



VIRGINIA COMMONWEALTH UNIVERSITY

**VIRGINIA COMMONWEALTH UNIVERSITY
BOARD OF VISITORS**

May 12, 2023

12:15 p.m.¹

James Branch Cabell Library

901 Park Avenue – Room 303

Richmond, VA

AGENDA

1. **CALL TO ORDER & OPENING COMMENTS** **Mr. H. Benson Dendy, III, Rector**
5 minutes (12:15 – 12:20 p.m.)
2. **PUBLIC COMMENT PERIOD** **Ms. Chelsea Gray, Executive
Director of Board and Executive
Operations**
3. **TUITION AND FEES** **Ms. Karol Kain Gray, Senior Vice
President and CFO**
10 minutes (12:20 – 12:30 p.m.)

Action Items, recommendation for:
5 minutes (12:30 – 12:35 p.m.)
4. **PRESIDENT’S REPORT** **Dr. Michael Rao, President**
20 minutes (12:35 – 12:55 p.m.)
5. **PROJECT GABRIEL INTERIM
RECOMMENDATIONS** **Mr. Matthew Conrad, Vice
President for Government and
External Relations**
20 minutes (12:55 – 1:15 p.m.)
6. **CONSENT AGENDA ACTION ITEMS** **Mr. H. Benson Dendy, III, Rector**
5 minutes (1:15 – 1:20 p.m.)
 - a. March 23, 2023 Joint BOV/BOD minutes
 - b. March 24, 2023 meeting minutes
 - c. Audit, Integrity and Compliance Committee Action Items

¹ The start time for the Board of Visitors meeting is approximate only. The meeting may begin either before or after the listed approximate start time as Board members are ready to proceed.

- i. Committee Charter
 - ii. Committee Meeting Planner
 - iii. Audit and Compliance Services Charter
- d. Academic and Health Affairs Committee Action Items
 - i. Proposal to establish a “partially-exempt” off-campus instructional site at 5285 Shawnee Road, Alexandria, VA - Department of Nurse Anesthesia, College of Health Professions
 - ii. Proposal to close a “partially-exempt” off-campus instructional site at 6295 Edsall Road, Alexandria, VA - Department of Nurse Anesthesia, College of Health Professions
- e. Governance and Compensation Committee Action Items
 - i. Student Code of Conduct
- f. Administration Committee Action Items
 - i. Amendment to 2022-2028 Six-Year Capital Plan, Arts and Innovation Academic Building
 - ii. Design Review and Approval of Project Plans, Arts and Innovation Academic Building
 - iii. Resolution to Approve the 2024-2030 Six-Year Capital Plan
 - iv. Resolution to Initiate a Major Capital Project, Athletics Village Phase I - Outdoor Track Facilities and Practice Fields

7. CONSTITUENT REPORTS

- a. Student Representatives
10 minutes (1:20 – 1:30 p.m.)

Mr. Oscar Kemp, *Undergraduate Student BOV Representative*

Mr. Jesse Simpson, *Graduate Student BOV Representative*
- b. Faculty Representatives
5 minutes (1:30 – 1:35 p.m.)

Dr. Nancy Jallo, *Faculty Senate BOV Representative*
- c. Staff Representatives
5 minutes (1:35 – 1:40 p.m.)

Ms. Brogan King, *Staff Senate BOV Representative*

8. CLOSED SESSION – Freedom of Information
Act Sections 2.2-3711 (A) (1), (3), (7), (8), (9), (19), (23) specifically:
5 minutes (1:40 – 1:45 p.m.)

- a. Audit, Integrity and Compliance Committee
 Closed Session Report
2 minutes (1:45 – 1:47 p.m.)

Dr. Shantaram Talegaonkar, *Chair*

b. Intercollegiate Athletics Committee
Closed Session Report
2 minutes (1:47 – 1:49 p.m.)

Rev. Tyrone Nelson, Chair

c. Administration Committee Closed
Session Report
2 minutes (1:49 – 1:51 p.m.)

Mr. Andrew Florance, Chair

d. Finance and University Resources Committee
Closed Session Report
2 minutes (1:51 – 1:53 p.m.)

Mr. Todd Haymore, Chair

e. President's Report:
20 minutes (1:53 – 2:13 p.m.)

Dr. Michael Rao, President

f. **Executive Session:**
Governance Committee
Closed Session Report
72 minutes (2:13 – 3:25 p.m.)

Ms. Carolina Espinal, Chair & Vice Rector

9. **RETURN TO OPEN SESSION AND CERTIFICATION**

Mr. H. Benson Dendy, III, Rector

Resolution and Certification
2 minutes (3:25 – 3:27 p.m.)

Action Items: Approval of items discussed in closed session, if any
2 minutes (3:27 – 3:29 p.m.)

10. **OTHER BUSINESS**

Mr. H. Benson Dendy, III, Rector

- a. Open Session Reports
- b. Other

1 minute (3:29 – 3:30 p.m.)

11. **ADJOURNMENT**

Mr. H. Benson Dendy, III, Rector

VIRGINIA COMMONWEALTH UNIVERSITY BOARD OF VISITORS

AUDIT, INTEGRITY, AND COMPLIANCE COMMITTEE CHARTER

I. PURPOSE

The primary purpose of the Audit, Integrity, and Compliance Committee is to assist the Board of Visitors in fulfilling its fiduciary responsibilities related to oversight of:

- Soundness of the university's system of internal controls
- Integrity of the university's financial accounting and reporting practices
- Independence and performance of the internal and external audit functions
- Integrity of information technology infrastructure and data governance
- Effectiveness of the university's ethics and compliance program
- University's enterprise risk management program
- Legal matters

The function of the Audit, Integrity, and Compliance Committee is oversight. Audit and Compliance Services assists the Committee by providing the day to day audit, integrity and compliance operations of the University within the established authority under the governance of the Committee.

II. COMPOSITION AND INDEPENDENCE

The Audit, Integrity, and Compliance Committee will be comprised of three or more Visitors. Each member must be free from any financial, family or other material personal relationship that, in the opinion of the Board or Audit, Integrity, and Compliance Committee members, would impair their independence from management and the university.

III. MEETINGS

The Audit, Integrity, and Compliance Committee will meet at least four times annually. Additional meetings may occur more frequently as circumstances warrant. The Committee Chair should meet with the Executive Director of Audit and Compliance Services as necessary and at least prior to each Committee meeting to finalize the meeting agenda and review the issues to be discussed.

IV. RESPONSIBILITIES

In performing its oversight responsibilities, the Audit, Integrity, and Compliance Committee shall:

A. General:

1. Adopt a formal written charter that specifies the Committee's scope of responsibility. The charter should be reviewed annually and updated as necessary.
2. Maintain minutes of meetings.
3. Authorize investigations into any matters within the Audit, Integrity, and Compliance Committee's scope of responsibilities.
4. Report Committee actions to the Board of Visitors with such recommendations as the Committee may deem appropriate.
5. Consistent with state law, the Committee may meet in closed session (with or without members of senior management present, at the Committee's discretion) with the external auditors and/or the Executive Director of Audit and Compliance Services to discuss matters that the Committee or any of these groups believe should be discussed privately.
6. Review and approve the Audit and Compliance Services budget and resource plan.
7. Approve the Audit and Compliance Services charter. The charter should be reviewed annually and updated as necessary.

B. Internal Controls:

1. Review and evaluate the university's processes for assessing significant risks and exposures.
2. Make inquiries of management concerning the effectiveness of the university's system of internal controls.
3. Review management's written responses to significant findings and recommendations of the auditors, including the timetable to correct the weaknesses in the internal control system.
4. Advise management that they are expected to provide a timely analysis of significant financial reporting issues and practices.

C. External Auditors/Financial Statements:

1. Meet with the external auditors and university management to review the scope of the external audit for the current year. The auditors should inform the Audit, Integrity, and Compliance Committee of any significant changes in the original audit plan.
2. Discuss with the external auditors their processes for identifying and responding to key audit and internal control risks.
3. Advise the external auditors that they are expected to provide a timely analysis of significant financial reporting issues and practices
4. Review the coordination of internal and external audit procedures to promote an effective use of resources and ensure complete and efficient coverage of the university's risks.
5. Meet with the external auditors at the completion of the audit and make inquiries concerning the effectiveness of the university's system of internal controls.

Consistent with state law, a portion of the meeting may be conducted in closed Session without members of university management present.

6. Determine whether the external auditors are satisfied with the disclosure and content of the financial statements, including the nature and extent of any significant changes in accounting principles.

D. Internal Auditors:

1. Review and approve the annual audit and management services work plan and any significant changes to the plan.
2. Require Audit and Compliance Services to perform annual reviews of the President's discretionary accounts and to issue a report thereon to the Committee.
3. Review annually the qualifications of the audit and management services staff and the level of staffing.
4. Assess the effectiveness of the internal audit function, including its independence and reporting relationships and conformance with The Institute of Internal Auditors' (IIA) Definition of Internal Auditing, Core Principles, the IIA Code of Ethics and the *International Standards for Professional Practice of Internal Auditing* by inquiring and reviewing the assessment results of the internal and external Quality Assurance and Improvement Program.
5. Review completed audit reports and progress reports on executing the approved work plan and inquire of any other matters that require audit resources.
6. Review annually the status of previously issued internal audit findings.
7. Inquire of the Executive Director of Audit and Compliance Services regarding any difficulties encountered in the course of his audits, including any restrictions on the scope of work or access to required information.
8. Review the performance of the Executive Director in consultation with the President and approve the Executive Director's annual salary compensation and bonus, if any.
9. Review and approve the appointment, replacement, reassignment, or dismissal of the Executive Director of Audit and Compliance Services.

E. Data Integrity:

1. Review the adequacy of the university's IT management methodology with regards to internal controls, including applications, systems, and infrastructure. This includes but is not limited to:
 - Physical and virtual security with regards to university servers and storage
 - Network security architecture and operations
 - Reliability and robustness of data center (servers and storage) and network infrastructure environments
 - Disaster recovery and business continuity infrastructure and associated processes and procedures.

2. Review the adequacy of the university's data management policies and procedures to ensure data security and data integrity in institutional reporting. This includes but is not limited to:
 - Authentication and authorization mechanisms in accessing university data
 - Data Governance structure and policies
 - Data security policies including data access roles and responsibilities

F. University Ethics and Compliance Program:

1. Review the annual compliance planned initiatives and any significant changes to the plan.
2. Review the qualifications of the compliance staff and the level of staffing.
3. Assess the effectiveness of the compliance program, including its independence and reporting relationships.
4. Review completed compliance reports and progress reports on the status of compliance and integrity related initiatives including process and plans in place to assess conflict of interest management (inclusive of institutional and individual conflicts).
5. Require the Integrity and Compliance Office to report on management's processes and procedures that provide assurance that the university's mission, values, codes of conduct, and universitywide policies are properly communicated to all employees.
6. Review results of compliance reviews to ensure system and controls are designed to reasonably ensure compliance with laws and regulations, university policies and the code of conduct.
7. Inquire of the Executive Director of Audit and Compliance Services whether there have been any restrictions on the scope of work or access to required information in conducting compliance and ethics reviews.

G. Enterprise Risk Management

1. Provide oversight of the university's Enterprise Risk Management program.
2. Review the university's risk appetite.
3. Require periodic reporting on the overall program's design and effectiveness, including newly identified risks
4. Monitor progress of Risk Mitigation Plans and review policy and resource improvements as necessary.

H. Legal:

1. Consult as necessary with University Counsel regarding legal issues concerning the university.

**Virginia Commonwealth University
Board of Visitors**

Audit, Integrity and Compliance Committee Meeting Planner

A = Annually; Q = Quarterly; AN = As Necessary Q1, Q2, Q3, Q4 based on Fiscal Year (July – June)	Frequency			Planned Timing			
	A	Q	AN	Q1	Q2	Q3	Q4
				Sep	Dec	Mar	May
A. General							
1. Review and update Audit, Integrity, and Compliance Committee charter and meeting planner	X						X
2a. Approve minutes of previous meeting		X		X	X	X	X
2b. Maintain minutes of meetings		X		X	X	X	X
3. Authorize investigations into any matters within the Committee’s scope of responsibilities			X				
4. Report Committee actions to the Board of Visitors with recommendations deemed appropriate		X		X	X	X	X
5. Consistent with state laws, meet in closed session with only the external auditors, Executive Director of Audit and Compliance Services, and named individuals.		X		X	X	X	X
6. Review and approve the Audit and Compliance Services budget and resource plan.	X			X			
7. Review and approve Audit and Compliance Services charter	X			X			
B. Internal Controls/Financial Statements							
1. Review and evaluate university’s process for assessing significant risks and exposures	X			X			
2. Make inquiries of management concerning the effectiveness of the university’s system of internal controls			X				
3. Review management’s written responses to significant findings and recommendations of the auditors, including the timetable to correct the weaknesses in the internal control system			X				
4. Advise management that they are expected to provide a timely analysis of significant current financial reporting issues and practices			X				

A = Annually; Q = Quarterly; AN = As Necessary	Frequency			Planned Timing			
Q1, Q2, Q3, Q4 based on Fiscal Year (July – June)	A	Q	AN	Q1	Q2	Q3	Q4
				Sep	Dec	Mar	May
C. External Auditors							
1. Meet with external auditors and university management to review the scope of the external audit for the current year	X						X
2. Discuss with the external auditors their processes for identifying and responding to key audit and internal control risks	X						X
3. Advise the external auditors that they are expected to provide a timely analysis of significant financial reporting issues and practices	X						X
4. Review the coordination of internal and external audit procedures to promote an effective use of resources and ensure complete and efficient coverage of the university's risks			X				X
5. Meet with the external auditors at the completion of the audit and make inquiries concerning the effectiveness of the university's system of internal controls.	X				X		
6. Determine whether the external auditors are satisfied with the disclosure and content of the financial statements, including the nature and extent of any significant changes in accounting principles	X				X		
D. Internal Auditors							
1. Review and approve the annual audit and management services work plan and any significant changes to the plan	X						X
2. Require Audit and Compliance Services to perform annual reviews of the president's discretionary accounts and to issue a report thereon to the Committee	X				X		
3. Review the qualifications of the audit and management services staff, the adequacy of the staffing level	X			X			

A = Annually; Q = Quarterly; AN = As Necessary	Frequency			Planned Timing			
Q1, Q2, Q3, Q4 based on Fiscal Year (July – June)	A	Q	AN	Q1	Q2	Q3	Q4
				Sep	Dec	Mar	May
4. Assess the effectiveness of the internal audit function, including its independence and reporting relationships and conformance with the Definition of Internal Auditing, Core Principles, the IIA Code of Ethics and the <i>International Standards for Professional Practice of Internal Auditing</i> by inquiring and reviewing the assessment results of the internal and external Quality Assurance and Improvement Program	X				X		
5. Review completed audit reports and progress reports on executing the approved work plan and inquire of any other matters that require audit resources		X		X	X	X	X
6. Review annually the status of previously issued internal audit findings	X			X			
7. Inquire of the Executive Director of Audit and Compliance Services regarding any difficulties encountered in the course of his audits, including any restrictions on the scope of work or access to required information		X		X	X	X	X
8. Review the performance of the Executive Director in consultation with the President and approve the Executive Director’s annual salary compensation and bonus, if any.	X			X			
9. Review and approve the appointment, replacement, reassignment, or dismissal of the Executive Director of Audit and Compliance Services			X				
E. Data Integrity							
1. Review the adequacy of the university’s IT management methodology with regards to internal controls, including applications, systems, and infrastructure. This includes but is not limited to: <ul style="list-style-type: none"> Physical and virtual security with regards to university servers and storage Network security architecture and operations Reliability and robustness of data center (servers and storage) and network infrastructure environments Disaster recovery and business continuity infrastructure and associated processes and procedures 			X	X		X	

A = Annually; Q = Quarterly; AN = As Necessary	Frequency			Planned Timing			
	A	Q	AN	Q1	Q2	Q3	Q4
				Sep	Dec	Mar	May
2. Review the adequacy of the university's data management policies and procedures to ensure data security and data integrity in institutional reporting. This includes but is not limited to: <ul style="list-style-type: none"> • Authentication and authorization mechanisms in accessing university data • Data Governance structure and policies • Data security policies including data access roles and responsibilities 			X		X		X
F. University Ethics and Compliance Program							
1. Review the annual compliance planned initiatives and any significant changes to the plan	X						X
2. Review the qualifications of the compliance staff and the level of staffing (utilization and effort focus)	X			X			
3. Assess the effectiveness of the compliance program, including its independence and reporting relationships	X			X			
4. Review completed compliance reports and progress reports on the status of compliance and integrity related activities including process and plans in place to assess conflict of interest management (inclusive of institutional and individual conflicts)		X		X	X	X	X
5. Require the Integrity and Compliance Office to report on management's processes and procedures that provide assurance that the university's mission, values, and codes of conduct and universitywide policies are properly communicated to all employees	X			X			X
6. Review results of compliance reviews to ensure system and controls are designed to reasonably ensure compliance with laws and regulations, university policies and the code of conduct			X	X	X	X	X
7. Inquire of the Executive Director of Audit and Compliance Services whether there have been any restrictions on the scope of work or access to required information in conducting compliance and ethics reviews		X		X	X	X	X
G. Enterprise Risk Management							
1. Provide oversight of the university's Enterprise Risk Management program		X		X	X	X	X
2. Review the university's risk appetite	X				X		

A = Annually; Q = Quarterly; AN = As Necessary	Frequency			Planned Timing			
	A	Q	AN	Q1	Q2	Q3	Q4
				Sep	Dec	Mar	May
3. Require periodic reporting on the overall program's design and effectiveness, including newly identified risks		X		X	X	X	X
4. Monitor progress of risk mitigation plans and review policy and resource improvements as necessary		X		X	X	X	X
H. Legal							
1. Consult as necessary with University Counsel regarding legal issues concerning the university		X		X	X	X	X

AUDIT AND COMPLIANCE SERVICES CHARTER

VIRGINIA COMMONWEALTH UNIVERSITY and VCU HEALTH SYSTEM

Virginia Commonwealth University (university) and VCU Health System Authority (health system) maintain comprehensive and effective internal audit and compliance programs. The objective of Audit and Compliance Services (“department”) is to assist members of the Board of Visitors, Board of Directors, and management in the effective performance of their responsibilities. The department fulfills this objective by providing independent and impartial examinations, investigations, evaluations, counsel, and recommendations for the areas and activities reviewed.

Scope of Work

The scope of the department’s work is to determine whether the university’s and health system’s risk management, internal control, governance, and compliance processes, as designed and represented by management, are adequate and functioning in a manner to provide reasonable assurance that:

- Risks are appropriately identified and managed
- Control processes are adequate and functioning as intended
- Significant, financial, managerial, and operating information is accurate, reliable, and timely
- An effective university compliance program is maintained to provide guidance and resources, in an oversight role, for all educational, research, and athletic compliance programs to optimize ethical and compliant behavior
- An effective health system compliance program is implemented to further the health system’s mission, vision, and values by promoting a culture of compliance, and preventing, correcting, and investigating issues through education, monitoring, and enforcement
- An effective program of information technology (IT) management and security is maintained by management to ensure health system and university IT and data assets are properly secured, integrity protected, available as needed and kept confidential as required by applicable policies laws and regulations
- Employees’ actions are in compliance with the respective codes of conduct, policies, standards, procedures, and applicable laws and regulations
- Resources are used efficiently and are adequately protected
- Program plans and objectives are achieved
- Significant legislative and regulatory issues impacting the university and health system are recognized and appropriately addressed

Opportunities for improving management controls, accountability, fiscal performance and compliance processes, and for protecting organizational reputation will be addressed with the appropriate level of management when identified.

Accountability

The Executive Director of Audit and Compliance Services shall be accountable to the Board of Visitors, through the Audit, Integrity, and Compliance Committee, and the Board of Directors, through the Audit and Compliance Committee, to maintain comprehensive and professional internal audit and compliance programs. In fulfilling those responsibilities, the Executive Director will:

- Establish annual goals and objectives for the department, and report periodically on the status of those efforts.
- Execute the annual work plans and initiatives.
- Coordinate efforts with other control and monitoring functions (risk management, financial officers, campus police, university counsel and health system general counsel, external auditors, government reviewers, etc.).
- Report significant issues related to the department's scope of work, including potential improvements, and continue to provide information about those issues through resolution.
- Provide updates to the respective board committees, the university president, and the chief executive officer of the health system on the status of the work plans and initiatives, qualifications of staff, and sufficiency of department resources.

Independence and Objectivity

All work will be conducted in an objective and independent manner. Staff will maintain an impartial attitude in selecting and evaluating information and in reporting results. Independence in fact and appearance enables unbiased judgments that are essential to the proper conduct of the department's scope of work.

To provide an appropriate reporting structure to support independence, the Executive Director shall report to the Audit, Integrity, and Compliance Committee of the Board of Visitors and to the Audit and Compliance Committee of the Board of Directors. The Executive Director shall report administratively to the university's President.

Responsibility

The department will assist the Board of Visitors, Board of Directors, and management by:

- Maintaining a professional staff with sufficient knowledge, skills, and experience to fulfill the requirements of this charter.

- Developing and executing annual and long-range risk-based work plans and initiatives. The plans and initiatives will be submitted to management for review and comment and to the respective board committee for approval. The department recognizes that one of the primary benefits of these programs is the ability to respond to issues that arise during the normal course of business. Accordingly, the annual plans shall include time for management requests and special projects.
- Participating in an advisory capacity in the planning, development, implementation, or change of significant compliance and control processes or systems. The Executive Director shall ensure that the level of participation in these projects does not affect the department's responsibility for future evaluation of evaluating these processes or systems nor compromise its independence.
- Conducting or assisting in the investigation of any suspected fraudulent activities, misconduct, or non-compliance issues, and notifying management and the respective board committees of the results.
- Issuing periodic reports to management and the respective board committees summarizing the results of the department's activities.
- Considering the scope of work of the external auditors, as appropriate, to provide optimal audit coverage to the university and health system at a reasonable overall cost.
- Reporting at least annually to the Board of Visitors, Board of Directors, and senior management on the department's purpose, authority, responsibility, and performance relative to its plans and initiatives, and on its conformance to standards and best practices. Reporting should also include significant risk exposures and control issues, corporate governance issues, serious misconduct or non-compliance, and other matters needed or requested by the Board and senior management.

Authority

The department and its staff are authorized to:

- Have unrestricted access to all activities, records, property, and personnel. Receive cooperation from all university and health system personnel and affiliates.
- Have full access to the respective board committee.
- Allocate departmental resources, set audit and review frequencies, determine scopes of work, and apply the techniques necessary to accomplish objectives.
- Obtain the necessary assistance of personnel in departments when performing work plans and initiatives, as well as that of other specialists.

The department and its staff are not authorized to:

- Perform operational duties in interim status, or otherwise, unless authorized in advance by the respective board committee.
- Initiate or approve accounting transactions external to the department.

Standards of Practice

The department will conduct its scope of work in accordance with requirements and best practices as established by relevant authoritative and objective sources from industry and government.

For internal audit functions, this includes both mandatory and recommended guidance from the Institute of Internal Auditors International Professional Practices Framework. The mandatory guidance requires our department to conform with the Core Principles for the Professional Practice of Internal Auditing, Definition of Internal Auditing, Code of Ethics, and *International Standards for the Professional Practice of Internal Auditing (Standards)*. Internal auditing is an independent, objective assurance, and consulting activity designed to add value and improve an organization's operations. Our department will help the university and health system accomplish its objectives by bringing a systematic, disciplined, and risk-based approach to evaluate and improve the effectiveness of risk management, control, and governance processes.

For maintaining effective compliance programs, standards of practice are driven by the guidance provided in Chapter 8 of the Federal Sentencing Guidelines as promulgated by the US Sentencing Commission. The main focus of an effective program is to prevent and detect misconduct, remedy harm when identified, self-report where applicable, and maintain due diligence in promoting an organizational culture that encourages ethical conduct and a commitment to compliance with the law.

For the health system compliance program, guidance by the Health Care Compliance Association is also included. This organization sets the standard for professional values and ethics in the health care compliance field.

Quality Assurance and Improvement Program

The department will maintain a quality assurance and improvement program that covers all aspects of the internal audit activity. This program will be designed to:

- evaluate internal audit's conformance with the *Standards* and application of the Code of Ethics;
- assess the efficiency and effectiveness of the department; and
- identify opportunities for improvement.

The quality program includes both internal and external assessments. Internal assessments will include ongoing monitoring and periodic assessments of internal audit activity. An external assessment will be performed at least once every five years by qualified individuals who are independent of the internal audit function.

Virginia Commonwealth University Proposed Organizational Change Brief

Proposal

Virginia Commonwealth University (VCU) requests approval to establish a “partially-exempt” off-campus instructional site at 5285 Shawnee Road, Alexandria, VA.

Overview

The purpose of the proposed organizational change is to establish a new “partially exempt” off-campus site to replace an off-campus site slated for closure. The new off-campus site will continue to provide an academic program in an area of the state where there is a pressing and ongoing need for certified registered nurse anesthetists (CRNAs). VCU’s presence in northern Virginia dates back to 2012 with the opening of an off-campus instructional site at 6295 Edsall Road. Since its establishment, the off-campus site has offered the Doctor of Nurse Anesthesia Practice (DNAP) program; training future nurse anesthesia students to meet the ongoing demand for Certified Registered Nurse Anesthetists at hospital facilities in the geographic region. Multiple lease renewals for the space were executed until the off-campus site at Edsall Road was scheduled for demolition in 2022 by the owner of the building. Subsequent changes in building ownership and plans for the Edsall Road location, a lack of lease renewal options at the site, and the limitation of the space to support the educational and career needs of CRNAs necessitates the need to establish a new “partially-exempt” off-campus instructional site. This new site will be located Poplar Run Office Building, 5285 Shawnee Road, Alexandria, VA.

Demand

There are no other nurse anesthesia programs operating in the northern Virginia region of the state of Virginia. For the three most recent admissions cycles, the DNAP program received three to five times the number of applications for admission (36 in 2020, 43 in 2021, 53 in 2022) relative to the number of available spaces.

Target Implementation Date

August 13, 2023

Impact on Existing Programs/Policies

There is no impact to existing programs and policies. There will be no interruption to activities for nursing students in the DNAP program. Furthermore, the new space will have a positive impact on the learning environment and the reputation of the DNAP program and VCU.

Impact on Faculty

There is no impact on faculty.

Funding

No additional expenses are required to implement the change. All costs for administrative positions, faculty, and operating expenses will be funded by tuition and fees collected at the proposed off-campus site.

Next Steps

April 27, 2023 - University Committee on Academic Affairs and University Policies (UCAAUP) Meeting
May 4, 2023 - University Council Meeting
Electronic Vote - President's Cabinet Meeting
May 12, 2023 - Board of Visitors' Meeting
May 13, 2023 – Proposal shared with SCHEV

Virginia Commonwealth University Proposed Organizational Change Brief

Proposal

Virginia Commonwealth University (VCU) requests approval to close a “partially-exempt” off-campus instructional site at 6295 Edsall Road, Alexandria, VA.

Overview

The purpose of the proposed change is to close an off-campus instructional site that is no longer available or suitable for ongoing academic operations. VCU’s presence in northern Virginia dates back to 2012 with the opening of an off-campus instructional site at 6295 Edsall Road. Since its establishment, the off-campus site has offered the Doctor of Nurse Anesthesia Practice (DNAP) program. Multiple lease renewals for the space were executed until the off-campus site at Edsall Road was scheduled for demolition in 2022 by the owner of the building. Subsequent changes in building ownership and plans for the Edsall Road location, a lack of lease renewal options at the site, and the limitation of the space to support the educational and career needs of CRNAs necessitates the need to close the Edsall Road “partially-exempt” off-campus instructional site.

Target Implementation Date

August 13, 2023

Impact on Existing Programs/Policies

There is no impact to existing programs and policies. There will be no interruption to activities for nursing students in the DNAP program and students will be transitioned to a new location.

Impact on Faculty

There is no impact on faculty.

Funding

The proposed organizational change to close the Edsall Road off-campus instructional site is executable within the budget of the VCU College of Health Professions’ currently authorized funds. No additional expenses are required to implement the change.

Next Steps

April 27, 2023 - University Committee on Academic Affairs and University Policies (UCAAUP) Meeting

May 4, 2023 - University Council Meeting

Electronic Vote - President's Cabinet Meeting

May 12, 2023 - Board of Visitors’ Meeting

May 13, 2023 – Proposal shared with SCHEV

EXECUTIVE SUMMARY OF PROPOSED POLICY:

Student Code of Conduct

New Policy or **Substantive Revision**

Policy Type: Board of Visitors

Responsible Office: Student Conduct and Academic Integrity, Division of Student Affairs, Office of the Provost

Draft Date: 2/10/2023

Initial Policy Approved: 04/10/2022

Revision History: 8/16/2021

Governance Process Tracking:

If **new BOV** policy, enter date and name of President (or designee) approving development of policy: MM/DD/YYYY – Name

If **new Administrative** policy, enter date and name of President’s Cabinet member approving development of policy: MM/DD/YYYY - Name

Integrity & Compliance Office Review: 02/09/2023

University Counsel Review: 03/01/2023

Public Comment Posting: 04/05/2023

University Council Academic Affairs and University Policy Committee Review: 04/27/2023

University Council Review: 05/04/2023

President’s Cabinet Approval: 05/05/2023

Board of Visitors Approval (if applicable): MM/DD/YYYY

<p>1. Why is this policy being created <input type="checkbox"/> <u>or</u> revised <input checked="" type="checkbox"/>?</p>	<p>This policy has been in Interim status since 2022. There have been significant law and policy updates since that time.</p>
<p>2. <u>New policy</u> <input type="checkbox"/>: What are the general points or requirements covered in this policy?</p> <p style="text-align: center;"><u>or</u></p> <p><u>Revised policy</u> <input checked="" type="checkbox"/>: What are the substantive differences between this draft and the current policy?</p>	<p>Inclusion of components from Virginia law (Adam’s law), incorporation of language from VCU Hazing policy, and revisions to processes for student organizations.</p>
<p>3. Which stakeholder offices or personnel have provided input into this policy draft?</p>	<p>Relevant offices within the Division of Student Affairs, University Counsel, Policy Review</p>
<p>4. Which other universities’ policies or resources (e.g., laws, regulations, etc.) did you consider when preparing this draft?</p>	<p>N/A</p>
<p>5. What is your general assessment of this policy’s impact on the university community?</p>	<p>This revision will further underscore the university’s commitment to expectation of student and student organization behaviors.</p>
<p>6. What is your plan to implement this new policy or policy revision (e.g., raise awareness and train relevant audiences and monitor for compliance)?</p>	<p>This policy will be reiterated through orientation sessions, notification in the VCU Telegram, and shared on RamsConnect.</p>

Student Code of Conduct

Responsible Office: Student Conduct and Academic Integrity, Division of Student Affairs, Office of the Provost

Current Approved Version: 4/10/2022 (interim)

Policy Type: Board of Visitors

Policy Statement and Purpose

VCU Creed: Philosophy for a University community

Academic institutions exist, among other reasons, to discover, advance and transmit knowledge and to develop in their students, faculty, and staff the capacity for creative and critical thought. At Virginia Commonwealth University (VCU), members of the community should strive to exemplify the following specific ideals in addition to other worthy ideals:

- To demonstrate academic and personal integrity
- To respect the rights and property of others
- To be open to others' opinions
- To uphold academic freedom and freedom of intellectual inquiry
- To appreciate diversity and to value and learn from the uniqueness of each person
- To uphold the right of all persons to be treated with dignity and respect
- To demonstrate and respect intellectual courage in situations that demand it

Students and student organizations (SO) are encouraged to engage in responsible social conduct that reflects credit upon the university community and to model good citizenship in any community. Students and SO should not remain passively in the presence of violations and are encouraged to notify the proper authorities if they observe or have knowledge of other students or SO violating this policy.

While the university urges students to exhibit model conduct as described above, all students must comply with the conduct and procedural requirements described below, with or without accommodations. Students who are members of an SO are subject as individuals to this policy and may also be held accountable for conduct attributed to the SO. Student members of an SO may, through their actions, subject the SO to disciplinary action under this policy, no matter whether they are charged as individuals under this policy.

Noncompliance with this policy by staff may result in disciplinary action up to and including termination. Noncompliance with this policy by students may result in sanctions as provided in this policy. VCU supports an environment free from retaliation. Retaliation against any member of the university community who brings forth a good faith concern or report, asks a clarifying question, or participates, or declines to participate, in an investigation is prohibited.

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Who Should Know This Policy

University students, employees (includes faculty), and SO are responsible for knowing this policy and familiarizing themselves with its contents and provisions.

Definitions

Adviser

The person chosen by a respondent to provide guidance during the investigation and resolution process. An adviser of choice may include a friend, mentor, family member, attorney, or any other individual a party chooses to advise, support, and/or consult with them throughout the resolution process. An adviser may not be another party in the matter, a participating witness or otherwise have any role in the process that would create a conflict of interest. An adviser can assist a party by taking notes, providing emotional support and reassurance, organizing documentation, or consulting directly with a party in a way that does not disrupt or delay the process. The adviser may not speak on behalf of a party or directly participate in a meeting, interview or proceeding. An adviser whose presence disrupts or interferes with the meeting or proceeding, in the sole discretion of the university official conducting the meeting or proceeding, will be required to leave and may be prohibited from participating in future meetings or proceedings under this policy.

Conduct Appeal Board (CAB)

The term "Conduct Appeal Board" means the panel authorized by the Director of Student Conduct and Academic Integrity or designee to consider an appeal from a Student Conduct Board's determination.

Instructional Faculty

The term "Instructional Faculty" means any person hired by the university to conduct classroom or teaching activities or activities involving research, administration, or clinical responsibilities, including graduate student teaching assistants, or who is otherwise considered by the university to be a member of its faculty.

May

The term "May" is used in the permissive sense.

Member of the University Community

The term “Member of the University Community” includes any person who is a student, faculty, staff, or any other person employed by the university. A person’s status as a student or employee in a particular situation shall be determined by the Director of Student Conduct and Academic Integrity or designee.

Preponderance of Evidence

The term “Preponderance of Evidence” is the standard of proof that applies to student conduct proceedings or determinations. It means what is more likely than not to be true, based on the totality of the available evidence.

Student Organization

The term “Student Organization” or “SO” means any student group registered or that has applied for registration with the university or has another designation (such as but not limited to affiliated or sponsored), through the university as a student organization.

Reporting Party

The term “Reporting Party” refers to any person who submits a report alleging that a student or SO violated this policy.

Respondent

The term “Respondent” means any student or SO charged with violating this policy.

Sanction Review Board (SRB)

The term “Sanction Review Board” means the panel authorized by the Director of Student Conduct and Academic Integrity or designee to determine sanctions for a violation of this policy or other applicable university policies.

Staff

Any person with a direct employment relationship with VCU, including those who work on a part-time or adjunct basis. An individual can hold a status as both a student and staff.

Student

The term “Student” includes all persons taking courses through VCU, either full-time or part-time, on- line or in-person, single or dual enrolled, pursuing undergraduate, graduate or professional studies. “Student” also includes all persons who withdraw after allegedly violating this policy, persons who are not enrolled officially for a particular term but remain enrolled under the university’s continuous enrollment policy, persons who have been notified of their acceptance for admission, and persons living in VCU residence halls regardless of course enrollment to the extent that employee discipline policies do not apply.

Student Conduct Administrator

The term “Student Conduct Administrator” means the Director of Student Conduct and Academic Integrity, or other university official designated on a case-by-case basis to administer the adjudication process under this policy, including investigating reported misconduct, determining responsibility for misconduct, and assigning appropriate sanctions.

Student Conduct Board (SCB)

The term “Student Conduct Board” means the panel authorized by the Director of Student Conduct and Academic Integrity or designee to determine whether a Respondent has violated this policy and to recommend sanctions that may be imposed when a violation has been committed.

University Property

The term “University Property” means any property owned, leased, or controlled by VCU.

Contacts

Student Conduct and Academic Integrity (SCAI) officially interprets this policy. SCAI is responsible for obtaining approval for any revisions as required by the Policy Creating and Maintaining Policies and Procedures and through the appropriate governance structures. Please direct policy questions and comments to Student Conduct and Academic Integrity at stuconduct@vcu.edu.

Policy Specifics and Procedures

All complaints of alleged sex-based misconduct by university students or involving SOs will be reviewed by Equity and Access Services (EAS) for a determination of policy applicability and jurisdiction. At the discretion of the EAS, complaints alleging sex-based misconduct may in certain circumstances be referred to SCAI for investigation and adjudication. Please see the Related Documents section for the relevant policies.

Note on criminal or civil law proceedings. If a respondent is charged with conduct that potentially violates criminal or civil law and this policy (that is, if both possible violations result from the same factual situation), proceedings under this policy occur prior to, simultaneously with, or following civil or criminal proceedings at the sole discretion of the Director of Student Conduct and Academic Integrity (SCAI) or designee. Determinations made or sanctions imposed under this policy shall not be subject to change because of outcomes in criminal or civil proceedings.

I. Prohibited Conduct

The Student Code of Conduct shall apply to all conduct by students and SO. The Director of SCAI or designee shall have the sole discretion to decide on a case-by-case basis whether this policy shall be applied to conduct not on university property. This policy governs students enrolled at all campuses; however, students enrolled at VCUarts Qatar are advised to consult local campus publications for additional information or rules that may establish hearing boards or processes, consistent with this policy.

Students are responsible for their conduct under this policy from the time of application for admission through the actual awarding of a degree. This policy shall apply to a student’s conduct even if the student withdraws from the university while a disciplinary matter is pending. The Vice President for Student Affairs, or designee, will determine whether to bring charges if the conduct is discovered after a degree is awarded.

SO that have lost university recognition are subject to this policy. A SO facing an alleged violation of this policy may dissolve or surrender its registration during the investigation and adjudication process. However, the university may continue the investigation and adjudication process regardless of the SO’s status. This policy applies to guests of the SO, and the SO may be held accountable for the misconduct of its guests.

Visitors to and guests of the university may seek resolution of violations of this policy committed against them by a SO and/or members of an SO.

This policy applies to all student conduct, including behavior conducted online, via email or another electronic medium. Students should also be aware that online postings such as blogs, web postings, chats and social networking sites are in the public sphere and are generally not private. These postings can subject a student or an SO to allegations of conduct violations to the same extent as conduct that occurs in person or another non-virtual setting. While the university generally does not conduct regular monitoring of student conduct online, it may take investigative and adjudicative action when university officials suspect or are aware of concerning conduct.

The following conduct, committed or attempted, is prohibited for all students and SO and is subject to disciplinary sanctions:

A. Abuse of Computer Facilities and Resources

Violations include, but are not limited to, unauthorized entry, unauthorized transfer of a file, use of another individual's identification and/or password, use of computing facilities and resources to interfere with the work of another university member, use of computing facilities and resources to send obscene messages as legally defined, use of computing facilities and resources to interfere with the normal operation of the university computing system, use of computing facilities and resources in violation of copyright laws, or any violation of the [University Computer and Network Resources Use](#) policy.

B. Abusive Conduct

1. Assault – Words or actions that would cause one or more individual(s) to reasonably fear for their immediate safety. Words do not constitute assault unless they are accompanied by the apparent ability to inflict immediate bodily harm.
2. Battery – The unjustified use of physical force against an individual or group.
3. Disorderly conduct – Disrupting or preventing the peaceful or orderly conduct of classes, lectures, meetings, or other university functions, or interfering with the lawful freedom of other persons, including invited speakers, to express their views, or interfering with the performance of the duties of university personnel.
4. Endangering health or safety – Taking or threatening actions that endanger the physical safety, mental health, or life of any person(s) or create reasonable fear of such action.
5. Harassment – Repeated, persistent, or pervasive actions directed towards one or more specific individual(s) with the intent or effect to harm, or alarm, including attempted or threatened physical contact or repeated or pervasive acts that create the reasonable apprehension of unwanted physical or verbal contact as well as contact through any electronic or digital medium.

6. Hazing –Conduct prohibited under the university’s [Hazing Prevention and Discipline](#) policy (linked in the Related Documents Section).
7. Invasion of privacy – Invasion of another person’s privacy, where that person has a reasonable expectation of privacy, including but not limited to the use of electronic devices to make an unauthorized audio or video recording of any person or their personal belongings without their prior knowledge, or without their effective consent, when such a recording is of information or of images taken from or of a person at a time and place where they have a reasonable expectation of privacy and where the recording is reasonably likely to cause injury or distress.
8. Sex-based misconduct – Conduct prohibited by the university’s [Title IX Sexual Harassment Policy](#) – Interim and [Sex-Based Misconduct Policy](#) – Interim (linked in the Related Documents Section).
9. Stalking – Engaging in a course of conduct, directed at a specific person that would cause a reasonable person to fear for their safety or the safety of others or suffer substantial emotional distress.

For this definition:

- “course of conduct” means two or more acts, including, but not limited to, acts in which the Respondent directly, indirectly, or through third parties, by any action, method, device, or means, follows, monitors, observes, surveils, threatens, or communicates to or about a person, or interferes with a person’s property;
- “reasonable person” means a reasonable person under similar circumstances and with similar identities to the complainant;
- “substantial emotional distress” means significant mental suffering or anguish that may, but does not necessarily, require medical or other professional treatment or counseling

C. Academic Misconduct

Refer to the Honor System and Standards of Academic Conduct (linked in the Related Documents section) for academic expectations, rights, responsibilities, violations, hearing processes, sanctions, and records related to charges of academic misconduct, including cheating, deception, exploitation, facilitation, plagiarism, sabotage, and stealing.

D. Acts of Dishonesty

1. Furnishing false information to any university employee (including staff and faculty) or office.
2. Forgery, alteration, or misuse of any university document (e.g., student transcript), record or instrument of identification.

E. Alcohol and Other Drugs

1. Alcohol and Drugs: The unlawful possession, use, or distribution of alcohol or other drugs, including but not limited to, conduct prohibited by the Alcohol and Other Drugs policy, the Tobacco and Smoke-Free Campus policy, and the Events with Alcohol policy in the Student Organization Handbook (linked in the Related Documents section).
2. Paraphernalia – Possession of paraphernalia used to consume illegal drugs is not permitted on university property. Paraphernalia includes but is not limited to roach clips, bongos, pipes, blow tubes, bowls, and any type of water pipe or object filled with water through which smoke is drawn.

F. Failure to Comply

1. Failure to comply with a reasonable request or directive of university officials. This includes, but is not limited to, failure to present a university identification card, failure to keep or attend a required meeting, or failure to leave any university premise when requested by a university official.
2. Failure to observe rules and regulations issued by the university.
3. Failure to complete or comply with a university-imposed sanction.

G. False Reports

Making an intentionally false report of a student violation of this or other university policy. False reporting may also violate state criminal statutes and civil defamation laws.

H. Fireworks/Explosives/Dangerous Chemicals

Unauthorized possession or use of fireworks, explosives or dangerous chemicals.

I. Gambling

Participation in any form of illegal gambling as defined in the [Code of Virginia § 18.2-325](#).

J. Involvement in a University Violation

Presence during any violation of this policy in such a manner to condone, support, or encourage that violation.

K. Retaliation

Any actual or threatened adverse action against a person because of the person's participation in a complaint, investigation, or adjudication by the university or other relevant authority.

L. Theft or Unauthorized Use of Property

1. Theft – Theft, attempted theft, or possession of stolen property or services or possession of burglarious tools.
2. Unauthorized use of university property or services.
3. Climbing – Unauthorized climbing inside or outside buildings or structures on university property.

4. Damage or destruction of property – Actual or threatened damage or destruction, including defacing/vandalism/graffiti of university property or property of others, whether done intentionally or with reckless disregard.
5. Unauthorized presence or entry – Entering or being present in university buildings, rooms, or other areas without proper authorization.
6. Tampering – Tampering with university equipment, including but not limited to, any elevator, wiring, plumbing, doors, locking mechanisms, university keys, access cards, or other university equipment without authorization from a university official.
7. Misuse of fire-fighting equipment/disregard of fire alarm signals/arson – Misuse or tampering with fire-fighting equipment, disregard of a fire alarm signal or refusal to evacuate a building, tampering with detection or suppression equipment, initiating a false fire alarm or unauthorized burning of any material in any university building or on university property.
8. Obstruction – Blocking of the free flow of pedestrians or vehicular traffic on university premises or at university sponsored or supervised functions.

M. Weapons

Possession or carrying of any weapon, as defined in the university's Weapons Regulation (linked in the Related Documents section), or anything used to injure or attempt to injure a person.

N. Violation of other University regulations, policies, or rules.

Any violation of any applicable university standard, regulation, policy or rule. Examples include, but are not limited to, university computing policies, Residential Life and Housing policies, Handbook for Student Organization at VCU, and RecWell facility policies. See Related Documents section for links to some university policies generally applicable to students and student organizations.

O. Violation of any federal, state, or local law.

Any violation of local, state, or federal law, which in the discretion of the director of SCAI affects a substantial university interest, including but not limited to a violation committed in the municipality where the university is located, is detrimental to the educational interests of the university, or presents a danger to the student or others.

II. Disciplinary Amnesty and Immunity for Certain Prohibited Conduct Related to Alcohol, Drugs and Hazing

- A. The university will not take disciplinary action against a student who has demonstrated Prohibited Conduct in the following limited circumstances.
 1. **For seeking emergency or timely medical assistance.** If a student seeks emergency or timely medical assistance for themselves or others due to the use of alcohol or other drugs, neither the student seeking assistance, nor the student needing assistance will be subject to disciplinary action for Prohibited Conduct under this policy based on personal consumption of alcohol or other drugs or the disclosure of personal consumption of alcohol or other drugs related to the incident. In these circumstances, the university reserves the

right to mandate that the student(s) participate in academic programming, or a medical intervention related to alcohol or drug use.

2. **For reporting and cooperating.** The university will not pursue disciplinary action under this policy based on disclosure of personal consumption of alcohol or other drugs where such disclosures are made in connection with a good faith report of violation of university policy or cooperation with a university investigation.
3. **For bystanders reporting hazing.** The university provides immunity from disciplinary action based on hazing or personal consumption of alcohol or other drugs where such disclosure is made by a bystander not involved in such acts in conjunction with a good faith report of an act of hazing in advance of or during an incident of hazing that causes injury or is likely to cause injury to a person. The university may require access to services to support individuals who receive disciplinary immunity as described here, including but not limited to (i) counseling specific to alcohol abuse or drug abuse, or both, or (ii) inpatient or outpatient (a) alcohol counseling or treatment programs, (b) drug counseling or treatment programs, or (c) both alcohol and drug counseling or treatment programs. A student's failure to access the required services renders them ineligible for continued immunity.

B. The above provisions have the following limitations:

1. A student may not be eligible more than once for amnesty relating to seeking medical assistance for their own Prohibited Conduct.
2. The university may mandate that a student seeking amnesty participate in educational and medical programming and intervention related to alcohol or other drug use. A student's failure to participate satisfactorily renders them ineligible for continued amnesty. This does not apply to bystanders reporting hazing, which is subject to the conditions described above.
3. A student with additional university responsibilities (including teaching assistants or resident assistants) may be subject to potential action related to those additional responsibilities under other applicable policy (such as the Resident Assistant Compact for resident assistants).

III. Student Code of Conduct Authority

The Director of SCAI or designee shall determine the composition of the Student Conduct Board (SCB), Sanction Review Board (SRB) and the Conduct Appeal Board (CAB) and will determine which administrator or board shall be authorized to hear each matter. The Director of SCAI or designee shall develop procedures for the administration of the student conduct system and procedural rules for the conduct of SCB Hearings that are not inconsistent with the provisions of this policy. Decisions made by the SCB, SRB and/or Student Conduct Administrator shall be final, pending the appeal process provided in this policy.

Rights and responsibilities

All respondents are provided the following rights and responsibilities throughout the university student conduct process:

- To receive written notification of any alleged violation against them via official forms of university communication (i.e., VCU email) including a general summary of the complaint, contact information for the university employee to receive additional information, and the date by which such contact must occur.
- To know the source of any allegation.
- To know the specific alleged violation(s) of this policy.
- To present their version of events giving rise to the allegations.
- To know that any statements made by the reporting party, witnesses, and/or respondent may be used during the process
- To review and respond to any allegation or information presented to the decision maker.
- To present information by relevant and noncumulative witnesses.
- To refrain from making any statement concerning alleged violations of this policy or from participating in the proceedings
- To be accompanied by an adviser of their choice and at their own expense during the university student conduct process for advisory purposes only. Advisers are not permitted to speak or to participate directly in the university student conduct process unless authorized by the Student Conduct Administrator. When selecting an adviser, a respondent should consider any scheduled meetings or hearings. Delays in the university student conduct process will not be allowed due to the scheduling conflicts of an adviser.
- Notice of the outcome of the proceedings including a description of any appeal process.
- A decision maker free from actual bias.

For information regarding notice of the outcome of the proceedings including a description of any appeal process see the Notification section of this policy.

IV. Charges and Student Conduct Board (SCB) hearings

Any member or entity of the university community, including SCAI based on information provided to the university, or others outside of the university may report a student or SO for violation of this policy. Any report should be submitted as soon as possible after discovery of the alleged violation. Absent extraordinary circumstances, a written report must be filed within six months of discovery of the offense. Though anonymous reports are permitted, the university's ability to investigate and respond to an anonymous report may be limited. A report shall be prepared in writing and directed to SCAI or other designated office. Once the report has been submitted, the Director of SCAI or designee will review the report, determine the charges that apply to any alleged conduct prohibited by this policy, and appoint a Student Conduct Administrator to complete an investigation.

A. Identifying One or More Respondents

SCAI considers the following factors in determining whether reported allegations involve an SO, rather than or in addition to the individual student members of an SO.

1. The conduct is endorsed by the SO or any of its officers ("endorsed by" includes, but is not limited to, the following: active or passive consent or support, having prior knowledge that the conduct was

likely to occur and not acting to stop or report it to appropriate authorities, or helping to plan, advertise, or promote the conduct);

2. The conduct is committed during the course of an activity paid for by the SO, or paid for as a result of one or more members of the SO contributing personal funds in lieu of organizational funds to support the activity or conduct in question;

3. The conduct occurred on property owned, controlled, rented, leased, or used by the SO or any of its members for an organizational event;

4. The purpose of the activity was related to initiation, admission into, affiliation with, or as a condition for continued membership in the SO;

5. Non-members of the SO learned of the activity through members, advertisements, or communications by the student organization, or otherwise formed a reasonable belief that the conduct or activity organized, planned, supported or endorsed by the SO;

6. Members of the SO attempted to conceal the activity or protect other members who were involved.

7. A pattern of individual violations without proper remedial action by the SO;

8. The number of members of the SO present when the misconduct occurred or with specific knowledge of the misconduct before it occurred or while it was occurring;

9. Knowledge of SO officers and/or advisors of the misconduct;

10. Action(s) SO officers and/or advisors took in addressing or preventing the misconduct from occurring;

11. Whether members of the SO acted in concert or whether membership in the SO served as an impetus for the misconduct; and

12. Whether the violation arose out of an event that was sponsored, financed, planned, or otherwise endorsed by members of the SO.

B. Notification and Adjudication Process

SCAI will send a Notification Letter to the VCU email address of the respondent citing the specific alleged violation, including a general summary of the complaint, instructions to contact the Student Conduct Administrator to schedule a meeting to discuss the charges, and notice that the respondent will have five business days from the date of the Notification Letter to contact the Student Conduct Administrator. If the respondent fails to respond to the Notification Letter or does not attend the scheduled meeting, the university may proceed with adjudication of the charges without the respondent's input.

For an SO respondent, the Notification Letter and other correspondence related to this policy will be transmitted to the email address of the SO representative. SO representatives are responsible for all communication delivered to their university email address. In addition, the university may notify the SO

adviser and/or any inter/national body associated with the SO of the reported prohibited conduct and the initiation of the conduct process. However, neither a SO adviser nor inter/national body may serve as the representative for a respondent SO in this process.

The Student Conduct Administrator will complete an investigation of the charges in the Notification Letter. The Student Conduct Administrator will offer to meet with the respondent to discuss the charges and to hear the respondent's version of the events giving rise to the allegations. The Student Conduct Administrator may meet with the reporting party as well as with any witnesses identified by the respondent or other individuals and examine additional information. Based upon all the examined information and witness statements, the Student Conduct Administrator will make a determination of responsibility using the preponderance of the evidence standard. SCAI will send a Notice of Completed Investigation to the VCU email address of the respondent with the determination of responsibility, and, if the respondent was found responsible, the assigned sanctions. The respondent will have five business days from the date of the Notice of Completed Investigation to exercise one of the following options based upon the Student Conduct Administrator's determination:

1. No Violation Established by the Administrator:

The Student Conduct Administrator will notify the respondent that the university has found the respondent not responsible for the violation(s) charged and that no sanction will apply. The matter will be closed without requiring further action by the respondent.

The following options are available if the Student Conduct Administrator notifies the respondent that they have found the respondent responsible for some or all of the violation(s) charged and has recommended specific sanctions.

2. Violation Established - Acceptance of Responsibility:

Respondent accepts responsibility and sanctions

The respondent may accept responsibility for violating specified provisions of this policy and agree to complete the sanctions recommended by the Student Conduct Administrator. Respondent choosing this option will forego the opportunity to appeal. The Student Conduct Administrator will send written confirmation to the respondent of the finding(s) and sanction(s) that will be imposed.

3. Violation Established - Sanction Review Board (SRB):

Respondent accepts responsibility, but disagrees with recommended sanctions

If the respondent accepts responsibility for violating specified provisions of this policy but disagrees with the sanctions recommended by the Student Conduct Administrator, the respondent may contest the sanctions and seek review by the SRB. The request to the SRB must be submitted in writing within five business days from the date of notification of the Student Conduct Administrator's determination using the SRB form. After SCAI receives the request for review, the

Student Conduct Administrator may submit a statement responding to the claims or issues presented by the request. SCAI will submit the written request and response to the SRB.

The SRB is comprised of three university community members with at least one student and one staff or instructional faculty member.

The SRB will review the respondent's written statement contesting the sanctions, as well as a written statement from the Student Conduct Administrator explaining the basis and rationale for the recommended sanctions. The SRB will assign an appropriate sanction, which may be more severe than the recommended sanction. Decisions of the SRB are final and not subject to further appeal.

Based upon the SRB's review, SCAI will notify the respondent in writing of sanctions via their VCU email address. A decision by the SRB that results in a respondent being suspended or expelled from the university must be approved by the Vice President for Student Affairs (VPSA) or designee.

4. Violation Established - Student Conduct Board (SCB):

Respondent contests finding of responsibility

If the respondent contests a finding of responsibility and seeks review by the SCB, the request to proceed to the SCB must be submitted in writing within five business days from the date of notification of the Student Conduct Administrator's determination. SCAI will schedule a SCB hearing to consider the information and evidence and make a determination concerning the allegations and, if necessary, any sanctions. The SCB is comprised of four university community members with at least one student, one staff or instructional faculty member, and a non-voting chair. SCAI will notify the respondent of the date, time and location of the hearing at least five business days prior to the scheduled SCB hearing. The respondent has a right to be accompanied by an adviser of choice at the hearing. The adviser may provide support and advice but may not speak on behalf of the respondent or otherwise participate in, or in any manner disrupt, the hearing. If the respondent fails to attend the scheduled SCB hearing, the hearing will proceed in the respondent's absence and the respondent's ability to appeal the SCB hearing decision may be limited.

A SCB hearing typically consists of the following components:

- Introduction and procedural rules presented by the SCB chair.
- Introductory statement and presentation of information by Student Conduct Administrator
- Witnesses presented by the Student Conduct Administrator, if any.
- Introductory statement and presentation of information by the respondent.
- Witnesses presented by the respondent, if any.
- Closing statement by Student Conduct Administrator.

- Closing statement by respondent.
- Closed session deliberation by SCB.

Witnesses will provide information to and answer questions from the SCB. The respondent may propose questions to the chairperson to be asked of the other party or witnesses. The chairperson will determine whether proposed questions or information will be presented.

All procedural questions are subject to the final decision of the chairperson of the SCB.

There shall be a single record, such as a digital recording, of all SCB hearings excluding deliberations. The record shall be the property of the university and maintained securely consistent with university standards.

When an alleged victim is serving as a witness, alternative testimony options will be available, such as allowing the alleged victim to testify via electronic means.

The SCB will determine, by majority vote, if the respondent is responsible for the charges based on a preponderance of the evidence presented at the hearing. The SCB will notify the Director of SCAI or designee in writing of the determination, the rationale for the determination, and any recommended sanctions. The Director of SCAI or designee will determine the final sanctions and notify the respondent within five business days of the SCB hearing in writing via their VCU e-mail address of the SCB determination, the final sanctions, and the process for appeal.

For information regarding notice of the outcome of the proceedings including a description of any appeal process see the Notification section of this policy.

V. Appeals Process and Campus Appeal Board (CAB)

Any appeal of the SCB's decision must be made by the respondent in writing to SCAI using the Appeal Form within five business days following the date of notification of the decision. The written appeal must contain any and all information relevant to the appeal, including any new evidence or information when new and pertinent evidence is the selected appeal ground. After SCAI receives the appeal, the Student Conduct Administrator may submit a statement responding to the claims or issues presented by the written appeal. SCAI will submit the written appeal and response to a Campus Appeal Board (CAB).

The CAB is comprised of three university community members with at least one student and one staff or instructional faculty member. The CAB will review the respondent's written appeal as well as the written statement of the Student Conduct Administrator. The respondent does not have a right to appear before the CAB or to make any statements other than the written appeal. The CAB will then make one of two recommendations to the VPSA or designee concerning the appeal: (1) uphold the SCB determination, or (2) remand the matter to the SCB. The VPSA or designee will review the recommendation of the CAB, make a final determination concerning the respondent's appeal and notify the respondent of that outcome. The VPSA or designee has sole discretion to (i) accept the CAB recommendation or; (ii) reject the recommendation and remand or; (iii) render an alternative finding.

Appeals to the CAB may be based only on one or both of the following two criteria:

1. New and pertinent evidence or information has come to light.
2. A procedural error occurred that would have impacted the outcome of case.

VI. Interim Measures

Interim measures are temporarily actions that are protective in nature, rather than disciplinary or punitive. They are designed to mitigate the risk to members of the university community or deter prohibited conduct, often while conduct charges are pending. The interim measure process is separate and distinct from the processes of investigation and adjudication undertaken pursuant to this policy and other VCU policies and regulations, including Title IX Sexual Harassment Policy – Interim and Sex-Based Misconduct Policy - Interim. Failure to abide by the terms of an interim measure could result in disciplinary action under this policy. In addition to individualized services offered without fee or charge and designed to support individuals affected by conduct under investigation without unreasonably burdening the other individuals, the following are interim measures:

A. No Contact Directive

A written university directive that serves as notice to a student or SO prohibiting verbal, electronic, written, or third-party communications with one or more specific individuals.

B. Interim Suspension

Temporary measures to remove a student or SO reasonably believed to pose a threat to the university community, as set forth in the [Interim Suspension](#) Procedure.

VII. Sanctions

Upon any final finding of responsibility of a violation of this policy, one or more sanctions may be imposed for each violation. Failure to complete any assigned sanction is a separate violation of this policy. Impairment from the voluntary use of alcohol and/or other drugs (other than as medically prescribed) shall be considered an aggravating, and not a mitigating, factor in sanctioning. All sanctions become part of a respondent's permanent university disciplinary record. The university may withhold a degree, or any other academic achievement, otherwise earned, until the completion of the process set forth in this policy, including appeals and the completion of any and all sanctions.

The following two sections describe the sanctions that may be imposed when a respondent is found responsible, based on the respondent's status as an individual student (section A) or an SO (section B).

A. Sanctions for Respondents who are Individual Students

Sanctions 1-7 are not recorded on a student's transcript. These sanctions are not reported to external agencies as a university disciplinary action, unless required by law or specifically authorized by the respondent.

1. Censure

Censure is a written notice warning to the respondent to avoid a recurrence of any conduct that violates this policy and/or any university policy. Subsequent violations of this policy or any university policy may result in more severe disciplinary action

2. Disciplinary Probation

Disciplinary probation is a specified period, a minimum of one semester, requiring the respondent to avoid a recurrence of any conduct that violates this policy and/or any university policy that may result in additional university sanctions, including, but not limited to, suspension or expulsion.

3. Educational Experiences

Educational experiences are learning opportunities, including, but not limited to, community service, drug and alcohol education, and written papers.

4. Loss of Privileges

Loss of privileges is a denial for a designated period of time of access to university services, privileges, and benefits, which may impact participating in extracurricular activities, residence in university housing, university student leadership responsibilities, leadership within student organizations, academic activities, ability to reserve space, funding, intramurals, and study abroad. Bans, deactivations, and holds are restrictions on access to university services, activities, facilities, or registration.

5. Restitution

Restitution is monetary recompense to the university and/or a member of the university community or others to cover the cost of damage, injury, or loss of community or personal property as a result of a violation.

6. University Policy Sanctions

University Policy Sanctions are any sanctions not specified in this policy, but which are applied to a respondent as a result of prohibited conduct of another university policy and as set forth therein.

7. Deferred Suspension

Deferred suspension is a designated period during which a respondent is given the opportunity to demonstrate the ability to abide by this policy. Subsequent violations of this policy during the term of a deferred suspension will result in suspension or expulsion.

Sanctions 8-11 are recorded on a transcript. These sanctions are reported to external agencies in response to standard inquiries about university disciplinary action and otherwise as required by law or authorized by the individual respondent.

8. Suspension

Suspension is removal of a respondent for a defined period, generally up to eight (8) semesters, during which a respondent loses all university privileges, which generally includes access to classes, facilities, programs, activities, services, and property. Consistent with the university's continuous enrollment policy, all students who do not attend VCU for three or more successive semesters, excluding summer sessions, must submit an application for readmission.

9. Expulsion

Expulsion is permanent dismissal from the university, administrative withdrawal from classes and loss of all university privileges.

B. Sanctions for Respondents who are Student Organizations

Suspension of a SO does not result in a sanction or transcript notation for individual student members of the SO; individual students are assigned sanctions only as separately adjudicated as an individual respondent.

1. Censure

Censure is a written notice warning to the respondent to avoid a recurrence of any conduct that violates this policy and/or any university policy. Subsequent violations of this policy or any university policy may result in more severe disciplinary action.

2. Disciplinary Probation

Disciplinary probation is a specified period, a minimum of one semester, requiring the respondent to avoid a recurrence of any conduct that violates this policy and/or any university policy that may result in additional university sanctions, including, but not limited to, suspension or expulsion.

3. Educational Experiences

Educational experiences are learning opportunities, including, but not limited to, community service, drug and alcohol education, and written papers.

4. Loss of Privileges

Loss of privileges is a denial for a designated period of time of access to university services, privileges, and benefits, which may impact participating in extracurricular activities, reserving space, eligibility to apply for and receive funding, intramurals. Bans, deactivations, and holds are restrictions on access to university services, activities, facilities, or registration.

5. Restitution

Restitution is monetary recompense to the university and/or a member of the university community or others to cover the cost of damage, injury, or loss of community or personal property as a result of a violation.

6. Deferred Suspension

Deferred suspension is a designated period during which a respondent is given the opportunity to demonstrate the ability to abide by this policy. Subsequent violations of this policy during the term of a deferred suspension will result in suspension.

7. Suspension

Suspension is removal of a respondent SO for a defined period during which the SO loses all university privileges, which generally includes access to programs, activities, services, and property. The terms of suspension for an SO may require the SO to satisfy certain conditions before it may resume operations following suspension, including, for chapters supported by Fraternity and Sorority Life (FSL), completion of the FSL expansion process.

8. Loss of Recognition (Equivalent of Expulsion)

Loss of Recognition is a sanction for SO that includes, but is not limited to, the revocation of the university's recognition of the SO, denial of access to university resources, and the prohibition of all SO operations. If the SO also holds a charter from an inter/national organization governing body, the university may also request that the inter/national organization governing body revoke the charter of the SO. SO that have lost university recognition remain subject to this policy. Loss of recognition is permanent. A SO that wishes to be recognized by the university after loss of recognition must fulfill all requirements for a new SO and receive specific written authorization from the Vice President of Student Affairs or designee.

VIII. Student Privacy and Notification

VCU is committed to protecting student privacy in accordance with the Student Privacy practices set by Records and Registration and applicable law, including the federal Family Educational Rights and Privacy Act (FERPA). (See the Related Documents section below.) Sanctions and other student conduct records that identify an individual student are part of that student's educational record and are generally protected from release without their written authorization. However, consistent with FERPA, the University may release conduct records without consent in the following circumstances:

1. If the student is alleged to have committed a crime of violence or a nonforcible sex offense, once a final determination of responsibility has been made, the University may release the final results of the disciplinary proceeding (limited to the student respondent's name, violation committed, and any sanction imposed) as follows:
 - a. To the public, if the student respondent is found responsible.
 - b. To a victim of the crime of violence or nonforcible sex offense, the final results with respect to the alleged crime or offense, regardless of the determination of responsibility.

For the purpose of this policy, a "crime of violence" includes the following offenses or attempts to commit the following offenses: arson, burglary, robbery, criminal homicide, assault, destruction/damage/vandalism of property, and kidnapping/abduction. A "nonforcible sex offense" means statutory rape or incest.

2. If a student under the age of 21 is found responsible for violating any Federal, State, or local law, or any VCU rule or policy, governing the use or possession of alcohol or a controlled substance, VCU will notify their parent, guardian or individual acting as a parent in the absence of a parent or guardian of such violation, if the student is under the age of 21 at the time of the notification. Students eligible for amnesty under this policy will not be found responsible and will not be subject to parental notification under this provision.
3. If a conduct record is a joint record of one or more students in addition to the respondent, then each student may inspect the portions of the records that directly relate to them. In this case, the university will redact from any record provided to a student information that identifies any other student, to the extent possible.

While the university carefully protects the privacy of individual students as described above, SO conduct records that do not contain information concerning identifiable students, are generally subject to mandatory

disclosure under Virginia's Freedom of Information Act (FOIA). To inform the University community, VCU may report SO conduct on its website.

IX. Interpretation and revision

Any question of interpretation or application of this policy shall be referred to the director of Student Conduct and Academic Integrity or designee for final determination. This policy shall be reviewed regularly under the direction of the director of SCAI.

Forms

[Incident Reporting Form](#)

Related Documents

1. [VCU Policy: Hazing Prevention and Discipline](#)
2. [VCU Policy: Title IX Sexual Harassment Policy - Interim](#)
3. [VCU Policy: Interim Sex-Based Misconduct Policy](#)
4. [VCU Policy: Honor System and Standards of Academic Conduct](#)
5. [VCU Policy: Alcohol and Other Drugs](#)
6. [VCU Policy: University Computer and Network Resources Use Policy](#)
7. [VCU Policy: Procedures for Degree Revocation](#)
8. [VCU Policy: Reservation and Use of Space](#)
9. [Graduate Bulletin](#)
10. [Undergraduate Bulletin](#)
11. [Residential Life and Housing Contract](#)
12. [Handbook for Student Organizations at VCU](#)
13. [VCU Student Athlete Handbook](#)
14. [VCU Interim Suspension Procedure](#)
15. [VCU Records and Registration: Student Privacy](#)
16. [State of Virginia Code § 23.1-822](#)
17. [FERPA regulations \(34 CFR Part 99\)](#)

Revision History

This policy supersedes the following archived policies:

- May 10, 2013 [New Policy] - Student Code of Conduct
- April 3, 2015 - Student Code of Conduct (Minor SCHEV requirement revision added)
- January 26, 2017 - Student Code of Conduct (minor revision to reflect current policy names and updated hyperlinks)
- June 25, 2018 - Student Code of Conduct (minor revision to repair typographical errors and update Related Documents section)
- August 2022 – Student Code of Conduct – Interim (incorporating provisions applicable to student organizations as respondents)

FAQ

Q: If I did not commit the violation of which I am being accused, why do I need to respond?

A: All allegations of misconduct will be investigated. The investigation process affords the respondent the right to respond to and refute the allegation, and your response can help the investigator determine whether you are responsible for the alleged violation. If it is determined that a respondent is not responsible for the alleged misconduct, the matter will then be closed with no disciplinary action taken against the respondent.

Q: Why is there a hold on my registration or degree?

A: Your registration may be blocked for failure to schedule or attend a meeting regarding an alleged violation or failure to comply with a sanction. In such circumstances, the hold is removed once you schedule and attend your conduct meeting, or upon completion of the sanction.

Additionally, students classified as seniors or nearing the end of their graduate/professional program shall have a degree hold imposed pending the adjudication of the alleged misconduct, including all appeal options.

Q: What if I am off campus at the time of the alleged violation?

A: The director of SCAI has the discretion to determine whether off-campus conduct by a student or SO is subject to this policy. Some factors may include whether the conduct is connected with a university activity or members of the university community.

Q: Can my case go through the courts and the university conduct process?

A: Yes. They are entirely independent and separate processes. University disciplinary proceedings may be instituted against a student charged with conduct that may violate criminal or civil law and this policy (that is, when both possible violations result from the same factual situation). Proceedings under this policy may be initiated and carried out prior to, simultaneously with, or following civil or criminal proceedings. Findings made or sanctions imposed under this policy shall not be subject to change because of the criminal or civil outcomes. The concept of 'double jeopardy' applied in criminal settings is not applicable to a university proceeding.

Q: What is FERPA?

A: The Family Education Rights and Privacy Act of 1974 (FERPA) is a federal law that protects the privacy of student records. It generally affords students the right to authorize the university's disclosure of their education records. This includes disciplinary records. Additional resources can be found here: <https://rar.vcu.edu/records/family-educational-rights-and-privacy-act/>

Q: Will my parents or guardians be notified of a violation?

A: Notification depends on your age and the specific violation. When a student under the age of 21 is found responsible for violating alcohol, drugs, and/or controlled substance laws or policies, the student's parents or guardians may be notified. The notification will include information concerning the violation, the university sanctions, and the university's expectations for future behavior. For more information about amnesty, see section VIII.2 above.

NOTE: Residential Life and Housing or the Dean of Students may disclose a student's education records to parents, guardians, or others as necessary in connection with a health or safety emergency.

Q: Will my records be released for a background check?

A: A student may need to provide a disciplinary history to a third party for a study abroad program, graduate school, employment, etc. With a signed release by the student, the university may release to the external agency disciplinary records as requested by the student and generally related to suspension or expulsion.

Q: What individual conduct records are maintained and for how long?

A: All student conduct records for individual respondents are maintained in an electronic database for a minimum of seven (7) years, in compliance with the Jeanne Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act. If an individual receives additional sanctions during the seven-year period, records of all violations will be retained until there is a period of seven years following the most recent incident. If an individual is suspended or expelled, complete records of the proceedings and all pertinent documents, including records of previous lesser sanctions, shall be maintained permanently.

Q: What sanctions are recorded on a student's transcript?

A: Suspensions and expulsions are noted on an individual student respondent's transcript.

Q: If a respondent is found responsible for arson, assault, battery, or endangering health and safety, and an identified party is the victim of such behavior, will the identified party be notified of the outcome of the respondent's student conduct process?

A: Yes. The university will consider the interest of an individual victim of arson, assault, battery, or other "crimes of violence" under FERPA and may notify them of the outcome of the respondent's student conduct process.

Q: What happens when there is a Revocation of Admission or Degree?

A: Revocation of Admission is the administrative action by the Office of Admissions of rescinding an offer of university admission that had been awarded under circumstances of fraud, misrepresentation, or other violation of university standards in the student's matriculation to the university.

Revocation of Degree is the administrative action of rescinding a degree that had been awarded. For more detail, refer to the [Procedures for Degree Revocation](#) policy.

Amendment to the 2022-2028 Six-Year Capital Plan
Arts and Innovation Academic Building, 501 West Broad Street

Background

VCU seeks approval to amend the university's 2022-2028 Six-Year Capital Plan to reflect the revised amount of funding for the Arts and Innovation Academic Building (AIAB). The VCU Board of Visitors approved this project in May 2019 as part of the Six-Year Capital Plan at an estimated cost of \$181M. The 2022 General Assembly later approved \$163M in state funding for the project, with the understanding that the balance of \$18M would be funded by the university. Since then, the state and VCU have worked collaboratively to address cost increases due to inflation, construction expenses, anticipated supply chain disruptions, cost premiums for high rise construction and schedule impacts. This collaborative analysis between VCU and the Virginia Department of General Services, which included value engineering efforts, arrived at a revised cost of \$253M.

Considerations

The proposed 212,652 square foot AIAB will be located on the southeast corner of Broad and Belvidere Streets, consolidating our nationally prominent arts and innovation programs into a single location. It will be home to new hybrid classroom-laboratories, interdisciplinary performance and makerspaces, and creative incubators for rapidly growing partnerships across arts, business, medicine and engineering.

Along with the Institute for Contemporary Art at the southwest corner of Broad and Belvedere, the AIAB will anchor the east side of the VCU Monroe Park Campus and act as a "front door" highlighting the university's status as a premier arts institution and providing a link to the downtown Richmond Arts District.

Costs and funding

\$232.4M will be funded by the state with the balance of \$20.6M funded by the university.

Recommendation

Authorize an amendment of the university's 2022-2028 Six-Year Capital Plan to reflect the revised \$253M funding for the AIAB.

Design Review and Approval of Project Plans

Arts and Innovation Academic Building

Background

The proposed 212,652 square foot Arts and Innovation Academic Building (AIAB) will be located on the southeast corner of Broad and Belvidere Streets, consolidating nationally prominent arts and innovation programs into a single location.

The VCU Board of Visitors approved this project in May 2019 as part of the Six-Year Capital Plan. VCU now seeks the board's review and approval of project plans, which is required by the VCU Management Agreement.

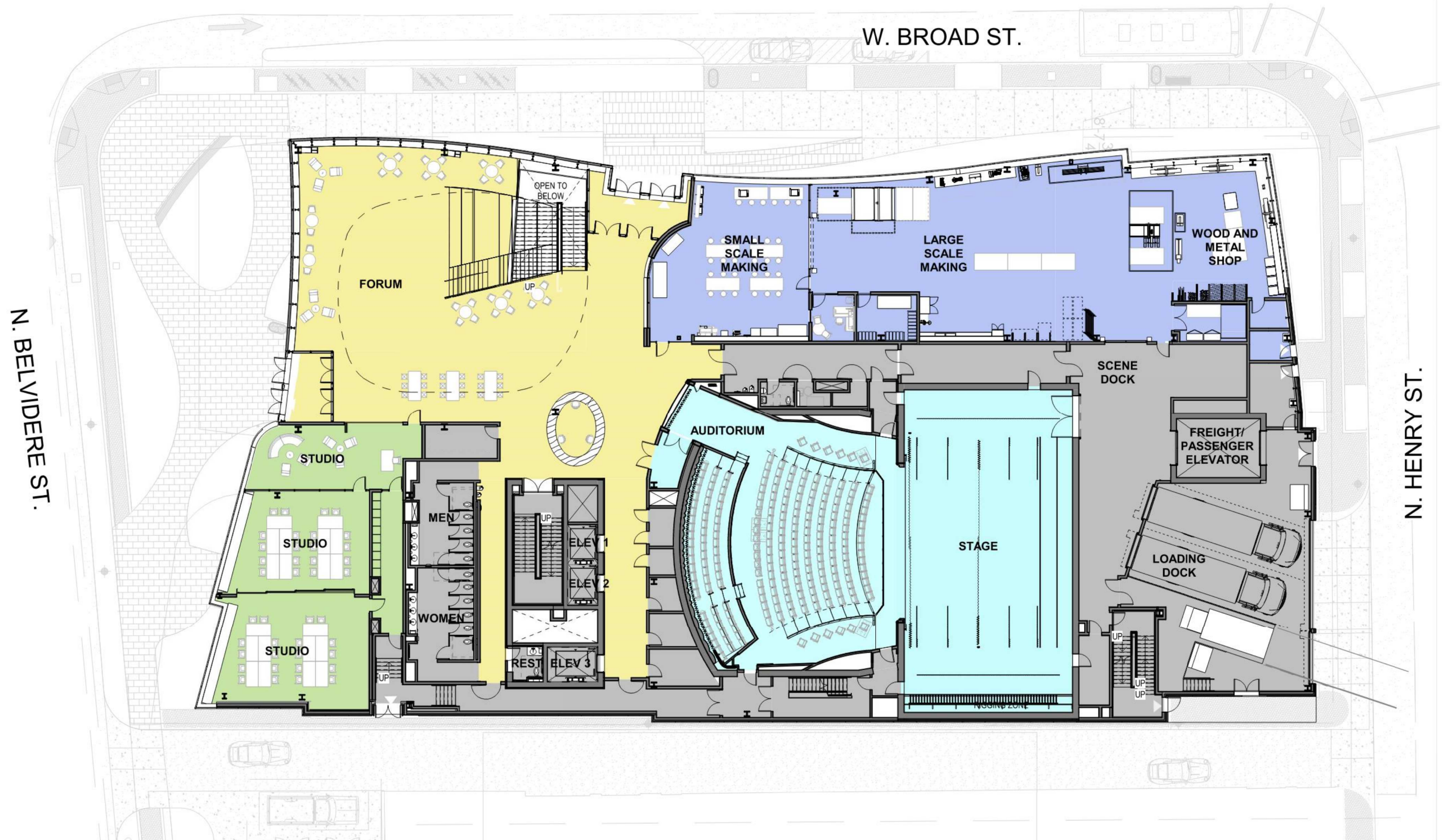
The project plans depict the design of the project by illustrating the functional layout and adjacencies of the building. The project plans were developed collaboratively with the design architect, William Rawn Associates, as well as the VCU School of the Arts, VCU daVinci Center for Innovation, VCU School of the Arts Center for the Creative Economy, and VCU Facilities Management.

Recommendation

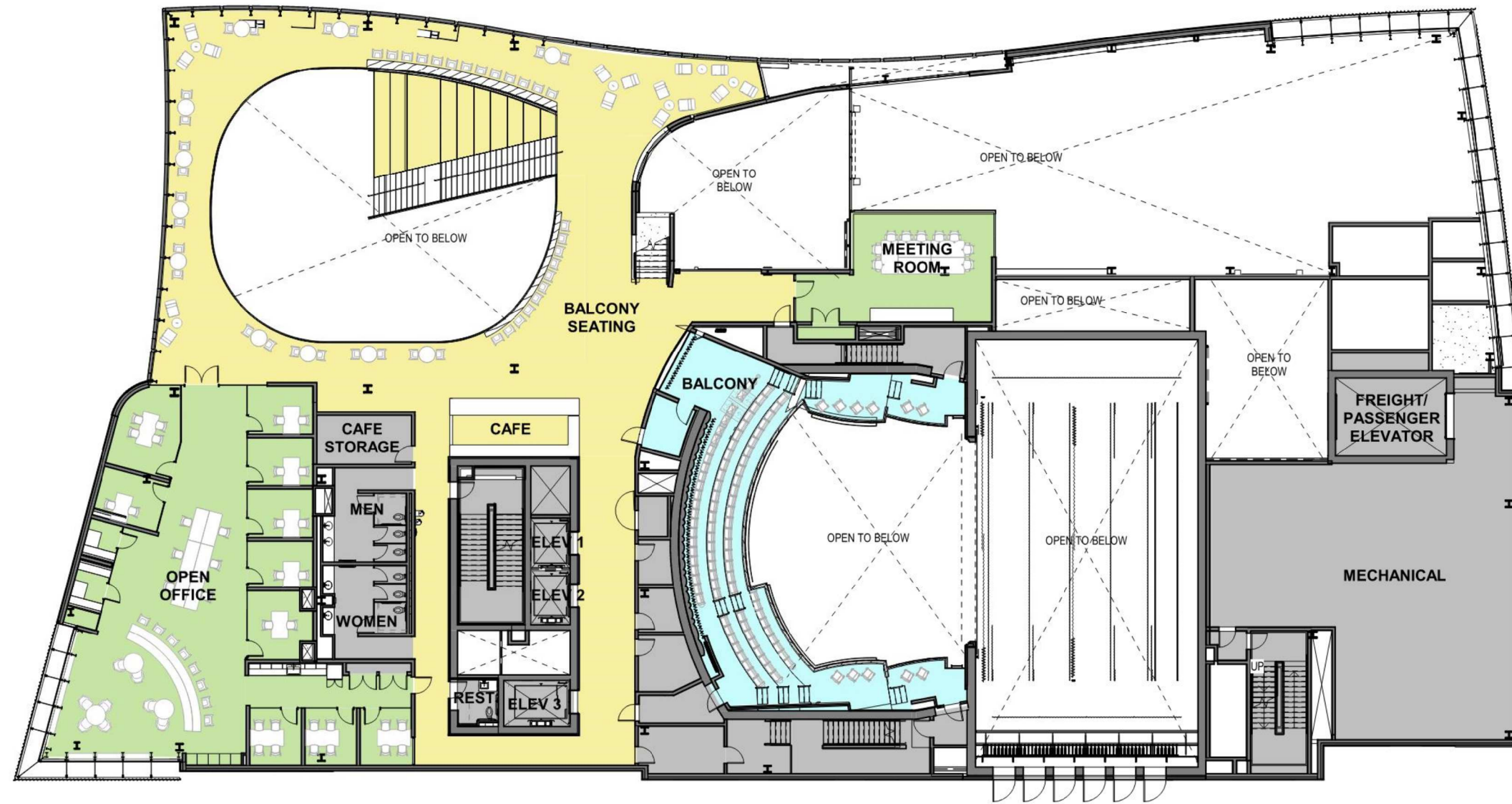
Approve the project plans for the AIAB.



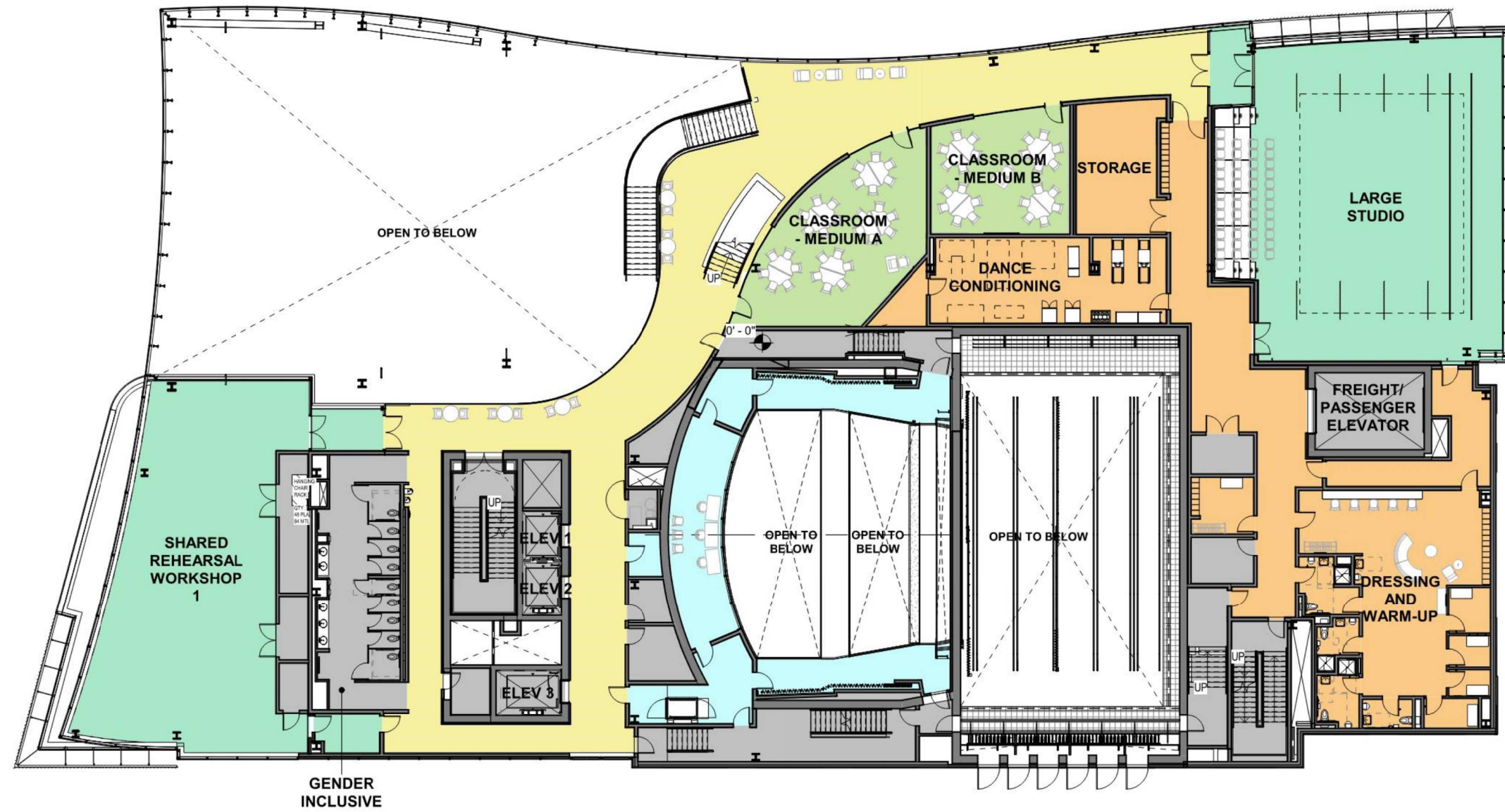
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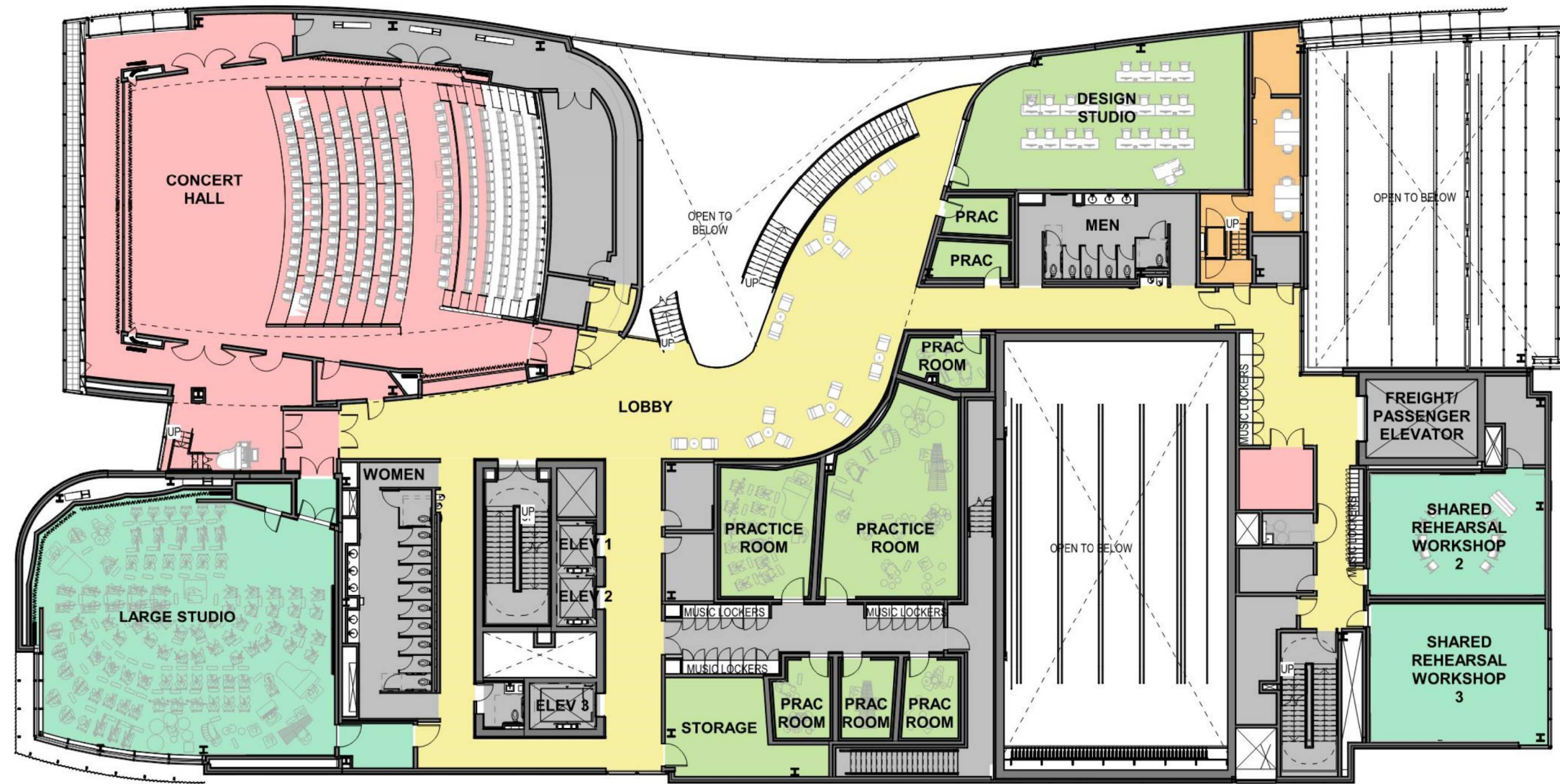
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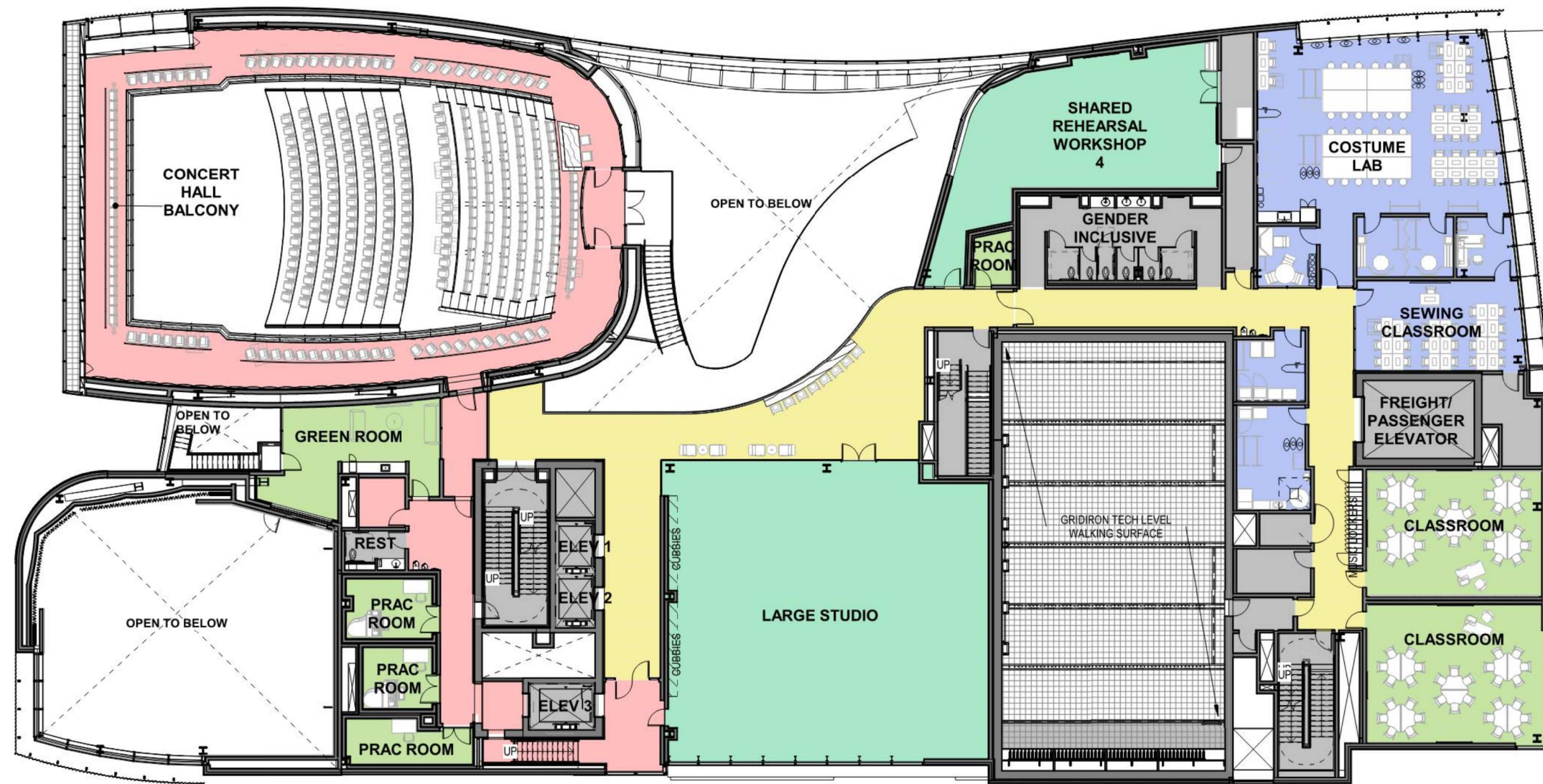
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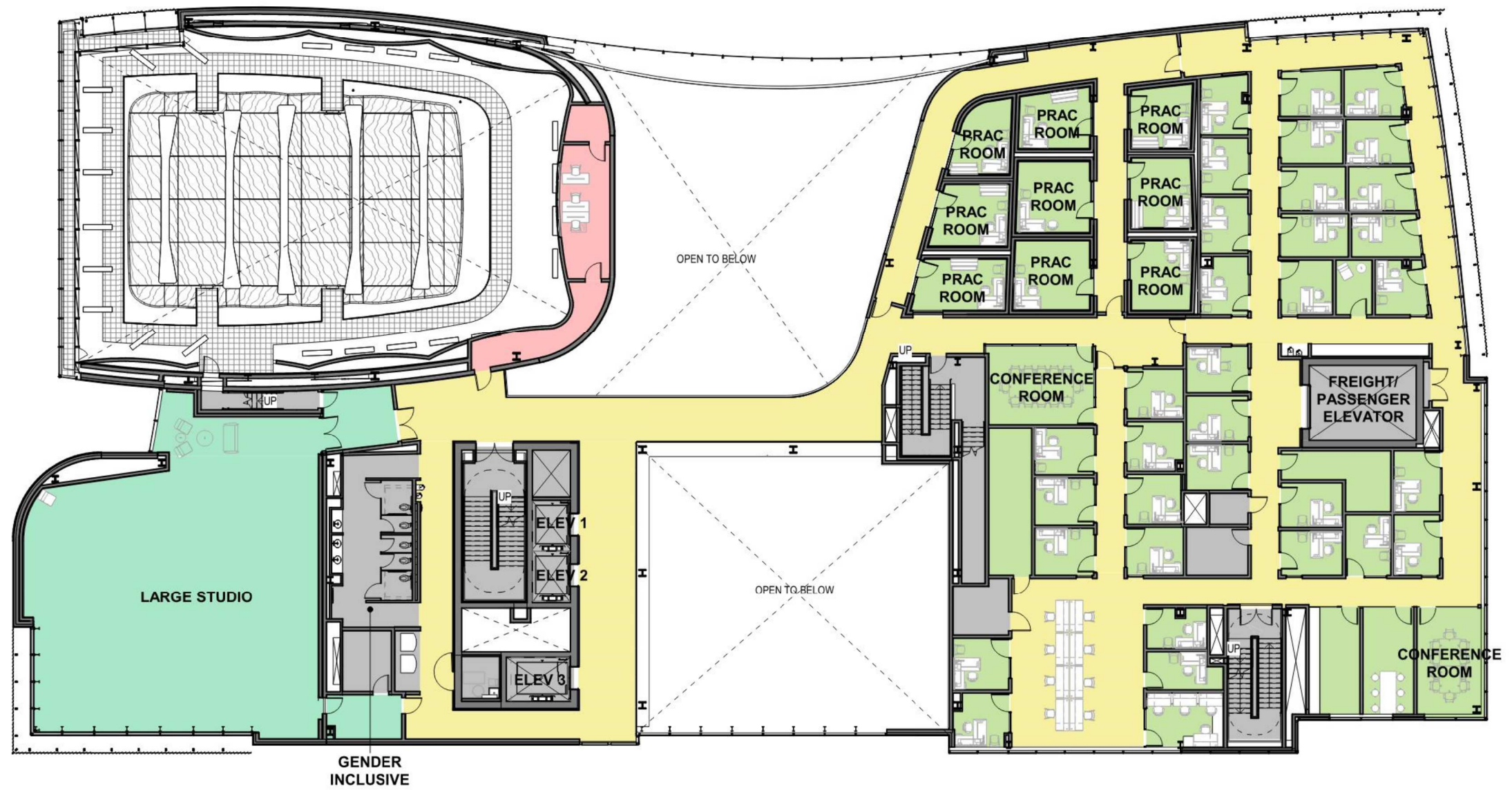
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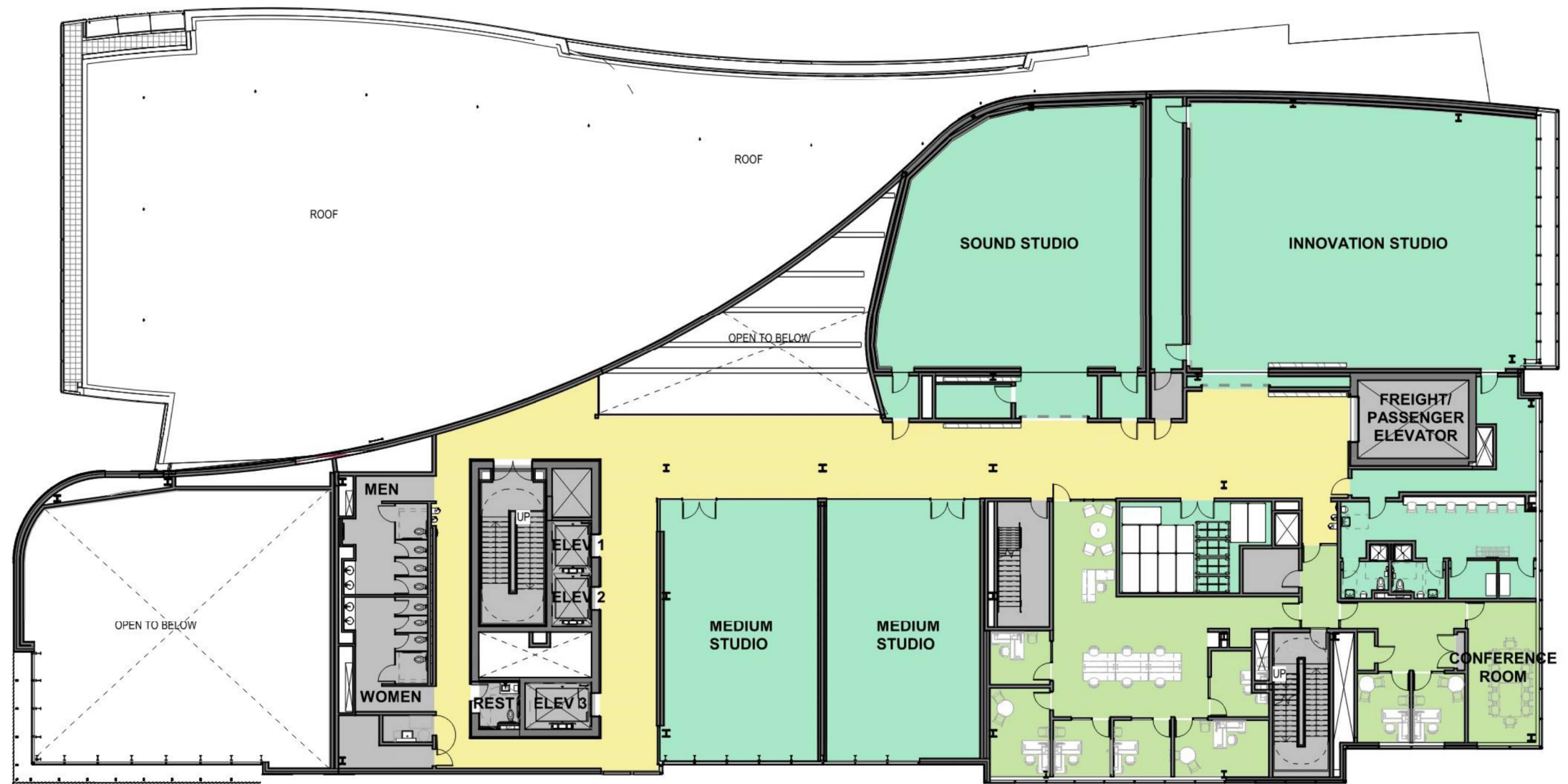
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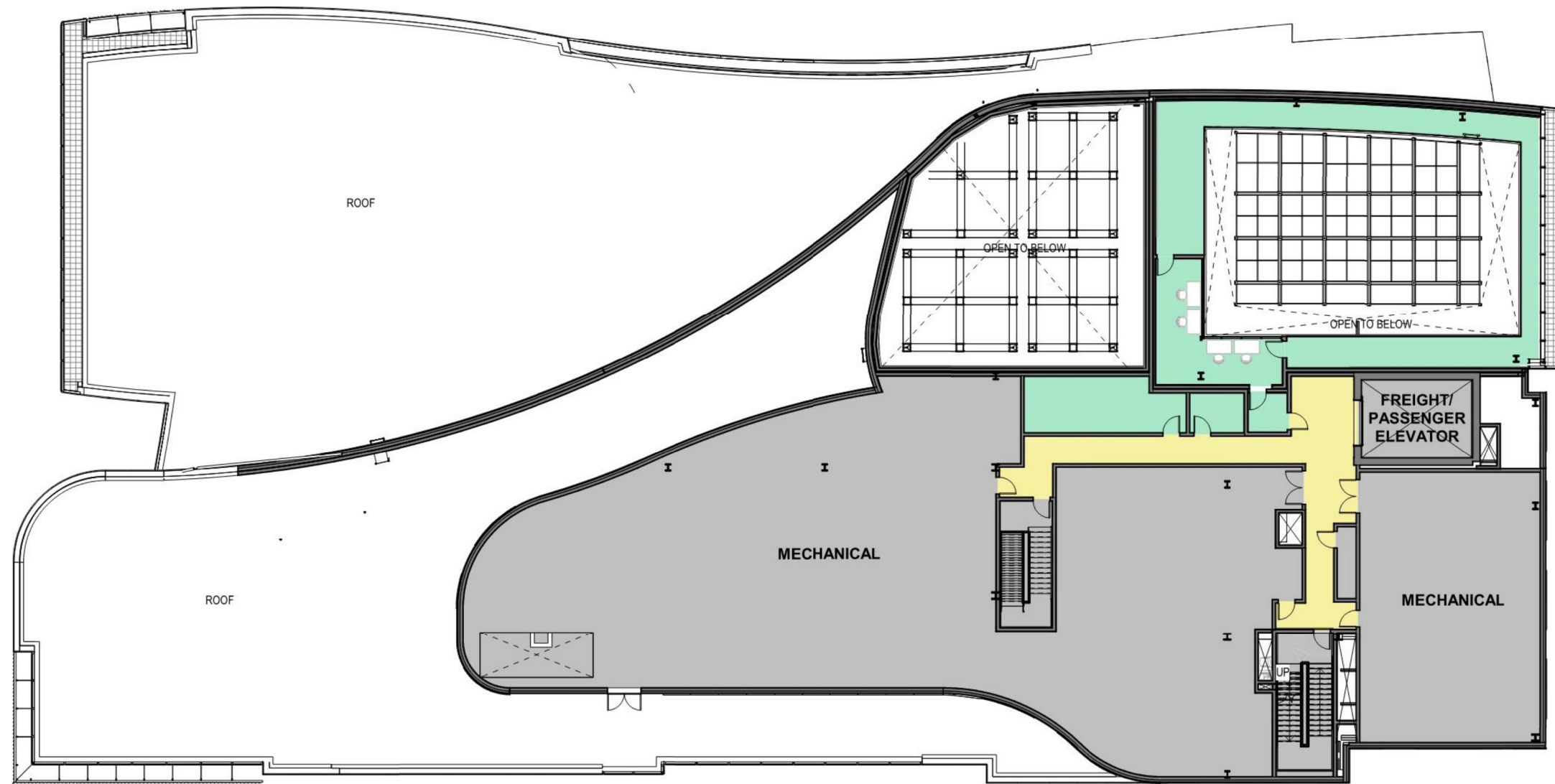


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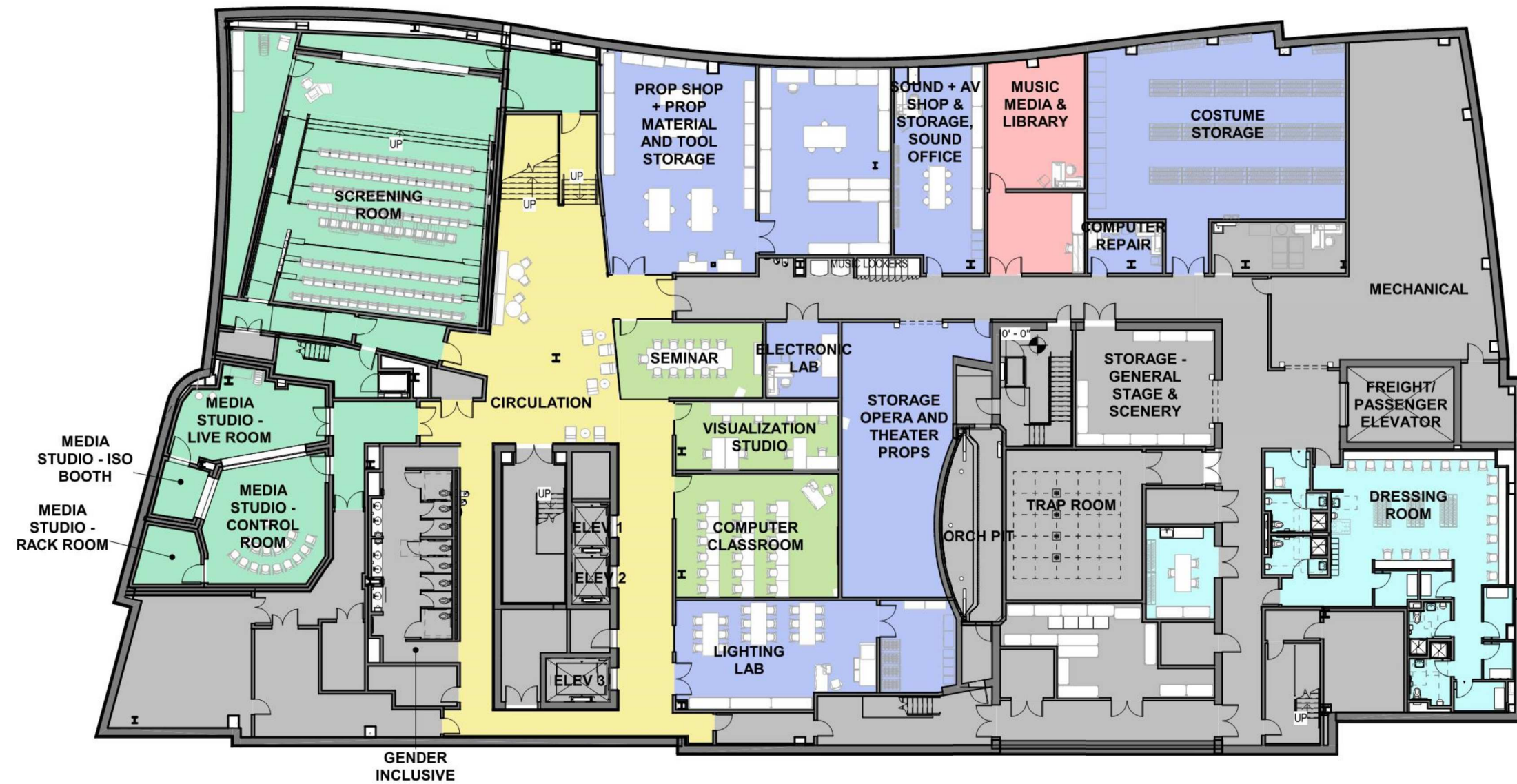


LEVEL 7





LEVEL BASEMENT



Resolution to Approve the 2024-2030 Six-Year Capital Plan

Background

The university's proposed Six-Year Capital Plan is a prioritization of key projects outlined in the ONE VCU Master Plan. As part of the Commonwealth's biennial budget process, the university prepares a six-year projection of capital outlay needs. The governor evaluates the university's projected capital outlay needs and incorporates recommendations into the state Executive Budget for consideration by the General Assembly. The current 2022-2028 Six-Year Capital Plan was approved by the Board of Visitors in May 2021.

The proposed 2024-2030 Six-Year Capital Plan includes prioritized capital projects the university anticipates initiating over the next six years. The projects are categorized as those requiring state financial support ("State Projects") and those which can be accomplished with other funding sources ("University Projects"), the latter of which includes public-private partnerships ("P3s"). The timeline in the Six-Year Capital Plan is optimistic and projects are often carried forward to future bienniums.

The Board of Visitors approves the 2024-2030 Six-Year Capital Plan, to include:

- The State Project funding request to the governor; and
- University Projects (including P3s) which are not submitted to the governor

Recommendation

Approve the resolution for the 2024-2030 Six-Year Capital Plan.

Virginia Commonwealth University Board of Visitors
RESOLUTION
Approval of the Six-Year Capital Outlay Plan for 2024-2030
May 12, 2023

BE IT RESOLVED, the Virginia Commonwealth University Board of Visitors approves the Virginia Commonwealth University Six-Year Capital Outlay Plan for 2024-2030, as presented in Appendix A.

2024-2026 Biennium

Costs are estimated and will be revised through the design process

Project	State general fund	Cash/private	Debt	P3	Total
State projects					
VCU Dentistry Center	\$415,276,126				\$415,276,126
Research Building	TBD	TBD	TBD	TBD	\$400,000,000
Interdisciplinary Classroom & Laboratory Building (Hyflex/Innovation)	\$201,205,837				\$201,205,837
University projects					
Student Housing Renovation - Johnson Hall		\$5,000,000	\$65,000,000		\$70,000,000
Athletic Village - Tennis Center		\$30,000,000	\$15,000,000		\$45,000,000
Athletic Village - Outdoor Track Facilities & Practice Fields (Replaces Sports Backers Stadium)		\$38,000,000			\$38,000,000
Front Doors & Streetscapes Phase III		\$2,505,815			\$2,505,815
Public/private partnership projects					
Student Housing - Honors Undergraduate				125,000,000	125,000,000

2026-2028 Biennium

Costs are estimated and will be revised through the design process

Project	State general fund	Cash/private	Debt	P3	Total
State projects					
Arts & Innovation Academic Building Equipment	\$20,342,639				\$20,342,639
Oliver Hall Renovation	\$100,311,410				\$100,311,410
School of Pharmacy	\$264,059,606				\$264,059,606
University projects					
Athletic Village - Soccer Stadium		TBD	TBD		TBD
Front Doors & Streetscapes Phase IV		\$4,000,000			\$4,000,000
Student Commons/Wellness Facility/Iconic Green		TBD	TBD		\$181,293,186
Public/private partnership projects					
Student Housing - Academic Medical Center Campus				TBD	TBD

2028-2030 Biennium

Costs are estimated and will be revised through the design process

Project	State general fund	Cash/private	Debt	P3	Total
State projects					
Interdisciplinary Health Sciences Academic Building, including Library & Innovation Center	\$325,000,000				\$325,000,000
University projects					
Athletic Village Indoor Field House		TBD	TBD		TBD
Front Doors & Streetscapes Phase V		\$3,000,000	TBD		\$3,000,000

Resolution to Authorize the Initiation of a Major Capital Project

Athletics Village Phase I: Outdoor Track Facilities and Practice Fields

Background

The Athletics Village was initially included in VCU's 2022-2028 Six-Year Capital Plan and was approved by the Board of Visitors in May 2021. This is a request for authorization to initiate this major capital project, as required by VCU's Management Agreement, for Phase I: Outdoor Track Facilities and Practice Fields, which is a replacement for the current Sports Backers Stadium.

Considerations

VCU Athletics currently falls below its peer average for sport and recreation space, with approximately a quarter of existing facilities in need of major renovation. An off-campus VCU Athletics Village will offer new sports fields and facilities, including a tennis center, soccer stadium, outdoor track stadium, practice fields, and a multi-purpose facility. The construction of these new facilities allows certain on-campus real estate currently used for athletic facilities to once again be used for academic and student needs. These new facilities will also reduce travel and increase practice times for teams, as well as offer new opportunities for community impact through youth programming.

Size and scope

The VCU Management Agreement states that the Board of Visitors shall authorize the initiation of each major capital project by approving its size, scope, budget and funding.

The development of the Athletics Village will take place in four phases:

- Phase 1: Outdoor Track Facilities and Practice Fields
- Phase 2: Tennis Center
- Phase 3: Soccer Stadium
- Phase 4: Indoor Field House

This approval is to initiate Phase I. The new outdoor track facilities and practice fields will consist of a 400 meter outdoor track with a natural turf infield to accommodate an NCAA soccer field. The outdoor track facilities, intended to replace those of the current Sports Backers Stadium, will contain seating for 2,000 spectators as well as locker rooms, concessions and storage. There will be two lighted practice fields, one of artificial turf and one of natural grass.

The size and scope will be refined through the planning phase and the board will be updated throughout the process.

Cost and funding

The estimated cost of Phase I: Outdoor Track Facilities and Practice Fields is \$38M and will be funded by the sale of the Sports Backers Stadium property and private funds.

Recommendation

Approve the resolution to initiate a major capital project for the Athletics Village Phase I: Outdoor Track Facilities and Practice Fields.

**RESOLUTION OF THE BOARD OF VISITORS
VIRGINIA COMMONWEALTH UNIVERSITY**

**AUTHORIZATION TO INITIATE A MAJOR CAPITAL PROJECT FOR A
ATHLETICS VILLAGE PHASE I: OUTDOOR TRACK FACILITIES AND PRACTICE
FIELDS**

WHEREAS, Chapter 6.1, Title 23 of the Code of Virginia of 1950, as amended (the "Virginia Code") establishes a public corporation under the name and style of Virginia Commonwealth University (the "University") which is governed by a Board of Visitors (the "Board") vested with the supervision, management and control of the University; and

WHEREAS, Title 23 of the Virginia Code classifies the University as an educational institution of the Commonwealth of Virginia; and

WHEREAS, by Chapter 10, Title 23.1 of the Virginia Code, the University entered into that certain "Management Agreement By and Between the Commonwealth of Virginia and The Rector and Visitors of Virginia Commonwealth University" (the "Management Agreement") which was enacted as Chapter 594 of the Acts of Assembly of 2008 which, as amended, classifies the University as a public institution of higher education and empowers the University with the authority to undertake and implement capital projects, which include the acquisition of any interest in land, improvements on acquired land, capital leases, new construction, and building improvements and renovations; and

WHEREAS, the Management Agreement requires the Board of Visitors to authorize the initiation of each Major Capital Project (as defined in the Management Agreement) by approving its size, scope, budget, and funding; and

WHEREAS, the Board has been presented with plans for a Major Capital Project titled/consisting of Phase I: Outdoor Track Facilities and Practice Fields (the "Project"); and

WHEREAS, the cost of the Project is expected to be approximately \$38M (the "Project Cost"); and

WHEREAS, the Board has determined it is desirable to authorize the initiation of the Project.

NOW, THEREFORE, BE IT RESOLVED, that the Board hereby authorizes and approves the Project, including the size, scope, budget and funding of the Project, as described in the materials presented to the Board; and

RESOLVED FURTHER, that, upon approval, this action shall take effect immediately.