IT user access privileges to ensure that assigned IT access privileges restrict employees from performing functions incompatible with their assigned job responsibilities or outside their areas of responsibilities. In addition, we recommend that the College remove the HR Director's access to IT resources that are unnecessary or incompatible with his assigned duties.

Response to Finding 3:

St. Petersburg College takes the security of our systems and the safekeeping of sensitive information very seriously. We concede that access for the two individuals mentioned by position in the findings had more access than required for their job and that access was not revoked to the HR/Payroll system from the VP of Workforce in a timely manner after her engagement and leadership assignment in HR concluded. Access to HR and Payroll systems was removed from the VP of Workforce shortly after this was brought to our attention. The payroll access for the College's current Chief Human Resources and Talent Acquisition Officer was removed on October 25, 2023, in keeping with the idea of separating these duties from HR oversight.

In the last year, we implemented a process to review access privileges in our Campus Solutions system. As a result, we have removed access to certain processes and information where we deemed the employee no longer needed those privileges. Further refinement to ensure that proper controls are in place is in progress. St. Petersburg College will develop similar processes to periodically review the access privileges to our Business Applications

(HR, Payroll and Finance) and remove access where privileges are no longer required based on current job responsibilities.

Finding 4: Information Technology User Access Privileges to Sensitive Personal Information

Recommendation:

To ensure access to confidential and sensitive personal information is properly safeguarded, the College should:

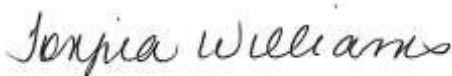
- Upgrade the College IT system to include a mechanism to differentiate the IT user access privileges to former, prospective, and current student information and limit access to that information based on employee responsibilities.
- Document the public purpose served for maintaining prospective student information beyond 5 years, establish a reasonable time frame for maintaining that information, and remove the information when the time frame expires.

Response to Finding 4:

The PeopleSoft Campus Solutions System does not have a mechanism to differentiate access to the student’s Social Security Number (SSN) based on where the student is in the student lifecycle, i.e., prospect, current, or former student. Implementing such a mechanism would be extremely difficult to deploy and maintain as students are fluid within the lifecycle, e.g., a prospective student today could be a current student tomorrow and a former student today could be a current student tomorrow. Nevertheless, we will research and explore to see if this is possible. In parallel, we will continue to scrutinize which users have access to sensitive Personally Identifiable Information (PII). In recent years, we have significantly reduced the number of users who can view the student’s SSN and Date of Birth, either in full or in part. We will implement a formal periodic review process of this access.

In August of 2023, a cross functional working group was formed to review existing best practices in student records management and retention. St. Petersburg College is developing an electronic records retention process that will align with the State’s *General Records Schedules*. The College is working swiftly on a policy to determine what types of records should be purged and how frequently. Once the policy is adopted, we will begin to purge records. We will prioritize the purging of SSN for applicants that never enrolled at SPC (prospects) in keeping with the defined policy, e.g., only keeping the SSN for the most recent 5 years.

Sincerely,



Tonjua Williams, Ph.D
President
St. Petersburg College

MAILING ADDRESS: Post Office Box 13489, St. Petersburg, FL
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AN EQUAL ACCESS/EQUAL OPPORTUNITY INSTITUTION