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|--------------------------------|----------------------------------------------------------------------------|
| <b>Policy Title</b>            | Student Grievance Process                                                  |
| <b>Policy Number:</b>          | ADM 1.05                                                                   |
| <b>Department:</b>             | BSMCON                                                                     |
| <b>Functional Area:</b>        | Student Affairs                                                            |
| <b>Contributing Department</b> |                                                                            |
| <b>Approved by:</b>            | RHEI Leadership Team                                                       |
| <b>Effective Date:</b>         | 8/1/2026                                                                   |
| <b>Version:</b>                | 1                                                                          |
| <b>Status:</b>                 | Approved                                                                   |
| <b>Manual</b>                  | To be entered by Compliance360 System administrators or N/A if not in C360 |
| <b>Section</b>                 | To be entered by Compliance360 System administrators or N/A if not in C360 |

## I. Mission, Vision and Values

This policy reflects our commitment to human dignity, integrity, compassion, stewardship, and service by guiding decisions and actions that uphold respect for all individuals and promote excellence in our work.

This policy aligns with our mission of extending the compassionate ministry of Jesus by improving the health and well-being of our communities and providing good help to those in need, especially the poor, dying, and underserved by ensuring that our practices support ethical, effective, and accountable service across all areas of the organization.

## II. Policy

Student Grievance Process

## III. Purpose

It is the policy of the Bon Secours Memorial College of Nursing (“College” or “BSMCON”) that appropriate processes and procedures be followed in all matters pertaining to the rights of students.

This policy is applicable to student grievances, including student complaints of unlawful discrimination or unfair treatment on the basis of the following:

- Title IX of Education Amendments of 1972, as amended
- Title VI of the Civil Rights Act of 1964, as amended
- Title IV of the Higher Education Act of 1965, as amended
- Section 504 of the Rehabilitation Act of 1973, as amended, and its implemented regulations
- Americans with Disabilities Act of 1992
- Provisions of Executive Order Number 11246 as amended 66 by 11375
- Family Educational Rights and Privacy Act of 1974 as amended

- The Age Discrimination Act of 1975
- Governor's Executive Order Number One, Virginia Equal Employment Opportunity Plan, effective February 6, 1974

Note that student complaints of Sex Discrimination and Sex-Based Harassment will be investigated and resolved pursuant to ADM 9.06, the Sex Discrimination and Sex-Based Harassment Policy. Cases pertaining to student conduct are subject to ADM 3.05 Student Conduct – Rights and Responsibilities. Cases of academic integrity are resolved through the process defined in ACA 1.09 Academic Integrity. Grade appeals, including dismissal, must be addressed through ACA 1.06 Grade Appeal Policy.

#### IV. Scope

This policy applies to all BSMCON students.

#### V. Policy Details

##### Initiation of a Grievance:

Prior to submitting a grievance, the student(s) should discuss the matter with the associate whose decision they are grieving and make every attempt to resolve the matter informally if possible.

A grievance must be initiated no later than five (5) business days from the time the student knows or should have known of the issue that is the subject of the grievance. Students are encouraged to contact the Coordinator for Student Engagement if assistance is needed in understanding this policy.

A grievance may be based on one of the following claims:

- arbitrary actions by a staff member or administrative office.
- prejudicial, discriminatory, or harassing treatment of a student by a staff or faculty member or the administrative office including such conduct based on race/ethnicity, religion, age, marital status, national origin, gender, sexual orientation, military veteran status, disability or other legally protected status.
- an administrative error in the application of a policy, procedure, or applicable law by a staff or faculty member or administrative office.
- extenuating circumstances. Extenuating circumstances are defined as debilitating health problems (mental or physical), a family emergency (such as the death of an immediate family member), and unexpected financial difficulties (such as a partner/spouse losing their job) that have significant detrimental impact to a student during the semester.

##### Procedures:

A non-academic grievance occurs in the following order:

| Level I                                                                                 | Level II                                                                            |
|-----------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|
| Submission of Student Grievance Form to the Office of Student and Alumni Affairs (OSAA) | Submission of Student Grievance Level II Appeal Form to the Dean of Student Affairs |
| Forms can be found on the College website under Quick Links.                            |                                                                                     |

##### Level I

1. Within five (5) business days of the occurrence, the student must initiate the grievance process. Students pursuing a grievance must follow the process as defined in this policy, including submission of the *Student Grievance Form* found on the College website. The form must be completed in full in order for a grievance to be considered. Not following the process, including established deadlines, may result in the grievance not being considered.
2. Upon receiving the *Student Grievance Form*, the Director of Student and Alumni Affairs ("Director" or designee) has a maximum of ten (10) business days to schedule a meeting with the student. Within this time, the Director will fully investigate the grievance. This investigation may include review of material submitted by all parties. The Director may consult with appropriate institutional leadership as needed.
3. Within five (5) business days after the meeting, the Director will provide the student a letter outlining the decision of the meeting, including an agreement if one is reached and/or any related corresponding action plan.
4. If the student is not satisfied with the decision of the grievance outcome at Level I, they may continue to Level II.

#### Level II - FINAL

1. If the student is not satisfied with the decision at Level I, within five (5) business days from the student's receipt of the written Level I decision from the Director, the student may file a Level II appeal to the Dean of Student Affairs ("Dean" or designee). Within ten (10) business days of receipt of this appeal, the Dean will schedule a meeting with the student. The meeting may take place after the ten (10) business day timeframe so long as the date identified for the meeting is mutually agreed upon by the student and the Dean. The Dean may consult with appropriate institutional leadership as needed.
2. Within the ten (10) business day timeframe, the Dean will consider the grievance. This may include review of material submitted by both parties. At the meeting, the student must clearly present their grievance and present the resolution that they are seeking. The Dean may request a security officer be present at the meeting.
3. Within five (5) business days after the meeting, the Dean will provide an official letter including the final determined outcome to the student, the associate whose decision is being grieved, and others as appropriate. The final determined outcome of the Level II appeal is final and not appealable.

Note: In some instances, the subject of a student grievance may impact a student's progression in their program. Students participating in the grievance process may be permitted to progress to the next course/semester/term pending a final decision in their case or may be permitted to go on a standard period of non-enrollment. **Those who progress are responsible for any tuition and fees associated with such progression and may be at risk of financial loss should their appeal be unsuccessful. A period of non-enrollment will impact the student's anticipated date of graduation, even if successful on appeal.**

#### Final Disposition of Records

All materials and decisions related to the appeal will remain confidential and will be retained for three years from the date of final decision, and not before the aggrieved student graduates, at which time all materials will be destroyed, unless the Dean of Student Affairs directs otherwise.

#### Grievance Meetings

At each level of the grievance process, the involved student will meet with a College associate. No attorneys or other professional advisors/counselors may attend these meetings; however, the College

associate may have a silent observer present at the meeting and the student may have a peer observer present at the meeting. The student must notify the College associate if a peer observer will be present and the identity of that peer observer at least one (1) business day prior to the meeting, or the peer observer may not attend the meeting. The peer observer will not provide any testimony. No audio taping or other recording will be permitted during these meetings, but both parties are free to make notes as needed. If a student is unable to travel to campus to meet, meetings may be facilitated by conferencing technology. Students enrolled in onsite or hybrid programs are expected to attend meetings in person unless extenuating circumstances prevent an in-person meeting to be conducted within the established timeframe. Students enrolled in online programs may attend meetings virtually.

#### External Complaints

In the event of a complaint about the College, as a last resort, students may contact the Accrediting Bureau of Health Education Schools, American Association of Colleges of Nursing Commission on Collegiate Nursing Education, State Council of Higher Education for Virginia, or the Virginia Board of Nursing or the appropriate agency from other states as listed below. Addresses of these agencies are listed below.

In the event of a written complaint to one of these agencies or a “Standards” noncompliance issue, and subsequent notification to the College, immediate priority will be given to resolution of the deficiency in order to maintain accreditation. The Campus Director and Dean of Academic Affairs is expected to respond to the agency in the time frame provided outlining the resolution/plan for resolution of the issue addressed.

#### **Accrediting Bureau of Health Education Schools (ABHES)**

6116 Executive Blvd., Suite 730  
North Bethesda, MD 20852  
(301) 291-7550

#### **Commission on Collegiate Nursing Education (CCNE)**

655 K Street, NW, Suite 750  
Washington, DC 20001  
P: (202) 887-6791  
F: (202) 887-8476

#### **State Council of Higher Education for Virginia (SCHEV)**

*(NOTE: Physical address change anticipated in 2026)*

101 N. 14th Street  
Richmond, VA 23219  
(804) 225-2600  
[www.schev.edu](http://www.schev.edu)  
[ppe@schev.edu](mailto:ppe@schev.edu)

#### **Virginia Board of Nursing**

9960 Mayland Drive, #300  
Henrico, VA 23233  
(804) 367-4400

Students residing outside of Virginia may alternatively choose to contact their state's education agency, which may include:

#### **Colorado**

Colorado Department of Higher Education  
1600 Broadway  
Suite 2200  
Denver, CO 80202

<http://highered.colorado.gov/Academics/Complaints/default.html>

**Florida**

Florida Department of Education  
325 West Gaines Street  
Tallahassee, Florida 32399  
<http://www.fldoe.org/policy/cie/file-a-complaint.stml>

**Kentucky**

Kentucky Council on Post-Secondary Education  
1024 Capital Center Drive  
Frankfort, KY 40601  
[http://cpe.ky.gov/campuses/consumer\\_complaint.html](http://cpe.ky.gov/campuses/consumer_complaint.html)

**Maryland**

Maryland Attorney General  
Consumer Protection Division  
200 St. Paul St.  
Baltimore, MD 21202  
(for consumer protection complaints)

Maryland Higher Education Commission  
6 N. Liberty Street, 10th Floor  
Baltimore, MD 21201  
[https://mhec.maryland.gov/institutions\\_training/Pages/acadaff/acadaffairsdepartments.aspx](https://mhec.maryland.gov/institutions_training/Pages/acadaff/acadaffairsdepartments.aspx)  
(for all other complaints)

**New Jersey**

New Jersey Division of Consumer Affairs  
124 Halsey Street  
Newark, New Jersey 07102  
(for consumer protection complaints)

Office of the Secretary of Higher Education  
ATTN: Complaints  
P.O. Box 542  
Trenton, New Jersey 08625-0542  
<https://www.state.nj.us/highereducation/OSHEComplaintInstructions.shtml>  
(for all other complaints)

**Ohio**

Ohio Department of Higher Education  
25 South Front Street  
Columbus, OH, 43215, US  
<https://www.ohiohighered.org/students/complaints>

**South Carolina**

SC Commission on Higher Education  
Academic Affairs  
Attn: Student Complaint  
1122 Lady Street, Suite 300

Columbia, SC 29201

<https://www.che.sc.gov/Students,FamiliesMilitary/LearningAboutCollege/ConsumerInformation.aspx>

**West Virginia**

West Virginia Office of the Attorney General  
Consumer Protection Division  
PO Box 1789, Charleston, WV 25326-1789  
(for consumer protection complaints)

West Virginia Higher Education Policy Commission  
1018 Kanawha Boulevard, East  
Suite 700  
Charleston, WV 25301  
<http://www.wvhepc.edu/wp-content/uploads/2014/10/Student-Complaint-Processrevised.pdf>(for all other complaints)

**VI. Definitions**

**Grievance Process:** a formal process through which a student or student group can appeal a decision made by a faculty or staff member that negatively affects a student/student group's standing with or treatment by the College. A grievance or complaint may include disputes between a student/student group and an office of the College regarding the interpretation and/or application of the policies, procedures and legal obligations of the College, student governance issues, student activities, and other concerns that a student might present for redress.

Peer Observer: students filing a grievance may choose to have a peer observer present at grievance meetings as outlined below. The peer observer must be another student and may not be legal counsel or any other type of advisor. Peer observers may not speak or participate in the meetings but may take notes to share with the student after the conclusion of the meeting.

Designee

A person who has been officially appointed to act on behalf of someone else in their absence to carry out a responsibility.

RHEIs: Richmond Higher Education Institutions

Business Days: Defined as Monday through Friday when the College is not on break as stated on the published Academic Calendar.

**VII. Attachments**

N/A

**VIII. Related Policies**

ADM 3.05 Student Conduct - Rights and Responsibilities  
ADM 9.06 Title IX: Sexual Harassment

**IX. Regulatory Notices**

Nothing in this policy creates a contractual relationship between Bon Secours Memorial College of Nursing (BSMCON), a department owned and operated by the Bon Secours Southside Medical Center, and any party. BSMCON, in its sole discretion, reserves the right to amend, terminate or discontinue this policy at any time, with or without advance notice.

Non-retaliation: Students will not be subjected to adverse actions by any school officials as a result of initiating or participating in the investigation of a complaint.

Decision Standard: Decisions made in grievance cases are determined on a preponderance of the evidence. A preponderance of the evidence is evidence that as a whole shows that the fact sought to be proved is more probable than not.

**X. Version Control**

| Version | Effective Date | Next Review Date | Description                             | Supersedes, if applicable | Prepared By                              |
|---------|----------------|------------------|-----------------------------------------|---------------------------|------------------------------------------|
| 1.0     | 4/13/2020      | N/A              | Revisions and new template              | N/A                       | Dean of Student Services                 |
| 1.0     | 10/22/2020     | N/A              | Correct typographical error             | 1.0                       | Holly Pugh                               |
| 1.1     | 5/11/2022      | N/A              | Title Changes                           | 1.0                       | Dean of Student Affairs                  |
| 2.0     | 7/24/2024      | N/A              | Updated language to align with U.S. DOE | 1.1                       | Dean of Student Affairs                  |
| 2.1     | 12/6/2024      | N/A              | Corrected Accreditation Information     | 2.0                       | Director of Compliance & Risk Management |
| 3.0     | 5/15/2025      | 5/15/2028        | Process updates & Revisions             | 2.1                       | Dean of Student Affairs                  |

|   |           |           |                                               |     |                            |
|---|-----------|-----------|-----------------------------------------------|-----|----------------------------|
| 1 | 5/15/2025 | 5/15/2028 | Version changed –<br>BSMH Template<br>Adopted | 2.1 | Dean of<br>Student Affairs |
|---|-----------|-----------|-----------------------------------------------|-----|----------------------------|

This policy/procedure/guideline is not intended to establish a standard of clinical or non-clinical care or practice. Rather, this policy/procedure/guideline creates a general tool to help guide decision-making with the understanding that different action(s) may be necessary in response to the totality of the circumstances presented.

Sites revised 05/06/2025- Bon Secours Mercy Health adopts the above policy, procedure, policy & procedure, guideline, manual / reference guide / instructions, or principle / standard / guidance document for all Bon Secours Mercy Health entities including, but not limited to, facilities doing business as Mercy Health – St. Vincent Medical Center, St. Vincent – St. Charles Hospital, St. Vincent – St. Anne Hospital, Mercy Health – Perrysburg Medical Center, Mercy Health – Tiffin Hospital, Mercy Health – Willard Hospital, Mercy Health – Defiance Hospital, Mercy Health Allen Hospital LLC, Mercy Health - Lorain Hospital, Mercy Health St. Elizabeth Youngstown Hospital, Mercy Health St. Joseph Warren Hospital, Mercy Health - St. Elizabeth Boardman Hospital, Mercy Health - St. Rita's Medical Center, Mercy Health – Springfield Regional Medical Center, Mercy Health - Urbana Hospital, Mercy Health - Anderson Hospital, Mercy Health - Clermont Hospital, Mercy Health – Fairfield Hospital, Mercy Health - West Hospital, The Jewish Hospital – Mercy Health, Mercy Health – Kings Mills Hospital, LLC, Mercy Health - Lourdes Hospital LLC, Mercy Health – Marcum and Wallace Hospital, Chesapeake Hospital Corporation DBA Rappahannock General, Maryview Hospital, Bon Secours Richmond Community, Bon Secours Memorial Regional Medical Center, Bon Secours – St. Mary's Hospital, Bon Secours St. Francis Health System, Bon Secours St. Francis Medical Center, Bon Secours Mary Immaculate Hospital, Bon Secours - Southside Medical Center, Bon Secours Mercy Health Franklin, LLC, Southern Virginia Medical Center, and Bon Secours Harbour View Medical Center. This also may apply to Bon Secours Mercy Health Medical Group LLC and its medical group affiliates.