HEALTH AND WELLNESS PLAN RELATING TO ALCOHOL AND OTHER DRUG USE AT REED COLLEGE
As Adopted by the President of Reed College
May 6, 2009

I. Preamble

This Plan describes a strategy for implementing the College’s official Policy on Drugs and Alcohol. It is informed, above all, by considerations of health and wellness. Such considerations are understood to be essential in supporting and sustaining the academic mission of the College and the well-being of the Reed community.

The abuse and/or illegal use, possession and distribution of alcohol and other drugs (AOD) have serious negative impacts on the user, on other members of the community and on the institution itself. Negative impacts may be social, academic, legal or ethical in nature. But such impacts are, in all cases, closely connected to the direct or indirect threat that substance abuse poses to the health and wellness of all members of the Reed community.

This plan is intended to clarify the approaches taken by Reed College to execute its Drug and Alcohol Policy and in no way should be interpreted to supersede that legislated policy. The Plan presents a comprehensive strategy that focuses on the promotion of overall health, education and wellness programs and a clear explanation of enforcement protocols. The plan was adopted by the President following consultation with the Drug and Alcohol Committee. Subsequent revisions will be adopted only following further consultation with the Committee.
The Plan is divided into four sections detailing campus strategies for (a) monitoring the use of alcohol and other drugs, (b) promoting health and wellness through prevention and education, (c) providing treatment to community members in need, (d) describing mechanisms of response to violations of the Drug and Alcohol Policy and (e) describing protocols for Community Safety in handling violations of the Policy.

II. Planning, Research, & Reporting

A critical aspect of planning, executing and monitoring the progress of a drug and alcohol policy is the assessment of the types of AOD issues present within the community and the determination of risk factors and problematic behaviors. The results of such research and assessment should then be used to raise awareness within the community of the nature and seriousness of the problem and to help guide selection of prevention, health and wellness interventions and enforcement programs.

In an effort to better understand the patterns and implications of AOD use on campus, the Vice-President/Dean of Students (VP/DOS) will:

• Provide incident reports to the President and Vice Presidents on a regular basis.
• Report at least annually to the Student Life Committee of the Board of Trustees on the state of AOD issues at Reed.
• Communicate on a regular basis with the Student Body President and Vice-President and with the Drug and Alcohol Committee regarding current AOD issues. This should include summaries and analyses of relevant surveys and of incident reports, in a manner that preserves the confidentiality of the individuals involved.

In partnership with the Director of Institutional Research, the VP/DOS and the Associate Dean for Health and Wellness will:

• Monitor current research and information relating to best practices in addressing AOD issues in higher education.
• Continue at regular intervals to administer standardized surveys of current students and incoming freshmen about their experiences with AOD; benchmark with similar institutions and share aggregate results of anonymous surveys.
• Survey students periodically, using an instrument of our own design that would elucidate more specific and relevant information not captured on standardized measures.
• Promulgate a standard protocol to capture and report statistical information from Community Safety, Residence Life, Health and Counseling and the Registrar. Report these data annually to trustees, faculty, students and staff.
• Identify patterns that may be associated with deleterious health and academic outcomes. We will further identify, in the national literature and in our own practice, those interventions that are most likely to be effective in reducing the potential and/or actual impacts of such behaviors and risk factors.
III. Education, Prevention, & Wellness

Compelling data in the AOD literature suggest that support of healthy lifestyle choices significantly reduces the risk of deleterious AOD use. In addition, a variety of constituencies in the Reed community continue to express an interest in unfettered access to accurate information about the physiological effects of AOD use and abuse. In an effort to adhere to best practices and meet the needs of the community, the VP/DOS will:

- Expand staff and faculty training and provide a wider variety of opportunities for students to explore issues related to substance use and abuse in discussions with peers, faculty, health and counseling staff and national experts in the field.

- Collaborate with College Relations staff to assess the most effective ways to engage concerned alumni and community members.

- Evaluate various programmatic options:
  - Publicize professionally reliable and up-to-date sources of information (on the web or elsewhere) about the effects and risks of AOD use.
  - Continue to present an AOD session at Orientation. This session should minimally include information on what the policy is, how it will be enforced and what repercussions students might face if they make the decision to disregard the policy. The session should also provide state of the art information on effects of AOD use on brain chemistry and functioning, short and long term, as well as risks of adverse health effects. If information relating to the latter does not fit in the Orientation schedule, the Orientation staff will work with other student services units on campus to ensure that it is presented early in the academic year.
  - Invite a legal professional to participate in discussions of legal risks associated with AOD use, including criminal enforcement protocols and procedures.
  - Invite rehabilitated addicts, especially current or former students, to present their personal histories to students.
  - Include in educational programs a complete, accurate, transparent account of the procedures followed by the College (including CSOs, Residence Life, Health & Counseling and the VP/DOS’s office) in cases of suspected or known AOD possession, use, distribution, or sale.
  - Collaborate with the Drug and Alcohol Committee to provide educational programs for the entire community throughout the academic year. For example, have small group meetings in residence halls during mid-fall to discuss AOD issues and concerns in a candid fashion and provide
information sessions annually for the entire community on AOD concerns at Reed.

- Enhance the quantity and quality of information about AOD risks and policies on the Reed College website.

- Post and distribute information about whom to contact in the event that a student thinks s/he may have a problem or thinks a friend may have a problem.

- Take steps to assure that all persons, who use college resources, auspices, or funding (including student body funds) to publish advice about the risks of using AOD, are fully informed about the personal and institutional legal risks if such advice proves to be erroneous or misleading.

- Create a permanent information resource regarding AOD to which all students would have access throughout the year. This forum for self-education could be in the form of an online database or a physical library. It would contain extensive information organized by drug types, including but not limited to known physiological and psychological effects (during use and long-term according to the best available scientific research), potential health complications beyond normal effects and information regarding origins of individual drugs. Although this resource would provide unbiased facts, it is likely that comprehensive education will discourage AOD use or at the very least aid in harm reduction.

- Provide peer educators and health advocates. While AOD experts may contribute to the educational process, research supports the effectiveness of peer educators as agents of change regarding AOD issues. However, these students must be well respected by students, have good information and be models of good AOD decision-making to be effective. Working with student leaders while developing peer-based strategies with Student Services and Residence Life is crucial. Dorm life is one setting in which such peer educators would be highly utilized and effective. Therefore, one strategy for developing these peer health advocate roles may be to provide more extensive education for House Advisors on AOD and wellness issues. To this end, House Advisors will receive more formalized training around recognizing warnings of AOD abuse and talking with students about AOD use as it affects wellness.

- Support faculty and staff education. Students are not the only members of the community that stand to benefit from the educational effort. Faculty and staff will have ready access to information regarding the direct costs to scholarship and the general campus community that hazardous AOD use propagates on campus (i.e., assaults, rape, HIV-risk behaviors). Faculty and staff will be educated as to the legal ramifications of serving minors in their homes or at campus events. Student services will be available to faculty and staff for consultation regarding AOD use (e.g., what should be done if a student is inebriated in class or in the workplace? if it appears that a student needs treatment? if someone is drunk and disorderly on
campus? if someone is clearly violating the Drug and Alcohol Policy?). Faculty will be presented this information during their initial faculty orientation as well as during annual AOD presentations to the faculty. Presentations will similarly be made to staff members on an annual basis.

- Collaborate with the Sports Center and other campus groups. AOD initiatives will be embedded within a comprehensive program to promote healthy living choices. Some members of the Reed Community engage in a number of poor health-related behaviors that impact negatively on their academic performance. These include but are not limited to poor sleep hygiene, poor nutrition, lack of exercise, smoking, unsafe sex, etc. Living a healthy lifestyle is incompatible with pathological AOD use. Promoting healthy living in the campus culture can impact AOD use indirectly by supporting mutually exclusive behaviors. The existing Wellness Committee might be a partner in supporting this work, or may be subsumed under the HCC directorship in order to more effectively integrate its services in to the mainstream of student services and the Reed community as a whole.

- Develop substance-free community activities with student input. A direct approach in changing campus culture is to structure the environment so that the choice NOT to use AOD is easy for students, primarily as a function of providing high value campus activities that are explicitly AOD-free. In addition, students will have access to dedicated funds to promote activities as substance-free social, recreational and public service options.

- Through the Office of Residence Life, offer students the option to reside in substance free (“sub-free”) housing. Experience has shown these are connected, active communities where residents demonstrate a high level of respect for themselves and one another. This healthy living option is for first-year and returning students that are willing to make a commitment to maintain a living environment free from tobacco, alcohol and other drugs.

IV. Treatment

Early Intervention - A critical question is how to identify students who are at risk for problematic AOD use. First year students are often targets of early intervention/prevention programs, particularly around hazardous drinking, because they bear the disproportionate burden for overdose and other drinking-related consequences such as injury and assault. To that end, the Health and Counseling Center will:

- Investigate the feasibility of using anonymous self-report mechanisms, as they represent potentially effective mechanisms for identifying at-risk students, directing early treatment interventions and establishing adaptive social norms.
- Provide direct intervention to students who have already demonstrated problems related to AOD. Students who have been cited for significant AOD violations will
be required to participate in an AOD program. The level of problematic behavior determines the assignment from less intensive to more intensive programming.

• Outreach to the community regarding common risk factors for and indications of AOD abuse and problems. It is clear that individuals come to AOD problems through a variety of mechanisms. Some of these factors students, staff and faculty bring with them to Reed (e.g., family history of AOD problems, ways of coping with stress), while others are environmental (e.g., free access to AOD, academic/job stress). Active outreach to the community is needed to facilitate self-care.

**Tertiary Intervention** - The mission of the Reed Health and Counseling Center (HCC) is to manage a broad range of general medical and mental health issues and to educate and promote wellness and healthy lifestyle choices for students. When AOD use/abuse adversely affects the health and functioning of a student, HCC staff will first determine if an immediate significant risk to the student exists and will recommend or institute appropriate interventions to protect the safety of the student. This may include an involuntary medical leave of absence. The HCC staff will also decide if the clinical issues are most likely to be effectively managed within the Reed HCC and/or with the intervention of a more specialized off-campus resource. As is usual, the HCC staff will assist the student in accessing referrals and provide reasonable assistance during the process. When functioning is so impaired as to represent an immediate and significant health risk and/or necessitates treatment, which would be incompatible with the academic rigors of Reed, we may instigate an involuntary medical leave of absence. Finally, while AOD use and abuse are reasonably considered and treated as medical issues, some AOD actions may be considered and managed as behavioral issues under the auspices of the office of the VP/DOS.

**Peer support** - This represents one of the most under-utilized resources on campus. We will identify ways to include students directly in effective educational and preventive initiatives and to provide sufficient training and support to include them in the process of responding to AOD issues. The Health and Counseling Center will develop facilitated and/or co-facilitated (HCC staff and student) discussion groups ranging from general AOD issues to specific substance, recovery model etc.

V. Violations of the Drug and Alcohol Policy

The response to the injurious effects of AOD must not only focus on education and prevention, but must also make clear to students what the Drug and Alcohol Policy entails, including how staff and security personnel will respond to perceived violations.

**Operating Principles** - The following considerations will guide the College’s response to alleged violations of the Drug and Alcohol Policy.

• The use of so-called “hard drugs” (including heroin, cocaine and methamphetamine) poses health risks to users that are inherently unpredictable and potentially catastrophic. The probability of adverse consequences and the
severity of those consequences – addiction, physical and mental illness, death – are very high. The College, via the VP/DOS (or his or her delegate), has a responsibility to assess and provide appropriate help for any individual who uses hard drugs, as would be the case with any member of the Reed community who has a medical emergency or other serious and untreated medical condition. Such help may include a determination that the College is unable to provide adequate services or that a student is unable to handle the academic demands of the College and that a medical leave is therefore required.

- The use of hard drugs also poses unacceptable and unnecessary threats to the well-being of the Reed College community and to the academic program. Such threats include, though are not necessarily limited to, substantial and unnecessary discomfort, offense, inconvenience, fear and danger for individual community members; the attraction of drug dealers to campus; unreasonable and unnecessary burdens on members of the staff; and serious and unnecessary exposure of the entire community or individual community members to adverse public sentiment, punitive sanction by public authorities and adverse legal action. Thus, the College will view possession of hard drugs in any amount as a very serious violation of the Drug and Alcohol Policy. The Student Services office will seek resolution through the honor process with any and all individuals who are thought to have possessed hard drugs in any amount (provided that doing so is consistent with principles of confidentiality that govern the activities of the counseling staff). Such cases will be handled through the College’s established honor process (including, where appropriate, informal and formal mediation, or honor cases).

- The College also regards as a very serious violation of the Drug and Alcohol Policy providing to any individual (whether by sale or gift) of any hard drug, in any amount. Individuals providing hard drugs to others knowingly subject another person to a potentially serious or even fatal risk of injury, typically without being able to verify the contents or strength of the substance or the tolerance of the recipient to that substance. The Student Services office will seek resolution through the honor process with any individual who is thought to have distributed hard drugs. Furthermore, the VP/DOS, in consultation with the President of the College, may refer any case involving the distribution of hard drugs to the Portland police.

- Under Oregon law, the possession of “distribution quantities” of hard drugs – quantities suitable for sale or distribution to other individuals – is a serious crime, and College officials have a moral, legal and institutional responsibility to report serious crimes to civil authorities. Thus, in addition to pursuing internal judicial remedies, the VP/DOS, in consultation with the President of the College, will ordinarily refer cases involving the possession of distribution quantities of hard drugs to the Portland police. Distribution quantities of selected hard drugs are
defined as quantities in excess of: 5 g of heroin, 10 g of cocaine and 10 g of methamphetamine. ¹

- The Drug and Alcohol Policy prohibits the possession, sale and distribution of other illegal drugs. Possessing distribution quantities of such drugs is especially egregious. The Student Services office will seek resolution through the honor process.

- The possession, sale or distribution of alcoholic beverages, where minors are involved, are violations of the Drug and Alcohol Policy. The Student Services office will seek resolution through the honor process.

- The expenditure of college funds (including student body funds and all other monies collected or disbursed by Reed College) by faculty, staff or students for the purchase of any illegal drug or for the purchase of alcohol for the purpose of distribution to minors is prohibited by the Drug and Alcohol Policy (section II.A). Enforcement of this provision may include the initiation of an honor proceedings or grievance against the person authorizing or making such expenditure, including in the case of an expenditure by any student organization, the signator(s) of that organization. Authorization or expenditure of funds for the purchase of illegal drugs will be regarded as comparable in severity to direct distribution of those drugs. Enforcement of this provision will also include a demand by the College that the person authorizing or making such expenditure reimburse the College in the amount of funds improperly expended.

**Notification and Reporting** - The following guidelines apply to instances of misuse or abuse of AOD conceived as behavioral, as opposed to, or in addition to, medical. In order to provide a consistent response to violations of the Drug and Alcohol Policy, the VP/DOS will:

- Formalize and publicize current practice of instituting a graduated set of responses comparable to our strategy for dealing with academic misconduct.

- Maintain a record of violations including all cases of possession, regardless of the amount. The VP/DOS may issue a letter to any student who violates the Drug and Alcohol Policy describing the consequences of the violation. This will include notification of escalating consequences for subsequent violations.

- Notify emergency contacts when necessary. The purpose of notification is to ensure that the College can be as effective as possible in providing treatment and counseling service. Ordinarily, notification will occur with the consent of the individual involved. Notification of the student’s emergency contact without such

¹ Quantities listed are in accordance with ORS 475.900. The above amounts include “counterfeit” materials, according to ORS.
consent will occur in situations of acute medical and/or psychiatric crisis, as determined by the VP/DOS or his/her designee.

**Responses to Possible Violations** - When informed of alleged violations of the Drug and Alcohol Policy, the College will seek to provide treatment and counseling, insofar as this is appropriate and possible as determined by the Student Services office. In addition, however, the College may also respond in ways that do not primarily involve treatment and counseling. Specifically, the responses will include:

- **Emergency support.** Upon encountering a potential violation, CSOs (or other College personnel) will, in all cases, first determine if any individual is facing an emergency medical or mental health situation. In such circumstances, CSOs (or other College personnel) will immediately seek suitable medical support. Further in such circumstances, the primary mission of CSOs will be to provide emergency help rather than to investigate the behavior of individuals who have called for assistance.

- **Reporting.** Upon encountering a potential violation, CSOs normally will, in all cases, make a report of the incident in question. Such reports will include the identity of all possible violator(s) and will be forwarded to the VP/DOS or his or her designee. The Student Services office will normally maintain a record of violations including all cases of possession, regardless of the amount. The VP/DOS may issue a letter to any student who violates the Drug and Alcohol Policy describing the consequences of the violation. This will include notification of escalating consequences for subsequent violations.

- **Confiscation.** Upon encountering a potential violation, CSOs normally will confiscate all materials thought to be illegal drugs, normally will confiscate distribution quantities of alcohol (cases of beer, beer kegs, etc.) and normally will confiscate all alcohol in the possession of minors. Confiscated material will be handled according to procedures established and published by the Community Safety office.

- **Detention.** Upon encountering a potential violation, CSOs may detain possible violators if it is reasonably believed that the violator(s) pose an imminent physical danger either to themselves or to anyone else. The sole purpose of detention is to prevent physical harm. Detention will end when it is reasonably believed that the imminent threat of physical harm – either to violator(s) or to others – no longer exists.

- **Honor Process.** All violations of the Drug and Alcohol Policy may, in principle, lead to the initiation of honor proceedings. Honor proceedings include informal mediation, formal mediation and/or resolution through an honor case. Normally, the VP/DOS or his or her designee will initiate honor proceedings against possible violators who are alleged to have possessed either distribution or non-distribution quantities of hard drugs or to have distributed hard drugs in any amount (as described in V.A.1. above) or distribution quantities of other illegal
drugs. In addition, the VP/DOS or his or her designee normally will initiate honor proceedings against individuals who are alleged to have repeatedly been in violation of the Drug and Alcohol Policy, regardless of the particular nature of the violations.

- Civil authorities. The VP/DOS or his or her designee normally will report to the Portland Police Bureau or other appropriate civil authorities the identity of individuals alleged to have been in possession of distribution quantities of hard drugs.

VI. Community Safety Department Procedures

The Community Safety Department is committed to collaborative partnerships in implementing educational, intervention and enforcement measures that are designed to support the community in making informed decisions regarding AOD. The role of the CSO in responding to any situation involving AOD is to assure the safety of individuals, to investigate and to report and refer the information to other appropriate bodies. Such referrals are conducted without being influenced by the process that might ultimately be pursued. This provides for appropriate checks and balances between those entities who carry out enforcement responsibility and those who pursue sanctions.

Patrol and Enforcement Interactions - Providing and ensuring safety on campus requires a mediated approach. Those under question with regard to any potential violation of campus policies or local laws are expected to be honest, cooperative and respectful during these interactions. Likewise, CSOs conducting investigations into alleged violations will treat all community members with honesty, respect and civility.

Patrol Practices - The Community Safety Department conducts ongoing general patrols of the campus and specialized patrols at major events and incidents to enhance safety and security. Officer activities are focused on assisting the community through various services and providing guidance regarding appropriate behavior. Regular patrols may occur in all public areas of the campus. Regular patrols do not occur in offices, apartments or dormitory rooms.

Reed College’s Drug and Alcohol Policy states that, “In keeping with local, state and federal laws, the illegal use, sale, transfer, dispensing, possession and manufacture of illicit drugs, or being under the influence of illegal drugs, or the illegal use, possession, or abusive use of alcohol on the Reed College campus or during official Reed activities is a violation of College policy and is prohibited”.

In all responses to incidents where AOD is considered a primary or secondary factor, officer shall consider the following questions in selecting a proper course of action:

- Is there a corresponding medical issue involved?
- Is there a known psychological issue involved?
- Is the person a danger to self or to others?
• Does this person have a history of related behavior?
• Is the situation a violation of Reed College policy?

Normally, the CSO will:
• Investigate the circumstance and document by identifying and interviewing principles and witnesses involved, taking statements, collecting photographic evidence, collecting and processing physical evidence and writing a report.
• Notify persons responsible for the area affected.
• Notify internal management staff utilizing notification procedures.

Emergency Support

Medical Issues. In any circumstance where AOD are the cause or have contributed to the medical concern, whether or not possession is in violation of policy or law, CSOs are expected to respond by:

• Controlling the scene. In any emergent situation, the safety of the responder is paramount. The CSO should remove any item or individual with the potential to cause harm to themselves, others and/or to the person needing assistance. This can include weapons, people, drug paraphernalia, etc. The CSO should not move an injured person, unless a danger at the scene requires it.

• Supporting the physical welfare of the person by rendering medical first aid and/or summoning professional medical assistance, determining whether the person’s behavior presents a danger to self or others and if the person having a medical concern is a student, contacting the on-call RD and/or the on-call counselor for assistance.

• If the person is in need of emergency medical attention, or if the situation requires police assistance, requesting that the dispatcher call 9-1-1. Examples include: Situations where basic aid will not suffice, suicide attempts, any situation where CPR is used and any situation where the patient is a danger to self or others.

Mental Health Issues. In any circumstance where AOD are the cause or have contributed to a psychological concern, whether or not possession is in violation of policy or law, CSOs are expected to respond by:

• Controlling the scene. In any emergent situation, the safety of the responder is paramount CSO should remove any item or action that could cause harm to themselves, others and/or to the person needing assistance. This can include weapons, people, drug paraphernalia, etc.

• Supporting the psychological welfare of the person by rendering aid and/or summoning professional assistance, determining whether the person’s behavior presents a danger to self or others and if the person experiencing psychological difficulties is a student, contacting the on-call RD and/or the on-call counselor for assistance.
• If the person is in need of psychological counseling team response, or if the situation requires police assistance, the CSO will request that the dispatcher call 9-1-1. Examples include: Situations where basic aid will not suffice, suicide attempts or any situation where the patient is a danger to self or others.

**Response to Possible Violations of the Drug and Alcohol Policy** - Situations where a CSO encounters a person in possible violation of the Reed College Drug and Alcohol Policy, the CSO normally will respond in the following manner:

• Assure the safety of the community by isolating the person.

• If necessary, secure the scene.

• If necessary, survey the scene starting with items that are immediately open and visible to determine if there is evidence to support a substantial violation of the Policy, or if the action is of such a nature that the safety or security of Reed College is compromised.

• Investigate the circumstance and document by interviewing principles and witnesses involved, taking statements, collecting photographic evidence, collecting and processing physical evidence, writing a report.

• Notify persons responsible for the area affected.

• Notify internal management staff utilizing notification procedures to determine further courses of action, including: referral to the VP/DOS or his/her designee and/or direction to the officer to contact the appropriate law enforcement agency for support.

**Confiscation** - When CSOs encounter illicit drug possession or use on campus involving materials that are not deemed as a felony to possess, the CSO must confiscate the material and any accompanying paraphernalia. CSOs will only hold and question the person for the purpose of obtaining information regarding the incident and to determine the following personal identifying information:

• Name
• Identifying information (student identification or drivers license)
• Date of Birth

When illicit drug substances and/or paraphernalia are confiscated, CSOs will follow Community Safety Department internal policies and procedures pertaining to the collection, processing, custody and disposing of evidence and property.

A Community Safety Incident Report and Evidence/Property Report will normally result in and should include date and time of incident and names and personal information of all offending persons. The reports will normally be forwarded to the Director of Community Safety.
Paraphernalia includes items such as pipes, bongs, vaporizers, cocaine spoons and cocaine vials. It should be noted that hypodermic needles do not immediately constitute illicit paraphernalia.

**Detention** - If a decision to arrest is made by the CSOs on scene, the Director of Community Safety and the VP/DOS will be immediately contacted.

Upon encountering a potential violation by a community member, CSOs may detain possible violators if it is reasonably believed that the violator(s) pose an imminent physical danger either to themselves or to anyone else. The sole purpose of detention is to prevent physical harm. Detention will end when it is reasonably believed that the imminent threat of physical harm – either to violator(s) or to others – no longer exists.

In the case of non-community members, a CSO may encounter suspected illicit drug possession and/or use within the above limits. The CSO may invoke a citizen’s arrest if the suspected possession occurs in the presence of the officer enacting the arrest. CSOs will only hold and question the person for the purpose of obtaining information regarding the incident and to determine personal information, incident to the citizen’s arrest.

Use of force is allowed to safely detain the subject as justifiable under ORS 161.255. Scope of authority is limited to the property of Reed College, including all buildings, homes and real property.

In any case where an individual is detained and arrested in accordance with ORS 133.225, the individual must be turned over to a magistrate or peace officer without delay.

If a decision to arrest is made by the CSOs on scene, the Director of Community Safety and the VP/DOS will be immediately contacted.

**Confidentiality** - All cases investigated by the Community Safety Department are considered confidential.

CSOs shall not discuss nor release outside of the investigative process any information concerning the confiscation of material or the arrest of any subject except by direction of the Director of Community Safety upon the request and coordination of the senior officers of the College or their designee(s).

Violation of confidentiality will be addressed on an individual basis and will be deemed a direct violation of an order given by the Director of Community Safety.