

REACHING



FOR THE
FUTURE



ANNUAL REPORT 2016



CARING COMPETENT EFFECTIVE

Caring, competent and effective are three words that come to mind when I think of Grafton. Grafton Staff have embraced Tony's* strengths by promoting his ability to perform functional vocational tasks, increasing his ability to use words or express his wants/needs and increasing his ability to follow familiar multi-step directions. They allow him to experience hands-on opportunities which he greatly enjoys. Tony's severe behaviors have decreased significantly. I know that he is safe, cared for, and valued as a client.

***Vickie Dotson, School Social Worker,
Bristol County Public Schools***

**Client's name has been changed to protect his privacy.*





FY2016 was an extraordinary year for our organization. We achieved strong financial performance, implemented key strategic initiatives, introduced new programs and services, and laid a solid foundation for our future in value based services and outcomes.

Ukeru Systems, a division of Grafton, launched a new website to introduce and teach award winning best practices to behavioral healthcare providers, schools and other organizations committed to “Life without Restraint”. In addition to the expansion of training and consultation services, we increased visibility and presence of leadership nationally and expanded the delivery of Applied Behavior Analysis services. Grafton is a critical component in the continuum of care. We have achieved a solid position as an expert in behavioral healthcare and my hope is that we will continue to develop this expertise locally, nationally, and internationally.

In this report, we will share other key highlights and results over the past year. You will also hear success stories from three of our service divisions: Early Intervention (Alishba’s story), Psychiatric Residential Treatment (Charlie’s story), and Community Based Group Homes (Joshua’s story). It was heartwarming to hear parents share their perspectives on their child’s progress as parental engagement is a critical component to wellness and recovery.

The future is bright for Grafton. With a plethora of changes in the behavioral healthcare landscape, we pledge to be nimble, flexible, and give our best each and every day, adapting as we must to continue to succeed.

In closing, I would like to thank all Grafton employees for their contribution, compassion and commitment to our clients. I would also like to thank our clients, families, and customers for their confidence in our organization, programs and people.

James Stewart
President and CEO



Janice L. LeBel, Ph.D
Board of Directors Chairman



THE TEAM





Executive Team

James Stewart, *CEO and President*
Kent Houchins, *Chief Administrative Officer*
Kim Sanders, *President, Ukeru Systems*
Scott Zeiter, *Chief Operating Officer*

Board of Directors

Janice L LeBel, *Ph.D., Chair, Director of System Transformation,
Massachusetts Department of Mental Health*
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Partlow Insurance Company, Inc.*
Marc Jaccard, *Executive Director, Evans Home*
Dennis Morrison, *Ph.D, Chief Clinical Officer,
Netsmart Technologies*
Susan Jones, *Retired Registered Nurse*
Harry Smith, *Market President, United Bank*

Treatment Services

Grafton believes in utilizing a holistic approach to treatment. At the center of this approach is the individual. All aspects (emotional, physical, spiritual, psychological and social) are evaluated and embraced. Since an individual's challenges and symptoms are multidimensional the treatment services provided need to be too.

19,625

Psychotherapy Services Delivered

- Individual therapy
- Family therapy
- Group therapy sessions

49,331

Clinical and Medical Intervention Services Delivered

- Applied Behavior Analysis
- Early intervention
- Music therapy
- Intensive behavior training
- Psychological assessments
- Psychiatric evaluations
- Physicals
- Medication reviews

23,051

Allied Services Delivered

- Occupational therapy
- Speech therapy sessions



THE
WORK

Services

165
clients served

Psychiatric Residential Treatment

Grafton provides a secure trauma informed residential treatment service for individuals between the ages of six and 21. We also offer a short term stabilization program for children and adolescents. In addition to individual, group and family therapy, clients also explore issues and challenges through the provision of music instruction and art therapy.

444
clients served

Community Based Supports

Services are provided for children and adults with autism and other developmental challenges. Trauma informed programming provides numerous opportunities for clients to learn, grow and increase functional autonomy and build connections within their local communities.

99
clients served

Private Day School

We provide comprehensive structured and customized education services for individuals ages six to 22 and embrace a research-based approach to instruction. Our best practices include informal and formal assessments, curriculum alignment, mapping, and data analysis. The integration of special education and behavioral health enhances opportunities for students to recognize their strengths and use them to achieve success in learning across diverse subjects and environments.

594
clients served

Early Intervention

Services are provided for children ages birth to three to increase developmental, social and educational gains for the child and improve functioning of the family. A parent coaching model is utilized to help families reinforce strategies and develop skills used by clinicians to assess developmental delays, gains and milestones.

217
clients served

ABA

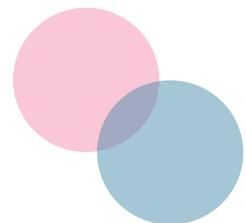
Grafton employs a trauma informed approach to the delivery of Applied Behavior Analysis (ABA) services. ABA supports individuals in a variety of settings to teach skills and reduce challenging behaviors that interfere with success. With the use of quantitative methods for therapeutic treatment goal mastery, we are able to illustrate the value of ABA services for supporting individuals with autism.





Key Highlights and Results

- By July we were providing ABA services in our new Strasburg, Virginia location, bringing much-needed services closer to many of our clients who had been travelling to Winchester. **July 2015**
- Ukeru Systems launched a new website www.ukerusystems.com and developed collateral materials to support the training and consultation brand of “Life Without Restraint”. **August 2015**
- Grafton Board of Directors selected new CEO, Jamie Stewart, to lead the organization. **October 2015**
- Grafton hosted its second annual symposium “Early Intervention: First Steps in Promoting Positive Mental Health.” **November 2015**
- Amanda Markovich, Grafton employee, wins the 2016 ARC of Northern Shenandoah Valley Direct Support Professional of the Year. **March 2016**
- In partnership with Malloy Ford, Grafton hosted its first Drive 4 Kids fundraiser to support assistive technology for clients served in the Winchester campus. **May 2016**
- Grafton obtained a DBHDS grant for the implementation of community integration programming for adult clients. **May 2016**
- A paper entitled “Behavior Enrichment and Teaching Home Program: A Common Sense Approach to Increase Independence in Adults Living in Group Homes” was drafted and is in the process of being submitted for publication. **June 2016**
- Grafton Matters blog posts that highlighted programs, services and evidence based best practices received more than 15,000 unique page views.
- Through the use of quantitative methods for therapeutic goal mastery, Grafton illustrated the value of its Applied Behavioral Analysis services for supporting children on the Autism Spectrum.
- Grafton staff provided public education, advocacy and autism awareness training to numerous groups including first responders, parents and physicians in local communities.





DCBHS

Dominion Center for Behavioral Health Services (DCBHS) is one of the largest multidisciplinary mental health practices in Loudoun County. DCBHS provides the highest quality psychiatric, psychological and counseling services for individuals in Northern Virginia.

Therapy

Therapy is offered in different forms: individual, couples, family and groups. Services are provided by Psychologists, Social Workers and Counselors. In some cases interns and residents provide the services under the supervision of a licensed provider.

Medication Management

All psychiatrists and nurse practitioners (NPs) at DCBHS are trained in diagnostic evaluation and in psychotherapy. As part of their evaluation of the patient, psychiatrists and NPs may prescribe psychiatric medication, conduct physical examinations, and order laboratory tests.

The first consultation is 60 minutes, focused on obtaining a comprehensive picture of the client's concerns as well as information about the client's past psychiatric and medical history, habits, routines

and areas of strength and weakness. Diagnosis and treatment options will then be discussed as well as ways to best implement the treatment plan.

Psychological Testing

Licensed Clinical Psychologists will provide comprehensive psychological testing and evaluations for individuals of all ages to help determine the strengths and challenges they might be facing with regard to cognitive and intellectual ability. Results of testing will help establish how best an individual learns by comparing auditory and visual processing skills and by assessing mental focus, concentration, distractibility, processing speed, executive functioning, visual-motor integration skills, and overall psychological functioning.



DCBHS

Neuropsychological Testing

Neuropsychological testing provides diagnostic clarification and grading of clinical severity for patients with subtle or obvious cognitive disorders and can benefit those with:

- Head injuries ranging from mild concussions to severe TBIs
- Parkinson's Disease, Alzheimer's Disease, MS, and other neurological diseases
- Exposure to chemicals or toxins or those who have experienced anoxic episodes
- Histories of alcohol and/or substance use
- Strokes or related incidents
- Histories significant for eating disorders such as anorexia nervosa and bulimia
- Dementia or those experiencing suspected age-related memory loss

Parent Coaching

Just like a sports coach would do, a parenting coach offers you personalized expertise in this very important area of life by helping to fine-tune existing skills, develop strengths, identify weaknesses and, holding one accountable to goals.

Bariatric Surgery Evaluations

Licensed Clinical Psychologists will provide comprehensive Behavioral-Medical Testing and evaluations to help assess competency, preparedness, and emotional stability prior to medical procedures such as bariatric, gastric bypass, and Lap-B surgery. This can provide individuals with an understanding of pertinent mental health considerations as medical surgery is prepared, including diagnoses, medication recommendations, and suggestions for counseling.

Last year, DCBHS supported
1,725 clients

www.dc4bhs.com



OUTCOMES. REALIZED.

Accomplishments

- Developed and released a mobile app for parents of children with Autism Spectrum Disorder (ASD) in only 3.5 months (between May and August 2016).
 - For improved engagement & empowerment of families.
- Currently developing enhanced content for the ASD mobile app as well as a software application for Providers to facilitate shared decision making and progress tracking between parents of children with ASD and providers.
- Currently recruiting parents for a user feedback pilot of the ASD mobile app.
- Mobile app for nationwide sale scheduled for release in February 2016.

“Value Based Contracting: How Achievement of Clinical Goals Can Lead to Fiscal Success” was presented by ProEventa and Grafton staff at the fall Mental Health Corporations of America conference in New Orleans. Here is a summary of the presentation:

With the use of rigorous quantitative methods for therapeutic goal mastery, Grafton was able to illustrate the value of its Applied Behavioral Analysis (ABA) services for treating children on the Autism

Spectrum. Specifically, Grafton used these methods to provide the person-centered, necessary services at the right time to clients; thereby demonstrating that for each calendar day of service provided, Grafton ABA services delivered an average of six calendar days of functional improvement in clients across five key areas: physical, adaptive, social-emotional, communication, and cognitive development. What is particularly impressive about these findings is that Grafton’s clients were between 12-24 months lower, on average, in developmental age across the five functional areas than children who were included in published studies on the effectiveness of ABA services. Furthermore, Grafton evidenced these positive client outcomes while reducing the service hours to less than 6 hours a week over the course of two years of treatment, on average, compared to 12-38 hours a week as is recommended by the evidence-based literature. Grafton has applied for a process patent for these rigorous quantitative procedures and created software featuring these processes, which it offers as technological and clinical best practices to the healthcare market through its wholly-owned subsidiary, ProEventa, Inc.



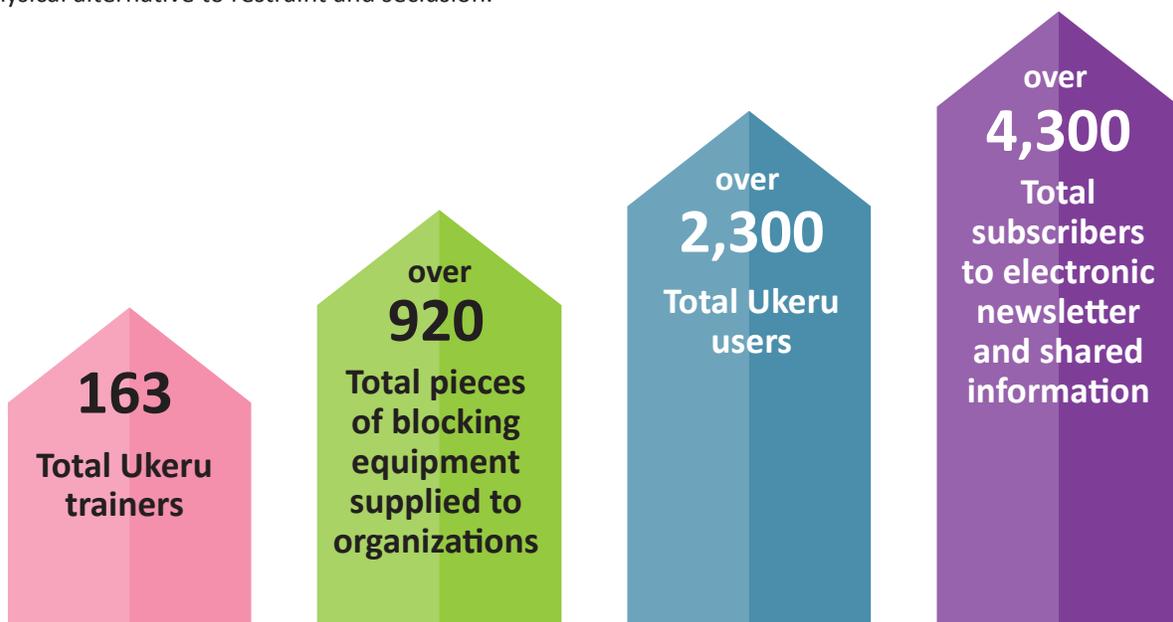
Ukeru Systems was born from both necessity and vision. A decade ago, Grafton’s CEO issued a mandate to eliminate restraints without compromising employee or client safety. Since then, the organization has reduced the use of restraints by more than 99 percent and has significantly increased the rate of treatment goals mastered across the organization. It also greatly reduced the number of injuries to both clients and staff while simultaneously lowering costs associated with workers’ compensation policies and employee turnover. In so doing, it saved an estimated \$15 million over ten years.

In 2015, based on its own experience and success, Grafton launched Ukeru Systems, a safe, comforting and restraint-free crisis management program developed by and for behavioral health professionals and paraprofessionals, educators and parents. Today, Ukeru leadership travels the country, training others on these techniques. Training has been provided to public schools, private schools, psychiatric hospitals, developmental centers and foster care agencies. To date, Ukeru leaders are working with organizations within the following states: Alabama, Alaska, California, Ohio, Virginia and West Virginia.

Leading the Way

In less than six months, Ukeru Systems has been leading the way to ensure that organizations across the United States have been shifting their paradigm from control to comfort in supporting individuals.

Ukeru Systems has created the first crisis training program to offer a physical alternative to restraint and seclusion.



TRANSFORMING LIVES

The staff at Grafton were willing to get to know Bobby and figure out unique approaches that best suited his behaviors. They got to the root of the problem and cause of these difficult behaviors and helped him learn how to manage difficult, unwanted behaviors and thoughts. They helped Bobby understand that while he is responsible for his behaviors, he is not destined to BE his behaviors. They were always willing to support us as a family and listen to us and our experiences with Bobby in order to come up with strategies to help him. It was a true team effort that resulted in not just the transformation of Bobby but the transformation of our family.

Chris Liss, Parent



Alishba's Story

Alishba is a beautiful 2 ½ year old girl of Pakistani descent who was referred to the Infant and Toddler Connection (ITC) of Shenandoah Valley by the NICU at Winchester Medical Center due to a diagnosis of partial trisomy 13 and other multiple congenital abnormalities. Partial trisomy 13 is a genetic disorder in which a person has a part of an extra chromosome 13 in the cells. The genetic disorder is rare and occurs in only about 1 out of every 10,000 newborns. Although Alishba was born full term, she was transferred to the NICU for feeding issues and hypothermia. Due to a number of medical challenges, Alishba was followed at the University of Virginia Hospital by specialists from urology, ophthalmology, genetics, and neurosurgery as well as developmental specialists. At 12 months of age, Alishba had to undergo surgery to correct her craniosynostosis. Craniosynostosis is a birth defect in which one or more of the fibrous joints between the bones of the baby's skulls (crania sutures) close prematurely before the baby's brain is fully formed. With this condition, although brain growth continues, the head takes on a misshapen appearance.

Alishba has a strong and loving family support network. In addition to her parents and her two siblings, she has grandparents who live close by and as a result, help care for Alishba. Alishba was first seen by the Infant & Toddler Connection (ITC) program at two months of age. She currently receives Occupational Therapy and Physical Therapy once a week and Speech Therapy once a month. Using a parent coaching model, therapies are focused on helping Alishba progress and reach developmental milestones. Alishba's mom, Shereen, expressed that the ITC program has been a great source of strength and support for not only Alishba, but for the entire family. "The program is dependable, responsible and supportive to our needs and staff is not only concerned about how Alishba is doing, but how we as a family are doing as well. I really appreciate that", shared Shereen. Shereen describes feeling overwhelmed and stressed when she first learned of Alishba's initial diagnosis



and prognosis. "She had so many different specialists monitoring her development. Now, it is hard to believe that she is holding on to objects, standing up and even going up and down stairs on her own." Alishba continues to struggle with feeding issues and is fed via a G-tube. This will continue to be monitored by her physician and ITC team members.

Alishba loves music and will move her body rhythmically to music. She loves to play with her older brother's toys and enjoys the company of other people. When around other people, she will crawl towards them to initiate play and contact. Shareen expressed that a variety of adaptive equipment has been provided to them to assist with improving

fine and gross motor skills. Currently, the family uses a stander and the use of orthotics for additional standing support. The Physical Therapist is currently working on increasing cruising or walking steps by moving toys just out of reach to encourage Alishba to take increased steps towards what she wants. Alishba is able to communicate her needs through crying or grunting to let her loved ones know she needs something. She plays "peek a boo" and "pat a cake" with her siblings and has been encouraged by the Physical Therapist to make eye contact when interacting with family

members. Her Occupational Therapist is working with the family on increasing Alishba's meals to six meals a day. Alishba really enjoys her meals and clinicians are working on helping the family support an increase in nutritional and fluid intake. Future goals identified by her team include saying "Mama" and "Baba" to get her parents' attention and using signs for words like more, eat, play, drink and done. Her family is pleased with Alishba's progress and maintains that she is doing things that they did not dream that she would be able to do. "My husband is a strong supporter of his daughter", shares Shareen. He constantly says, "She will be able to do what we ask and she is making tremendous progress. We couldn't be happier and we are incredibly grateful to the entire ITC team."

Charlie's Story*

Charlie is a 13 year old boy who arrived at Grafton's psychiatric residential treatment facility in August 2016. Charlie has a history of suicidal ideation, telling falsehoods, bullying others, being bullied by others and demonstrating a lack of empathy. In November 2015, he was hospitalized at INOVA due to an attempted overdose. This was his first suicide attempt. Following stabilization at INOVA, Charlie was sent to a psychiatric residential treatment facility for one week. He had two more acute hospitalizations in April 2016. In July 2016, Charlie was admitted to another hospital due to suicidal ideation with a detailed plan to hang himself with a karate belt.

Charlie is a sociable and bright young man. He demonstrates positive communication skills and is engaging with others. In addition, he has a good sense of humor and is quite insightful regarding his behaviors and actions.

When Charlie arrived at Grafton, although he denied suicidal ideation, he was still having thoughts of self harm. According to his therapist, he had strained relationships with his brother and his father.

According to his mother, Jody, Charlie had a difficult time trusting adults when he started the program at Grafton. "It was difficult to send him to a residential treatment facility, but we knew that he needed additional supports that we could not provide to him", shared Jody. Jody described that there were many factors that contributed to Charlie's success. "He had staff that cared about him and really listened. His therapist Debbie took the time to develop a trusting relationship with Charlie and served as a true advocate for his needs. Staff that worked with Charlie were a true gift and the consistency and structure provided within the treatment center created an environment for him to be successful."

During his residential stay, Charlie worked on strategies to demonstrate that he was feeling better about himself and positive options available to him. Charlie stated that he felt taking time in therapy sessions to reflect on his behaviors was beneficial to his treatment and progress. He described therapy as a place that pushed him to discuss challenging issues and at the same time respected his thoughts, feelings and anxieties without overwhelming him. Charlie also worked very hard in family therapy to openly

discuss issues that would make his world better. This was clearly seen when on a home visit he and his mom redecorated his room to remove the darkening shades and put color back in the room (and his life). Previously, his room had been a place that was dark and a place where he isolated himself to engage in self-destructive behaviors. He said didn't want to return to that environment because he thought if he did, it could lead to similar self harm actions in the future.

Charlie currently is having no thoughts of hurting himself and is

able to identify activities that help him feel better and identifies environmental and situational factors that will help him succeed. In the middle of December, Charlie will be moving back home and enrolling in public school. Charlie has a wonderful family support system and parents that recognize the importance of recreating structure and consistency within the home environment. They are excited and a bit anxious about his return home, but acknowledge that Charlie has many, many strengths in his favor to make this transition a successful one. Charlie expressed that he is interested in becoming a youth counselor when he grows up to help other kids who may have experienced similar challenges.

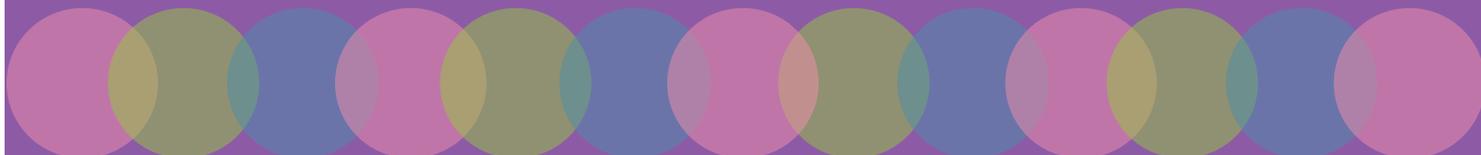
**Client's name has been changed to protect his privacy.*

Committed,
consistent and
invested are
words that the
family used
to describe
Grafton.

SUPPORT PATIENCE EXPERTISE

Grafton staff are thorough, caring and consistent in meeting the needs of my child. They have been efficient at addressing every need for my child whether it is related to academic performance or a behavioral issue. Staff work to come up with adaptations and solutions to ensure that my child is successful. I feel comforted knowing that staff truly care about my child and it is due to their support, patience and expertise that my child is now making progress.

Corry Miller, Parent



Joshua's Story*

Joshua is a charming 18 year old young man who is served at Grafton's Winchester campus. Joshua was referred to Grafton due to significant and frequent aggressive, self-injurious and disruptive behaviors that had resulted in multiple out of home placements. He had been in and out of Sheppard Pratt Hospital and the Kennedy Krieger Institute prior to coming to Grafton. Joshua's aggression consisted of charging at and attempting to bite others. Prior to coming to Grafton, Joshua was supported by a 2:1 staff to client ratio. Joshua enrolled in Grafton's program in October 2014. At the time of admission, he presented a number of challenges including prevalent anxiety, an autism diagnosis and difficulty with mood regulation. Joshua was easily triggered into aggressive or self-injurious episodes if he became overly anxious or experienced other strong emotions.

Joshua presents with an abundance of strengths including a close relationship with his family. He is very sociable and wants to interact with and please others. He is able to use "self-talk" to redirect and manage his own challenging behaviors. His interests are widespread and he enjoys outdoor athletic activities including skiing, biking, riding his rip stick, swimming, going for walks, rock climbing, ice skating, hockey, jumping on a trampoline and gymnastics.

Joshua's mom Julie shares, "He had a fresh start at Grafton. From the moment he walked through the doors, Grafton staff treated him like he had no

issues. There was no protective gear worn by staff and staff was not defensive with him. I think that made a huge difference with him". Julie described that there were many components that attributed to Joshua's progress including a dedicated staff at school and at his group home, therapy sessions with Laura (Walls) and a consistent, structured routine with clear expectations. Joshua's therapist shared, "There was presumption of competence with Joshua. That he would and could make good

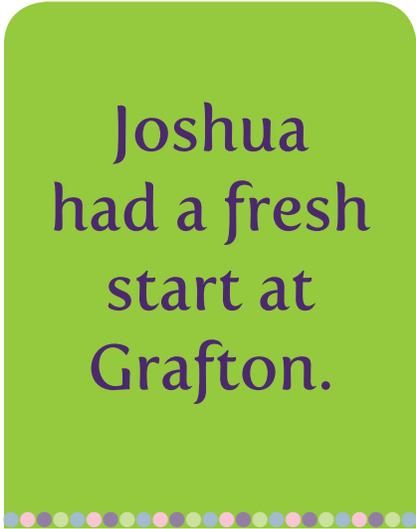
choices and when he became anxious, we taught him what he needed to do to manage his emotions." Laura adds, "Many times, clients can look scary on paper. We found as we got to know Joshua that, like most of us, he wanted to do well, please others and learn new skills to manage his anxiety and emotions. We just created a safe road map so he could do so."

On the 16th of December, Joshua successfully completed his program at Grafton and was discharged to Rock Terrace High School. Julie reported that he can

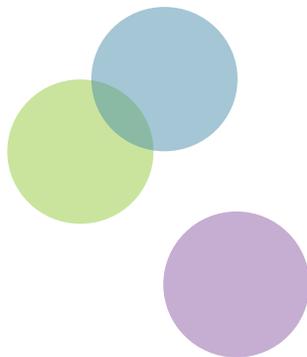
now regulate his anxiety, respond to triggers, and use deep breathing as well as other coping skills to manage his anxiety. More importantly, Joshua is able to communicate what is going on when he is feeling emotionally deregulated, overwhelmed or over stimulated. He accepts redirection and recognizes what he needs to do differently.

With his return home, his family is proud of all of his achievements and looks forward to those yet to come.

**Client's name has been changed to protect his privacy.*



Joshua
had a fresh
start at
Grafton.



DEVELOPING EXPERTISE





Partnerships

Current strategic partnerships exist between Grafton and the following organizations:

AdvancED
Agile Edge Technologies
AudioEye
Berryville Farmer's Market
Chamber of Commerce
Commission on Accreditation of Rehabilitation
Facilities (CARF)
Infant & Toddler Connection of Shenandoah Valley
(Early Intervention Grant)
JASON Learning
La Frontera Center
Lord Fairfax Community College
Loudoun County Public Schools
Mental Health Corporations of America
Moms in Motion
Open Minds
Shenandoah Valley Alliance for Children, Youth and
Families
Northwestern Community Services Board

Project Horse
Shenandoah University
Shepherd University
Statewide Autistic Services, Inc.
Teens, Inc.
USDA Grant
Valley Medical Center
VARC Virginia Commonwealth University
Virginia Coalition of Private Provider Associations
Virginia Department of Agriculture Commodities
Virginia Department of Rail and Public Transportation
Virginia Network of Private Providers
Wells Fargo
West Virginia University
Winchester City

Grafton has a management services agreement with JASON Learning. JASON Learning is a 501(c)(3) nonprofit organization and long-time partner of the National Geographic Society. Founded in 1989 by Dr. Robert D. Ballard, the mission of JASON Learning is to inspire and educate kids everywhere through real science and exploration. JASON Learning provides multimedia curricular experiences in science, technology, engineering, and math (STEM) for K-12 students, and corresponding professional development for educators in a wide variety of formal and informal education environments. www.jason.org



A Call to Action to Eliminate Restraints and Seclusions

According to an investigative report by ProPublica and NPR, children are restrained or secluded over **267,000** times each year in U.S. public schools, with the majority being children with special needs. Restraint and seclusion are treatment failures and research confirms that these primitive practices actually cause, reinforce and maintain aggression and violence. Children most at risk for behavioral problems typically have a long history of trauma. When a child is restrained or placed in a seclusion room, all of their past suffering resurfaces and triggers additional long-term trauma.

Research supports that eliminating restraints not only saves lives and build safe and productive treatment environments, but also results in significant cost savings for the organization as a whole. Within a span of **10** years, Grafton not only reduced the use of restraints by **99.8** percent, but also lowered workers' compensation policy costs, reduced employee turnover and demonstrated a total return on investment of over \$16 million.

So how do we move towards a restraint free environment?

We have to shift from a paradigm of control to a paradigm of comfort. Training needs to focus on why a child is exhibiting a particular behavior and what we need to provide to not only understand but teach alternative replacement behaviors. We need to mandate a trauma informed approach in schools across the country to see a major reduction in restraints. This includes a shift from a deficit based model to a strength based orientation that will improve the overall quality of treatment and care. In addition, the culture must change from one in which restraint and seclusion are viewed as positive and therapeutic to one in which they are regarded as violent acts that result in traumatization to individuals, staff and others. A different culture and future is possible but it requires commitment to change.

Alternative solutions do exist and need to be used for the welfare of children, staff and the organization as a whole.

ECONOMIC IMPACT

Provides jobs for more
than 800 individuals
and payroll exceeds

\$31.5 million
annually

Achieved >

80%
success rate

on identified Individualized
Education Plan (IEP) and clinical
goals for the children served

3rd
largest
nonprofit

in Winchester, Virginia

Grafton's economic impact
goes beyond its people,
supporting the local economy.
Grafton spent a total of

\$12.6 million

in operating expenses and
capital improvements

Grafton is the Northern
Shenandoah Valley region's

17th largest
employer

2015 Combined Statement of Activities

	2016	2015
REVENUES		
Program service fees	\$54,963,360	\$53,357,221
Contributions and grants	939,584	997,158
Loss on sale of property	(1,348,581)	
Other revenue	1,265,686	781,878
Total revenues	\$55,820,049	\$55,136,257
EXPENSES		
Salaries and benefits	\$42,076,770	\$41,323,049
Program operations	10,006,356	10,626,636
Non-operating expenses	2,718,268	1,907,555
Bad debt expense	946,677	682,994
Total expenses	\$55,748,071	\$54,540,234
OTHER CHANGES IN NET ASSETS	\$(26,984)	\$(2,115)
AND ACCUMULATED DEFICIT		
Change in net assets and accumulated deficit	\$44,994	\$593,908

Combined Statement of Financial Position

	2016	2015
ASSETS		
Cash	\$11,060,046	\$5,420,730
Accounts receivable	10,582,890	10,672,551
Other current assets	964,655	1,097,381
Land, buildings and equipment	15,475,016	21,931,448
Intangible assets	1,167,409	801,619
Other assets	294,215	294,084
Total assets	\$39,544,231	\$40,217,813
LIABILITIES		
Accrued liabilities	\$5,668,869	\$5,431,113
Notes and bond payable	5,895,017	6,558,678
Other liabilities	479,744	772,415
Total liabilities	\$12,043,630	\$12,762,206
NET ASSETS AND ACCUMULATED DEFICIT		
Unrestricted	\$28,937,343	\$27,917,683
Temporarily restricted	87,595	103,544
Permanently restricted	103,094	103,094
Total net assets	\$29,128,032	\$28,124,321
Accumulated deficit	\$(1,627,431)	\$(668,714)
Total net assets and accumulated deficit	\$27,500,601	\$27,455,607
Total liabilities, net assets and accumulated deficit	\$39,544,231	\$40,217,813



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