



CARF Survey Report for **Grafton School, Inc.**

CARF INTERNATIONAL

4891 East Grant Road
Tucson, AZ 85712 USA
Toll-free/TTY 888 281 6531 ■ Fax 520 318 1129
www.carf.org

CARF-CCAC

1730 Rhode Island Avenue, NW, Suite 209
Washington, DC 20036 USA
Toll-free 866 888 1122 ■ Fax 202 587 5009
www.carf.org/aging

CARF CANADA

10665 Jasper Avenue, Suite 1400A
Edmonton, Alberta T5J 3S9 Canada
Tel 780 429 2538 ■ Fax 780 426 7274
www.carfcanaada.ca

Organization

Grafton School, Inc.
120 Bellview Avenue
Winchester, VA 22601

Organizational Leadership

James G. Gaynor II, M.Ed., Chief Executive Officer

Survey Dates

January 3-4, 2008

Survey Team

Doris M. Lucas, M.S.W., LCSW, Administrative Surveyor

Debra A. Dickinson, Program Surveyor

Programs/Services Surveyed

Residential Treatment: Integrated DD/Mental Health (Children and Adolescents)

Residential Treatment: Mental Health (Children and Adolescents)

Previous Survey

March 24-25, 2005

Three-Year Accreditation

Survey Outcome

Three-Year Accreditation

Expiration: March 2011



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SURVEY SUMMARY

Grafton School, Inc., has strengths in many areas.

- The chief executive director and chief operating officer are highly skilled leaders. Staff members comment on the dedication and commitment of these two individuals in their efforts to seek excellence in treatment services for the population served. The expectation of these leaders is for Grafton School to be a national and international leader in providing treatment to high risk youths. Staff members further appreciate that these leaders listen to their ideas and involve them in planning and implementation of innovative treatment options.
- Referral sources express the high quality of services provided by Grafton School to the high risk population of youths served. Most youths placed at Grafton School have been unsuccessful in other placements.
- Grafton School is highly respected throughout the community, state, and surrounding states.
- Board members are very active and involved in the overall management of Grafton School.
- The organization utilizes a data-driven model for performance improvement where data are collected, analyzed, and utilized in all aspects of management and treatment services.
- The corporate office is welcoming, roomy, and attractive, providing very pleasant space for training and conferences.
- The inclusion of the treatment space in one area of the corporate office has aided the corporate staff in a greater understanding of its mission by daily observing the treatment process. Corporate staff members express appreciation for having these youths be a part of their physical working environment, giving greater meaning to their own commitment to the organization.
- Grafton School was one of eight organizations to be selected to host two days of a weeklong meeting of the International Institute for Disability Leaders (IIDL). This was an exchange program for chief executives from the United States, New Zealand, Australia, and England. Grafton School was selected due to its exemplary use of best practices.
- Grafton School staff members presented at the National Conference on Autism Spectrum Disorders in July 2007 on innovative methods to reduce/eliminate the use of physical restraints.
- The Berryville orientation manual for persons served has been developed with pictures and written words using Boardmaker® characters to illustrate the rights and privileges of persons served. It is easily understood and at a level most persons served can understand.
- The organization has developed online intake forms so that referral agencies can complete much of the necessary information. The information is then reviewed by the medical, nursing, and clinical staff prior to having the behavioral analysts travel to visit the potential youths and their families/guardians in their home location.
- Grafton School has a staff member whose responsibility is recruitment, retention, and monitoring of the needs of the residential service areas of the organization. This ensures adequate staffing at the residential site as well as monitoring and planning for interns. The organization utilizes “prn” nurses and other staff to meet the demands of residential treatment services.

- There has been a strong emphasis on staff retention, which has resulted in a drastic decrease over the last several months in direct service personnel turnover. This has been accomplished by implementing retention and referral bonuses and extensive on-the-job training and supervision.
- As employees develop more advanced job competencies, they are given the opportunity to mentor new employees, which provides support to the new employees and enhances the confidence of the mentor.
- The initial plans of care, 30-day updates, and comprehensive plans of care are well organized, easy to read, and complete. Treatment goals are assessment based and assist those served in moving toward greater independence. A multidisciplinary team monitors service delivery to ensure that progress is achieved.
- The mission and values of the organization clearly reflect a person-first environment and a conscious effort to remove barriers to inclusion. Persons are treated with dignity and respect, and their quality of life is truly the focus of the organization.
- The management and direct service staff demonstrate a real commitment to the mission of the organization. Their practice shows a genuine respect and compassion for the children and adolescents served. This creates a working environment where there is a well-developed sense of teamwork that clearly contributes to the quality of service provided.
- The Berryville program staff is dedicated to the success of each person served. Staff members clearly listen to the needs and wishes of each individual and family and make every attempt to customize the support provided to meet those needs. Persons served are thriving in the program, which speaks positively to the individualized approach.

In the following areas Grafton School demonstrates exemplary conformance to the standards.

- The organization is commended for its innovative performance-based job description that clearly breaks down the job functions, proficiencies, and competencies expected by employees. These proficiencies are used as measurements of achievement toward the three levels of the job ladder, and any promotions to another level are presented to the team members for mutual approval before another level is approved. The job ladder emphasizes an on-the-job training model, which is enhanced by the extensive training provided by the organization through online and in-house training.
- Grafton School is commended for the extensive training program it has developed for personnel. Initial and ongoing training is competency based with pre- and posttests. The organization has developed an in-house curriculum and has online training available. The organization is committed to providing its employees with sufficient skills and knowledge to meet the needs of the population served. This training has assisted in meeting one of the organization's primary goals of reducing seclusion and restraint, as staff members have the competencies to handle high risk behaviors. The addition of behavioral analysts on the treatment teams has provided staff with hands-on skills in behavior management.
- The Step It Up program rewards respectful behavior and has a positive impact on organizational trends. Since its initiation less than one year ago, there has been a decrease in the direct support staff turnover rate, a decrease in workers' compensation claims, and a significant reduction in the use of seclusion and restraint. Replicating this program could serve as a model for other organizations to improve service delivery and outcomes.

Grafton School received no recommendations from this accreditation survey. Suggestions given do not indicate nonconformance to standards but are offered as consultation for further quality improvement.

On balance, Grafton School provides an exceptional program for very troubled youths. CARF standards are met in all areas and exceeded in several areas. The organization is well organized and data driven. There is a strong team approach to treatment, and the on-grounds school enhances the progress and provides the structure needed by the persons served. The board, administration, and staff are highly committed to the mission and values of the organization, and skilled staff members are employed to provide services to a very high risk population of youths. Grafton School is commended for its excellence in service delivery and addressing challenges in innovative ways to meet the goals of the organization.

Grafton School, Inc., has earned a Three-Year Accreditation. The board, administration, and staff are congratulated on achieving this level of accreditation. It is very evident that the organization is committed to the CARF standards. The achievement of innovative and productive business practices and treatment methods provides this organization with high standards for the services it provides.

SECTION 1. BUSINESS PRACTICES

Criterion A. Input from Stakeholders

Principle Statement

CARF-accredited organizations continually focus on the expectations of the persons served and other stakeholders. The standards in Criterion A direct the organization's focus to soliciting, collecting, analyzing, and using input from all stakeholders to create services that meet or exceed the expectations of the persons served, the community, and other stakeholders.

Key Areas Addressed

- Ongoing collection of information from a variety of sources
 - Analysis and integration into business practices
 - Leadership response to information collected
-

Recommendations

There are no recommendations in this area.

Criterion B. Accessibility

Principle Statement

CARF-accredited organizations promote accessibility and the removal of barriers for the persons served and other stakeholders.

Key Areas Addressed

- Written accessibility plan(s)
 - Status report regarding removal of identified barriers
 - Requests for reasonable accommodations
-

Recommendations

There are no recommendations in this area.

Criterion C. Information Management and Performance Improvement

Principle Statement

CARF-accredited organizations are committed to continually improving their organizations and service delivery to the persons served. Data are collected and information is used to manage and improve service delivery. The dynamic nature of continuous improvement in a CARF-accredited organization sets it apart from other organizations providing similar services. CARF-accredited organizations share and provide the persons served and other interested stakeholders with ongoing information about their actual performance as a business entity and their ability to achieve optimal outcomes for the persons served through their programs and services.

Key Areas Addressed

- Information collected, analyzed, and used to address critical customer needs
 - Accurate and consistent information collection
 - Proactive performance improvement
 - Performance information shared with all stakeholders
 - Written technology and system plan
-

Recommendations

There are no recommendations in this area.

Consultation

- The organization is encouraged to evaluate additional methods by which it could increase the feedback from persons served who have completed treatment. Currently, the organization follows up with the persons served at six months, and there is a limited response rate.
-

Criterion D. Rights of Persons Served

Principle Statement

CARF-accredited organizations protect and promote the rights of the persons served. This commitment guides the delivery of services and ongoing interactions with the persons served.

Key Areas Addressed

- Meaningful communication of rights
 - Commitment to diversity
 - Policies promote rights of persons served
 - Complaint, grievance, and appeals policy
 - Annual review of complaints
-

Recommendations

There are no recommendations in this area.

Consultation

- It is suggested that the organization evaluate the reading level of the parent-student handbook to see if it is at approximately the fourth grade reading level.
-

Criterion E. Health and Safety

Principle Statement

CARF-accredited organizations maintain accessible, healthy, safe, and clean environments through both external and internal safety reviews and personnel commitment to this philosophy.

Key Areas Addressed

- One annual external inspection
- Self-inspections twice a year
- Emergency procedures, including evacuation, tested/analyzed annually

- Access to emergency first-aid resources
 - Competency of personnel in safety procedures
 - Defined system for reporting/reviewing critical incidents
 - Infection control plan
 - Transportation requirements, if applicable
-

Recommendations

There are no recommendations in this area.

Consultation

- The organization is encouraged to be more specific in identifying communicable diseases and biohazardous accidents as reportable incidents.
-

Criterion F. Human Resources

Principle Statement

CARF-accredited organizations demonstrate that they value their human resources. It should be evident that personnel are involved and engaged in the success of the organization and the persons they serve.

Key Areas Addressed

- Adequate staffing
 - Verification of background/credentials
 - Recruitment/retention efforts
 - Personnel skills/characteristics
 - Annual review of job description/performance
 - Policies regarding students/volunteers, if applicable
-

Recommendations

There are no recommendations in this area.

Exemplary Conformance

F.5.a.

F.5.b.

The organization has developed an innovative performance-based job description that clearly identifies the job functions, proficiencies, and competencies expected from employees. These proficiencies are established for 3-, 6-, 12-, 18-, and 24-month reviews and are used as measures of achievement toward the three levels of the job ladder. Any promotions to another level are presented to the rest of the team for approval before another level is approved. When a staff member achieves the next level, he or she is also financially rewarded. The job ladder emphasizes the on-the-job training model, which is enhanced by the extensive training provided by the organization through online and in-house training.

F.11.a. through F.11.f.

Grafton School is commended for its extensive employee training program. The initial and ongoing training is competency based with pre- and posttests. The organization has developed an in-house curriculum (Grafton Learning Management Center) as well as has available online training that exceeds CARF standards. The organization is committed to providing its staff with sufficient skills and knowledge to meet the needs of the population served. This training has assisted in meeting one of the organization's primary goals of reducing seclusion and restraint, as staff members have the competencies to handle high risk behaviors. The addition of behavioral analysts on the treatment teams has also provided staff with hands-on skills in behavior management.

Criterion G. Leadership

Principle Statement

CARF-accredited organizations identify leadership that embraces the values of accountability and responsibility to the individual organization's stated mission. The leadership demonstrates corporate social responsibility.

Key Areas Addressed

- Leadership structure
 - Leadership guidance
 - Commitment to diversity
 - Corporate responsibility
 - Corporate compliance
-

Recommendations

There are no recommendations in this area.

Criterion H. Legal Requirements

Principle Statement

CARF-accredited organizations comply with all the legal and regulatory requirements of federal, state, provincial, county, and city entities.

Key Areas Addressed

- Compliance with all legal/regulatory requirements
-

Recommendations

There are no recommendations in this area.

Criterion I. Financial Planning and Management

Principle Statement

CARF-accredited organizations strive to be financially responsible and solvent, conducting fiscal management in a manner that supports their mission, values, and annual performance objectives. Fiscal practices adhere to established accounting principles and business practices. Fiscal management covers daily operational cost management and incorporates plans for long-term solvency.

Key Areas Addressed

- Budget(s) prepared, shared, and reflective of strategic planning
- Financial results reported/compared to budgeted performance
- Organization review
- Fiscal policies and procedures
- Annual review of service billing records, if applicable
- Review of fee structure, if applicable
- Annual outside review/audit, if applicable

- Written risk management plan
 - Adequate insurance coverage
 - Policies regarding safeguarding funds of persons served, if applicable
-

Recommendations

There are no recommendations in this area.

SECTION 2. GENERAL PROGRAM STANDARDS

Principle Statement

For an organization to achieve quality services, the persons served are active participants in the planning, prioritization, implementation, and ongoing evaluation of the services offered. A commitment to quality and the involvement of the persons served span the entire time that the persons served are involved with the organization. The service planning process is individualized, establishing goals and objectives that incorporate the unique strengths, needs, abilities, and preferences of the persons served. The persons served have the opportunity to transition easily through a system of care.

A. Program Structure and Staffing

Principle Statement

A fundamental responsibility of the organization is to provide a comprehensive program structure. The staffing is designed to maximize opportunities for the persons served to obtain and participate in the services provided.

Key Areas Addressed

- Written program plan
- Crisis intervention provided
- Medical consultation
- Services relevant to diversity
- Assistance with advocacy and support groups
- Team composition/duties

- Relevant education
 - Clinical supervision
 - Family participation encouraged
-

Recommendations

There are no recommendations in this area.

Exemplary Conformance

A.3.a. through A.3.e.

Grafton School has created an exemplary program, Step It Up, which is not only responsible for rewarding respectful behavior, but also has a positive impact on organizational trends. Since its initiation less than one year ago, there has been a decrease in the direct support staff turnover rate, a decrease in workers' compensation claims, and a significant reduction in the use of seclusion and restraint. Replicating this program could serve as a model for other organizations to improve service delivery and outcomes.

B. Screening and Access to Services

Principle Statement

The process of screening and assessment is designed to maximize opportunities for the persons served to gain access to the organization's programs and services. Each person served is actively involved in, and has a significant role in, the assessment process. Assessments are conducted in a manner that identifies the strengths, needs, abilities, and preferences of each person served. Assessment data may be gathered through various means including face-to-face contact, telepsychiatry, or from external resources.

Key Areas Addressed

- Screening process described in policies and procedures
- Ineligibility for services
- Admission criteria
- Orientation information provided regarding rights, grievances, services, fees, etc.

- Waiting list
 - Primary and ongoing assessments
 - Reassessments
-

Recommendations

There are no recommendations in this area.

C. Individual Plan

Principle Statement

Each person served is actively involved in and has a significant role in the individual planning process and has a major role in determining the direction of his or her individual plan. The individual plan contains goals and objectives that incorporate the unique strengths, needs, abilities, and preferences of the person served, as well as identified challenges and problems. Planning is consumer directed and person centered.

Key Areas Addressed

- Development of individual plan
 - Co-occurring disabilities/disorders
 - Individual plan goals and objectives
 - Designated person coordinates services
-

Recommendations

There are no recommendations in this area.

D. Transition/Recovery Support Services

Principle Statement

In transition or discharge planning, the organization assists the persons served to obtain services that are needed but that are not available within the organization or in transitioning from one level of care to another within the organization. The transition process is planned with the active participation of each person served. Transition may include planned discharge, placement on inactive status, movement to a different level of service or intensity of contact, or a re-entry program in a criminal justice system. Transition services are critical for the support of the individual's ongoing recovery or well-being.

The discharge plan is a clinical document that includes information about the person's progress in recovery, describes the completion of goals, services, and reasons for discharge. This document is prepared when the person leaves services for any reason (against medical advice, no show, infringement of program rules, etc.).

Just as the assessment is critical to the success of treatment, the transition services are critical for the support of the individual's ongoing recovery or well-being. The organization proactively attempts to contact the persons served after formal transition or discharge to gather needed information related to their postdischarge status. Discharge information is reviewed to determine the effectiveness of its services and whether additional services are needed.

The transition plan and/or discharge summary may be included in a combined document as long as it is clear whether the information relates to the transition or discharge planning.

Key Areas Addressed

- Referral or transition to other services
 - Active participation of persons served
 - Transition planning at earliest point
 - Unplanned discharge referrals
 - Plan addresses strengths, needs, abilities, preferences
 - Follow up for persons discharged for aggressiveness
-

Recommendations

There are no recommendations in this area.

E. Pharmacotherapy

Principle Statement

Pharmacotherapy is the practice of evaluating, prescribing, dispensing, and/or administering medications to persons served in response to specific symptoms, behaviors, and conditions for which the use of medications is indicated and efficacious. Pharmacotherapy may be provided by personnel of the organization or under contract with a licensed individual. Medication use is directed toward maximizing the functioning of the persons served while reducing their specific symptoms and minimizing the impact of side effects.

Pharmacotherapy includes all prescribed medications, whereas medication monitoring includes prescribed medications and over-the-counter medications.

Key Areas Addressed

- Individual records of medication
 - Physician review
 - Policies and procedures for prescribing, dispensing, and administering medications
 - Training regarding medications
 - Policies and procedures for safe handling of medication
-

Recommendations

There are no recommendations in this area.

F. Seclusion and Restraint

Principle Statement

Programs strive to avoid the use of seclusion and restraint, and only resort to using either intervention as a last recourse to de-escalate aggressive or life-threatening behavior toward self or others. Seclusion refers to restriction of the person served to a segregated room with the person's freedom to leave physically restricted. Voluntary time-out is not considered seclusion, even though the voluntary time out may occur in response to verbal direction; the person served is considered in seclusion if freedom to leave the segregated room is denied.

Restraint is the use of physical, mechanical, or other means to temporarily subdue an individual or otherwise limit a person's freedom of movement. It is used when there is an immediate risk of harm to self or others, and it is determined as the only means to de-escalate the threatening behavior. Briefly holding a person served, without undue force, for the purpose of comforting him or her or to prevent self-injurious behavior, or holding a person's hand or arm to safely escort him or her from one area to another, is not a restraint. Emergency intervention procedures are limited to the use of physical holds.

Seclusion or restraint by trained and competent personnel is used only when other less restrictive measures have been found to be ineffective to protect the person served or others from injury or serious harm. Peer restraint is not considered an acceptable alternative to restraint by personnel. Seclusion or restraint is not used as a means of coercion, discipline, convenience, or retaliation.

In a correctional setting, the use of seclusion or restraint for purposes that are not in response to the behavioral health needs of the person served are not considered seclusion or restraint under these standards. Security doors designed to prevent accidental elopement or wandering are not considered seclusion or restraint. Security measures, such as the use of handcuffs, instituted by law enforcement personnel who are not personnel of the organization being surveyed, are not subjected to these standards.

Key Areas Addressed

- Emergency intervention procedures
 - Patterns of use reviewed
 - Policies and procedures for use of seclusion and restraint
 - Persons trained in use
 - Designated room
-

Recommendations

There are no recommendations in this area.

G. Records of the Persons Served

Principle Statement

A complete and accurate record is developed to ensure that all appropriate individuals have access to relevant clinical and other information regarding each person served.

Key Areas Addressed

- Confidentiality
 - Time frames for entries to records
 - Individual record requirements
 - Duplicate records
-

Recommendations

There are no recommendations in this area.

H. Quality Records Review

Principle Statement

The organization has systems and procedures that provide for the ongoing monitoring of the quality, appropriateness, and utilization of the services provided. This is largely accomplished through a systematic review of the records of the persons served. The review assists the organization in improving the quality of services provided to each person served.

Key Areas Addressed

- Quarterly professional review
 - Review current and closed records
 - Items addressed in quarterly review
 - Use of information to improve quality of services
-

Recommendations

There are no recommendations in this area.

MENTAL HEALTH

Core programs in this field category are designed to provide services for persons with or who are at risk for psychiatric disabilities/disorders or have other mental health needs. These programs encompass a wide variety of therapeutic settings and intervention modalities. Core programs in this field category may also provide services to persons with co-occurring disabilities/disorders, such as mental illness and a developmental disability.

SECTION 3. BEHAVIORAL HEALTH CORE PROGRAM STANDARDS

Principle Statement

The standards in this section address the unique characteristics of each type of core program area. Behavioral health programs are organized and designed to provide services for persons who have or who are at risk of having psychiatric disorders, harmful involvement with alcohol or other drugs, or other addictions or who have other behavioral health needs. Through a team approach, and with the active and ongoing participation of the persons served, the overall goal of each program is to improve the quality of life and the functional abilities of the persons served. Each program selected for accreditation demonstrates cultural competency and relevance. Family members and significant others are involved in the programs of the persons served as appropriate and to the extent possible.

T. Residential Treatment

Principle Statement

Residential treatment programs are organized and staffed to provide both general and specialized nonhospital-based interdisciplinary services 24 hours a day, 7 days a week for persons with behavioral health disabilities or co-occurring disabilities, including intellectual or developmental

disability; victims or perpetrators of domestic violence or other abuse; or persons needing treatment because of eating or sexual disorders or drug, gambling, or Internet addictions. Residential treatment services are organized to provide environments in which the persons reside and receive services from personnel who are trained in the delivery of services for persons with behavioral health disorders or related problems. Residential treatment may be provided in freestanding, nonhospital-based facilities or in clearly identified units of larger entities, such as a wing of a hospital. Residential treatment programs may include domestic violence treatment homes, nonhospital addiction treatment centers, intermediate care facilities, psychiatric treatment centers, or other nonmedical settings.

Recommendations

There are no recommendations in this area.

Consultation

- Although all the residential areas are well maintained, safe, and secure and offer personal space for the persons served, there may be benefit in looking at lighting and décor. Softer lighting and alternative wall color may enhance the progress of the persons served.
-

INTEGRATED DD/MENTAL HEALTH

Core programs in this field category are designed to provide services to persons whose primary diagnoses are intellectual or other developmental disabilities and who are at risk for or exhibiting behavioral disorders or have identified mental health needs. These programs encompass many therapeutic settings and intervention modalities and a commitment to community integration.

SECTION 3. BEHAVIORAL HEALTH CORE PROGRAM STANDARDS

Principle Statement

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Recommendations

There are no recommendations in this area.

Consultation

- Although all the residential areas are well maintained, safe, and secure and offer personal space for the persons served, there may be benefit in looking at lighting and décor. Softer lighting and alternative wall color may enhance the progress of the persons served.
-

SECTION 4. BEHAVIORAL HEALTH SPECIFIC POPULATION DESIGNATION STANDARDS

A. Children and Adolescents

Residential Treatment: Integrated DD/Mental Health
Residential Treatment: Mental Health

Principle Statement

Programs for children and adolescents consist of an array of behavioral health services designed specifically to address the treatment needs of children and adolescents. Such programs tailor their services to the particular needs and preferences of children and adolescents and are provided in a setting that is both relevant to and comfortable for this population.

Recommendations

There are no recommendations in this area.

PROGRAMS/SERVICES BY LOCATION

Grafton School, Inc.

120 Bellview Avenue
Winchester, VA 22601

Administrative Location Only

Grafton - Berryville Residential Treatment Center

180 Grafton Lane
Berryville, VA 22611

Residential Treatment: Integrated DD/Mental Health (Children and Adolescents)
Residential Treatment: Mental Health (Children and Adolescents)