



Children's Community Based Services

Educational Parent-Student Handbook

Richmond Service Region

2021-2022 School Year

**Richmond Campus
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Midlothian, VA 23112
804-674-8888**

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WELCOME TO GRAFTON

Welcome. The following sections in this manual will give you information and hopefully answer many of your questions concerning the enrollment process and life at Grafton.

A. Grafton: Who We Are

1. Our History

Grafton began because one mother was determined to see that her child received an education in spite of his learning problems and in spite of the fact that public schools turned him away. That was in 1958 before we had laws that protected children's rights to education. In July 2011, we became Grafton Integrated Health Network (GIHN). Students enrolled may present with academic, developmental, social, and/or mental health needs that cannot be adequately addressed in a traditional educational program. True to Ruth Birch's early determination, we continue to serve individuals with complex disabilities whose options for services are limited.

2. Our Work

The individuals we serve are at the center of all our work. We bring families, friends, and professionals together on their behalf. Our work is to help a student progress toward maximum independence and community inclusion. Our goal is to support individuals in developing the functional autonomy required to be successful in their community of choice.

3. Our Mission

The Grafton Integrated Health Network is dedicated to providing a specialized environment which combines both academic and therapeutic components necessary to facilitate the optimal development of each individual student. Grafton creates solution-focused opportunities for individuals challenged by complex disabilities.

4. Our Vision

Grafton is committed to excellence in the delivery of person-centered care and value-added services. We believe that by operationalizing our core values of quality, customer focus, integrity, and accountability, Grafton will become internationally recognized as the preferred:

- Provider of choice,
- Employer of choice, and
- Strategic partner of choice.

Grafton believes that its commitment to utilizing evidence-based best practices and continuous quality improvement as its standard business model is the best way to ensure that optimal outcomes define our standard of care.

5. Our Core Values

- **QUALITY** is our foundation. We take pride in the contributions we make to the lives of the people we serve.
- **CUSTOMER FOCUSED** is the way we do business. We commit to anticipate and understand the needs of our customers-both internal and external-to ensure they are satisfied.
- **INTEGRITY** is our pathway to credibility. We hold ourselves to the highest standards of honesty and ethical behavior.
- **ACCOUNTABILITY** is our responsibility. We earn trust by being responsible for all our statements, actions, and results.
- **FLEXIBILITY** is how we adapt in a quickly changing environment. We shift our focus and respond thoughtfully to new challenges and assignments.

B. Admissions

TUITION & FEES

The tuition paid for educational services covers all materials and instructional services provided to the students. The funding agency is billed at the end of each month. When other services (Speech, Occupational Therapy and Individual Therapy, etc) are warranted by the student's IEP, such services will be billed as per published rate schedule and billed to the funding agency/assigned payor.

In the event that a student is parentally placed as a private pay, tuition must be paid at the beginning of the month.

1. Non-Discrimination

Title VI of the Civil Rights Act of 1964 prohibits discrimination on the basis of race, color, or national origin in programs and activities receiving Federal financial assistance. Specifically, Title VI provides that "no person in the United States shall, on the ground of race, color, or national origin, be excluded from participation in, be denied the benefits of, or be subjected to discrimination under any program or activity receiving Federal financial assistance" (42 U.S.C. Section 2000d).

Grafton is committed to ensuring that no person is excluded from participation in, or denied the benefits of its transportation services on the basis of race, color, or national origin, as protected by the Title VI in Federal Transit Administration (FTA) Circular 4702.1B. If a person receiving services feels they are being denied participation in or being denied benefits of the transit services provided by Grafton, or otherwise being discriminated against because of race, color, national origin, gender, age, or disability, Grafton's contact information is:

James Stewart, Title VI Manager
Grafton Integrated Health Network
P.O. Box 2500
Winchester, VA 22604
540-542-0200
James.h.stewart01@graffton.org

You may access a copy of Grafton's complete Title VI Plan and associated procedures at www.graffton.org.

2. Admissions

We welcome and admit individuals of any race, color, national and ethnic origin, socio-economic background to all the rights, privileges, programs, and activities made available to all individuals supported by Grafton. Grafton does not discriminate on the basis of race, color, sex, physical or mental disability.

Grafton's admission decision for each individual is based on examination of the materials presented and consideration of information obtained during the pre-placement interview. From these sources, we determine if Grafton can support the level of care needs of the individual referred.

The staff in our Access Department will work with you making the arrangements for enrollment including the day, time and place of your arrival. An Admissions Case Manager will direct you to the intake site. This may be a school site or a residence.

Each Grafton student is required to have a record of a recent physical (no older than 90 days or within the last 12 months if transferring from another state-licensed facility), a dental exam completed within the last 12 months, and record of immunizations prior to enrollment. If your child is currently taking medication, we will need original prescriptions (when possible one week prior to enrollment) as well as the remaining supply in the original container. Our staff will discuss specific state requirements for medication distribution with you. Grafton will ask for primary care physician information for the purpose of keeping the PCP apprised of progress.

You will receive a packet that contains all the forms that Grafton is required by licensing to maintain in your child's case record. These forms help us better serve your child. Most require your input; all require your signature. **Without this information, enrollment cannot occur. Additionally, only the LEGAL GUARDIAN may sign the forms.** Please note that the permission forms will be updated annually.

Forms are to be faxed to the Access Department prior to enrollment (1-540-542-1721). An Admissions Case Manager will review the information received and contact you should additional information be required. Hard copies are to be brought with you the day of enrollment.

Our staff will be glad to answer any questions you may have so please call.

You may reach the Access Department at 1-888-955-5205, extensions 6460 or 6461. If the line is busy, please leave a voice mail message and they will return your call as soon as possible. The mailing address for the Access Department is:

Grafton
Access Department
P.O. Box 2500
Winchester, VA 22604

3. Special Notes for First Day

When you arrive on enrollment day, your child's case manager or other knowledgeable staff will meet with you. They will review the intake packet and help you complete forms if you have questions about them.

An **Information Sheet** that lists important contacts will be given to you before you leave. This will be a handy reference sheet for you.

After all the intake activities are over, you can decide how best to approach your leaving. You know your child best, so the decision is yours. We will follow your lead.

Parents may access Grafton's Emergency Preparedness Plan which addresses various types of emergencies on www.grafton.org or by requesting a print copy via email to the Principal. Additionally, should the need arise for a campus to be locked down or evacuated, the following alternative site will be used to reunify parents/guardian's with their day student:

Integrations
3555 Courthouse Road
North Chesterfield, VA 23236

4. What to Bring

- **CLOTHING:** It is recommended that all students have at least one full change of seasonally appropriate clothing available within the school. For students who wear pull-ups or who are prone to toileting accidents, it is recommended that no less than two full clothing changes be present within the school.
- **ALL ITEMS NEED TO BE PERMANENTLY MARKED.** We need to be able to track your child's clothes. However, **all** clothing marks should be in the interior bands or seams so that the child cannot be identified by exterior markings.
- **HYGIENE:** For students who utilize toileting supplies such as pull-ups, please send an ample supply no less than daily, however, weekly or monthly supplies are also welcome.

5. What Not to Bring

While your child is at school, he or she will be sharing space with others, so if something is irreplaceable, please do not send it.

- **DO NOT bring/send:**

controlled substances	guns	telephone
toxic glue	knives	recreational electronic tablets or iPads
matches, lighters	other weapons	mirror
cigarettes, cigars	slingshots	recreational MP3 players or iPods
smokeless tobacco	fireworks	
- Clothing or other items with messages that promote alcohol or drug use or violence are not permitted.

GRAFTON DOES NOT ASSUME RESPONSIBILITY FOR ITEMS THAT ARE BROKEN, LOST, OR STOLEN. PARENTS/ GUARDIANS SHOULD CAREFULLY SUPERVISE PACKING AND NOT ALLOW STUDENTS TO BRING ITEMS THAT CANNOT BE EASILY REPLACED.

6. Multidisciplinary Team

At Grafton, a team supports each student. The make-up of this team will reflect the individual's needs. The following is a description of the Grafton staff most likely to be a part of the multidisciplinary treatment team that supports your child.

Case Manager: Each individual enrolled at Grafton is assigned a case manager. The case manager coordinates all activities and programs for your child. The case manager will be Grafton's communication link for you and for the agencies supporting your child. The case manager is responsible for contacts with the local school divisions (LEA) for the children they have placed at Grafton. The frequency of this contact is determined by the LEA and includes at minimum, progress updates as often as required by IDEA.

Clinical Staff: Each individual is supported by a variety of professional clinical staff depending on their individual needs. These may include physicians, nurses, therapists, behavior clinicians, speech therapists, and occupational therapists.

Teachers: Classrooms are staffed with licensed teachers appropriate to their teaching assignment. Selected on the basis of training and student needs, these individuals are responsible for the implementation of the Individualized Education Program (IEP).

Instructional Assistants: Our school is staffed with individuals who have a range of experience and training to meet identified student needs during school hours. Instructional Assistants support treatment and assist the teacher in providing instructional opportunities related to core academics, physical education, art/music appreciation, social behaviors, daily living, community life, and leisure/recreation.

*All Grafton staff who are responsible for client care are certified in Adult/Child CPR and First Aid. Additionally, all Teachers are certified in automated electronic defibrillator.

Grafton team members involve families and agencies through regular telephone contact and periodic meetings.

On enrollment day, you will be given an Information Sheet listing the specific people who will be working with your child. Please keep this sheet as a handy reference guide, especially when you wish to talk to the person who works with your child.

7. Keeping in Touch

Parents/Guardians may visit their child's school site during the school day. In order to ensure the student is not away from campus or that the student is not involved in a scheduled therapy session, it is important to schedule visits in advance with the case manager. If parents or guardians wish for extended family or friends to visit, specific written permission from the legal guardian must be given before the person will be allowed to visit. This requirement also applies to non-custodial parents.

Due to the COVID-19 Pandemic, procedures regarding visitations have changed. Please call or email your student's case manager for more information and with help in scheduling a visit.

It is our goal to help students return to the community school of their choice. Therefore, frequent communication is a vital part of the school/parent relationship. Communication methods will vary based upon student/parental needs and may range from daily to monthly.

Professional Visits: Parents/guardians may be scheduled to attend meetings with staff such as the case manager, therapist, or teacher. Please make arrangements to have other children (under 18) who come with you supervised by another adult who is not participating in the professional meeting. It is expected that all visitors conduct themselves in a kind and professional manner while on Grafton property and while communicating with Grafton staff.

C. Program Information

1. Licensing and Accreditation

The Virginia Department of Education licenses our private day school which is also accredited by Cognia.

2. Facilities & Equipment

Grafton's academic programs include space for classrooms, therapy services (such as speech-language therapy, occupational therapy, Applied Behavior Analysis and individual therapy), recreational space, and storage space for teacher instructional materials and resource supplies. There are offices and meeting areas at the school. Teachers and students have access to computers, iPads, iPods, SMARTboards, and additional ancillary technology in each classroom based on the needs of the individual students. Designated lunchroom space is available and gymnasiums are available. A sensory room and an outside playground is also available for student use. Students also participate in off-site community-based job and/or outing experiences (per needs of student).

3. Service Plans

All students entering a Grafton program will have a Treatment Plan based on the student's symptoms of concern and reason for referral which includes a detailed discharge plan including associated measurable goals and objectives. An Initial Treatment Plan is completed upon enrollment and includes initial treatment strategies. The next Treatment Plan is typically completed within 7 days after enrollment and is updated by the multidisciplinary team during the student's team meeting within 30 days. This second Treatment Plan is developed from historical information, parent/guardian and agency interviews, and current clinical, educational and medical assessments. The ongoing Treatment Plan is designed based on this information, as well as behavioral data collected on a weekly basis. Transition to a lesser restrictive setting is the continued focus of the treatment plan process including monthly updates to the discharge criteria and review of applicable data associated with discharge goals and objectives.

Each student enrolled in the Richmond program enters with a current IEP and the services in this plan are implemented for the first 30 days of enrollment. At this point, based on current assessments, an updated IEP may be required. Grafton staff will assist the student's LEA (local school system) in the development, review, and approval of an IEP in accordance with all State and Federal requirements. Participation in the IEP process by the student, parents/legal guardians, and the LEA is documented.

4. Progress Reports

All students have multidisciplinary team (MDT) meetings conducted at least monthly to support and monitor their education and treatment progress. Specific progress on goals and objectives in the Treatment Plan (behavioral health) and the IEP (education) are discussed and reviewed. If progress is not on track, according to the minimum growth prediction for accomplishment based on the plan timelines, the MDT designs strategies and interventions to facilitate student progress.

Additionally, during every month, the supervising administrators (Educational, Clinical) review current scores to ensure satisfactory progress. Specific feedback and guidance is given to staff as indicated. IEP progress updates are sent to the parents, the local school system and other associated team members in accordance with IDEIA guidelines.

5. Recreation and Physical Exercise

Grafton provides and promotes recreational and physical exercise activities consistent with an individual's age, developmental level, interests, and needs. These activities may occur at Grafton school sites or in the community. Recreational activities occur indoors and outdoors and are structured to enhance the learning opportunities for students. Community recreational resources are utilized including, in some service regions, community athletic leagues.

In school, physical exercise schedules are developed as part of the general school day and are integrated into the individual classroom schedule. Activities may be developed and led by a Grafton teacher and/or a contracted licensed provider. All necessary modifications or accommodations are made to account for medical or physical disabilities which may impede full participation in typically offered physical education activities.

Recreational activities and field trips are directed and supervised by staff knowledgeable in the safeguards required for the activities.

6. Religious Activities

By law, Grafton operates in a non-sectarian manner, neither requiring participation in religious activities nor denying admission on the basis of religious preference. Grafton staff will provide opportunities for students to participate in religious activities of the students' choice. However, religious service selection may be limited by the variety of choices in the local community. Staff and/or students' illnesses, activity schedule conflicts, bad weather, etc. may prevent attendance to a particular religious service.

7. Transportation

While at Grafton your child will be involved in a variety of activities. Many of these activities will be in the community. Grafton students are transported in vehicles (cars or vans) which are owned or leased by Grafton and operated by Grafton employees. Grafton verifies valid drivers' licenses for all staff transporting students. All of Grafton vehicles are properly insured and licensed according to State requirements.

D. School Programs

1. School Philosophy

Grafton embraces a research-based approach to instruction which includes informal and formal assessments, curriculum alignment, mapping, and data analysis. Emphasis is on data based decision-making which is used to design and monitor intervention strategies to guide each student's educational program. Student preferences, interests and abilities are noted and inform the staff of motivational opportunities. 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. This integration allows the teacher and the student to engage in alternative formats for presentation, action, expression, and engagement. This teaching philosophy fosters a motivation for lifelong learning, which in turn creates enhanced functional autonomy and quality of life.

2. Curriculum

Grafton provides a blended curriculum that balances academic and functional skills. It is designed to provide a variety of instructional opportunities to students with a wide range of disabilities. For all students 14 years and above, Career and Technical Education is provided as an option in a variety of venues as exploration, assessment and training.

All students are assessed no less than annually with the written consent of their parent and/or legal guardian. Assessment results are shared with the educational team prior to development of the appropriate educational plan for the student. Assessment tools are adopted for use via internal review team and may be modified at any point during the school year based upon program needs or acquisition of superior options.

All students have access to and instruction in the curriculum standard adopted by their home state. In Virginia this would be the Virginia Standards of Learning/Virginia Aligned Standards of Learning in English/Language Arts, Writing, Mathematics, History/Social Science, and Science. In addition, we provide instruction in Daily Living, Career and Technical Education, Computer Technology and Community Living Skills, as appropriate. This is achieved by the placement in and the monitoring of progress of each student in one or more of the following curriculums. Curriculum and materials are adapted to provide learning at an optimum rate with high retention and broad generalization.

Current available curriculum options include but are not limited to: The Virginia State Department of Education – Standards of Learning Curriculum Framework

- The Virginia State Department of Education – The Aligned Standards of Learning
- The STAR – Strategies for Teaching Based on Autism Research
- Brigance Transition Skills Activities
- Project Discovery
- Early Literacy Skill Builder
- Touchmath
- Edmark Reading Level One & Two
- Circles/Life Horizons
- The state curriculum or alternate state curriculum of the student's placing state when other than Virginia.
- Box Cars and One Eyed Jacks
- DreamBox

- PCI Levels 1, 2 & 3
- Edmark Functional Words Series
- IXL

Instructional adaptations and modifications, as well as assistive technology, are based on the students' IEP. The instructional methods and accommodations include environmental strategies and take into account the visual, auditory, fine and gross motor needs of each student. Instructional decisions and interventions are data based.

3. Educational Objective of Each School Program (Please see Attachment C for program description and objectives)

Grafton has three different programs that are dependent on the functioning levels of the student and are determined by the student's IEP team. The different attributes and the educational objective details of each of these programs can be located in the "*Program of Studies Handbook*" which can be accessed on www.grafton.org.

Students are offered opportunities to participate in arts and music based curricular experiences as part of the standard educational day. Additionally, with parental and/or legal guardian consent, and as deemed appropriate by the student's multi-disciplinary team, students may participate in a family life curriculum appropriate to his or her cognitive and developmental level.

In each program, Grafton meets or exceeds teacher to student ratios defined in State regulations. There is at least 1 teacher for every 8 students along with 1 to 3 instructional aides. The number of instructional aides is dependent on the individualized needs of the students.

- **Integrated Program**

This program exists for those students whose IEPs indicates that they cannot meet in full the requirements of the Virginia Standards of Learning (SOL's) or those of the student's home state.

This program is designed for the student who needs a highly specialized learning environment in functional life-skills. The educational objectives include daily living, and career and technical education skills. Blended into the program objectives are the academic areas of English/language arts, mathematics, history/social science, and science, which are based on the aligned state standards of learning. Students participate in learning with emphasis on communication skills in functional context.

The student may spend a portion of each school day in career and technology exploration, assessment or training as called for in the IEP. The areas covered include job exploration, a career and technical education assessment (typically situational), and job training via an individualized task analysis for each job skill set. Training areas are tracked according to labor standards and students who participate are paid a stipend based on a predetermined set of work skills and work behaviors. These work experiences may be in school or community-based. The completion of this program and the requirements of the student's Individualized Education Program (IEP) results in the issuance of a Certificate of Applied Studies or Certificate of Completion.

- **General Education Program**

The General Education Program exists for those students whose IEP team indicates that they can fully participate in a curriculum based on the Virginia Standards of Learning (SOLs) or the applicable standards of their home state. The objective of this program is to increase competency in the four core academic subject's areas of English, Mathematics, History/Social Science and Science. In addition to these subject areas, Grafton's blended curriculum provides a balance of functional skills and career skills that lead to successful transitioning into adult living.

No less than annually, Grafton administration will confer with the student's home LEA to ensure that course offerings remain in alignment with graduation requirements.

- **Distance Learning Program (during the COVID-19 pandemic)**

The Distance Learning Program is available to students enrolled in Grafton's community-based day school whose parents do not wish for them to return to in-person instruction and available for all students if school closures are mandated. Parents have several options for student learning including full distance learning, partial distance learning/partial in-person, full in-person instruction. During this school year this may change based on regulation and guidance from the Grafton internal team, individual localities, and guidance from VDOE and the Virginia government. Updates on this throughout the year will be sent out by the student's case manager, Principal, or other school leadership.

4. School Attendance and Tardiness

Grafton's annual school calendar is published on www.grafton.org in the Spring and commences July 1 of each school year. Grafton's school programs provide 223 school days each year with approximately 12 early dismissal days.

Maximum benefit from an educational program necessitates good attendance. All students are expected to attend school regularly and to be on time. Instructional staff document attendance and/or tardiness daily with formal submission being made to the home LEA as per the requirement of the LEA.

There are times when a student is unable to attend school. Therefore, when a student will be absent for all or part of a day, it is the responsibility of the parent or legal guardian to inform the school each day his or her child is absent or not in attendance for the entire school day. If a student is absent without contact, a case manager employed by Grafton will make reasonable effort to contact the parent or legal guardian the student every day to obtain the reason for the student's absence.

Absences that may be considered excused upon receipt of a valid written note or other form of notice approved by the school from the parent or guardian on the day of the student's return to school include:

1. Illness (if over two days, the school may require a note from the physician);
2. Medical and dental appointments;
3. Court appearance;
4. Death in the family; and,
5. Extenuating circumstances as determined by the principal or assistant principal of the school.

Any absence for which there is no valid written excuse and no communication from the parent will be considered an unexcused absence.

If attendance or tardiness becomes a concern it is the teacher's responsibility to report this to the Principal. The Principal then gathers the various reasons for the absences and/or tardiness and presents this to the student's multidisciplinary team (MDT). The MDT either determines strategies and techniques to encourage attendance and promptness or if the reasons fall outside of Grafton's domain, the MDT determines the need to contact the student's placing agency.

5. Grading

For all students addressing standards which result in a Standard diploma, or Advanced Standard diploma in Virginia, a formal grading system is used. Students placed in Virginia by another state who are working on a credit diploma also follow this grading scale. Grades are given based on a predetermined rubric that can include lesson content, skill development and participation. Individual content teachers are given latitude to develop course specific grading guidelines and procedures with respect to assignment weighting, make-up work, quizzes, tests, and homework. Grafton uses a ten point grading scale.

Grading Scale:	A 90-100
	B 80-89
	C 70-79
	D 60- 69
	F 59 and below

Elementary, middle, and High School students in the integrated program are not required to receive formal letter grades and instead are graded utilizing a pass/fail or ungraded scale, dependent upon the feedback of their placing LEA. Placement in this program is an IEP team decision and is also evidenced by following a program which is based upon Aligned or Modified Standards from their home state.

All students are evaluated by ongoing data probes based on the listed criterion in their IEP goals and objectives.

Grafton defers all promotion and/or retention decisions to the home LEA based upon their local standards. Additionally, while Grafton may issue a certificate of attendance, it is the responsibility of the student's home LEA to issue the formal graduation document.

6. Make-Up Work

The majority of the students at Grafton do not work in a curriculum in which make-up work would be beneficial.

There are a few students who, based on their curriculum track or diploma option, might encounter the need for make-up work. The teacher in conjunction with the Principal makes the determination of this need. The factors considered include the educational value of make-up work, the reason for absence resulting in the need for make-up, and the student's multidisciplinary team's (MDT) recommendation on this topic.

For students who are working at the high school level with the intention of earning a standard diploma or advanced studies diploma, high frequency of absences impact the student's ability to earn credits and pass the required end of course exams. In this situation, Grafton will contact the student's local educational agency to determine how they would like to proceed. If make-up work is determined to be the best course of action by

the LEA and the IEP team then Grafton's Principal works with the student, the teacher, and the student's MDT to develop a make-up plan that can be successfully completed.

7. Homework

Schedules will accommodate time for students to complete homework/study time.

8. Statewide Testing

Statewide testing decisions are made via two avenues. For those students who have an IEP, all statewide testing decisions will be made during the IEP meeting and will be administered according to all applicable state standards and timelines. For those students who have an IIP, all testing decisions will be made via phone conference with the LEA.

The IEP team also determines the state approved assessment accommodations that will be provided to the student in the areas of timing/scheduling, setting, presentation, and response. These selected assessment accommodations are the accommodations, which are also being provided to the student in day to day instruction.

It is the local educational agency's (LEA) decision as to whether or not it wants to conduct the assessments at its own site. In most cases the assessments are done at Grafton by Grafton staff. The needed assessments, binders for collections of evidence, and other supplementary forms and information are provided by the student's LEA.

Under the direct supervision of the regional Principal, the assessments or the collection of evidence are completed. State and local assessment trainings are attended yearly by Grafton's educational staff that in turn provide teacher training and ongoing support in this area.

All assessment administration is based on each LEA's assessment schedule. After all required elements are completed the assessments or binders with the collection of evidence are returned to the LEA within their predetermined timeframe.

9. Career and Technical Education

During the duration of a student's educational experience and based upon educational program, he/she may participate in career education experiences which include situational assessments, in school work experiences, off-site work experiences and on the job training. Placement in any type of work experience is based upon the student's career and technical education assessment data along with their associated individual interest assessment.

Participation in all facets of the career and technical education program are monitored by the Career and Technical Education Teacher along with the Principal to ensure compliance with all applicable laws governing the employment of children.

Parents/guardians will be required to sign a document in order for their student to go back into the community during school hours (this applies for both CTE job sites and community-based outings).

E. Nutrition & Special Diets

1. Food Service

Grafton provides balanced, nutritious and appropriate meals and snacks based on USDA guidelines and state regulations. Menus are approved by a Registered Dietician.

Grafton will provide a special diet as prescribed by a physician at enrollment or while the student is at Grafton. Please ensure that your child's physician submits a copy of the prescribed diet plan at least two weeks prior to enrollment. The prescription should include any notes describing specific guidelines. Please send this to the Access Department.

2. USDA (ATTACHMENT D)

In accordance with Federal civil rights law and U.S. Department of Agriculture (USDA) civil rights regulations and policies, the USDA, its Agencies, offices, and employees, and institutions participating in or administering USDA programs are prohibited from discriminating based on race, color, national origin, sex, religious creed, disability, age, political beliefs, or reprisal or retaliation for prior civil rights activity in any program or activity conducted or funded by USDA.

Persons with disabilities who require alternative means of communication for program information (e.g. Braille, large print, audiotope, American Sign Language, etc.), should contact the Agency (State or local) where they applied for benefits. Individuals who are deaf, hard of hearing or have speech disabilities may contact USDA through the Federal Relay Service at (800) 877-8339. Additionally, program information may be made available in languages other than English.

To file a program complaint of discrimination, complete the [USDA Program Discrimination Complaint Form](#), (AD-3027) found online at: http://www.ascr.usda.gov/complaint_filing_cust.html, and at any USDA office, or write a letter addressed to USDA and provide in the letter all of the information requested in the form. To request a copy of the complaint form, call (866) 632-9992. Submit your completed form or letter to USDA by:

- (1) mail: U.S. Department of Agriculture
Office of the Assistant Secretary for Civil Rights
1400 Independence Avenue, SW
Washington, D.C. 20250-9410;
- (2) fax: (202) 690-7442; or
- (3) email: program.intake@usda.gov.

This institution is an equal opportunity provider.

F. Medical Care for Students who are dually enrolled within a Grafton Residential Program

Nursing care is provided for Grafton clients by professional nursing staff or the student's own health care provider. All medications must be packaged in a "cold pack" distribution format and will be disposed of by nursing staff as per all applicable state and federal guidelines. Written prescriptions for 34 days and the

remaining supply of each medication in the original container are to be given to the nurses or case manager at enrollment. Only trained personnel may administer medications and must document administration on the MAR.

While dually enrolled as both an educational and a residential student, Grafton staff will support medical needs through provision of scheduling coordination, staffing support, and transportation to and from community medical providers.

When transporting medications between the school sites and the group homes, all medications must be carried in secure and locked containers under the supervision and control of assigned Grafton staff. Upon arrival at school medication boxes are to be delivered to the infirmary and upon arrival at the group home medication boxes are to be placed in a locked cabinet.

Parents/guardians will be notified within 24 hours of any serious incident, accident, or injury to the student. Staff attending the student at the time of the incident, illness, accident, or injury will determine whether or not the student requires the attention of a community health care professional or emergency room visit based on training guidelines. If the Grafton nurse or on-duty manager is immediately available, he/she will make the determination.

Injuries that are not serious enough to require a doctor visit but have left marks, such as bruises or scrapes (i.e. student falling on the playground) will be reported in the weekly parent telephone calls. Parents who cannot be reached by telephone will be notified by letter. All attempts at notification will be documented.

The case manager or nurse will call parents/guardians regarding medication, or any other health related problems or needs. Should a Grafton nurse or external healthcare provider determine that a student is unable to attend school due to illness, he/she will be cared for in the residential setting by direct care staff and assessed periodically by a Grafton nurse or external healthcare provider. Return to school will be determined by the attending medical provider based upon Virginia Department of Health guidelines (**Attachment A**) and remediation of symptoms.

Grafton uses community hospital services within all regions. Local rescue squads provide emergency services on-site and transportation to the hospital.

In all programs, you have the right to select the medical provider of your choice for all medical services. Please contact the Admissions Department if you would like information on available medical provider options. Grafton requires documentation that such services were provided and any follow-up recommendations be submitted to the Grafton nursing department.

All individuals enrolled in Grafton who receive psychotropic medications are required to have psychiatric follow-ups at least once every three months.

Unspecified epinephrine injectors are available at all school sites and all school staff are trained as per regulation in proper identification of a crisis event and administration of the injection. Specific locations for each site are monitored by nursing, clearly labeled, communicated to staff via written correspondence, and included in annual refresher trainings.

Until a determination is made by the COVID-team that these procedures are not needed, students will continue to be pre-screened and temperature screened upon arrival to school. If this changes during the year, parents/guardians will be notified.

G. Medical Care for Day Students

Nursing care is provided for Grafton students by professional nursing staff or the student's own health care provider. All medications must be supplied by the legal guardian in the original child-resistant pharmaceutical packaging with directions for administration. All medications should be delivered to Grafton nursing staff by an adult and transported in a locked bag or box which cannot be accessed by the student. Only trained personnel may administer medications and must document administration on the MAR.

Parents/guardians are responsible for the scheduling and transportation to and from all community-based healthcare providers along with ensuring Grafton's medical staff are apprised of any medical needs which will impact the child's care during the school day.

Parents/guardians will be notified of any serious incident, accident, or injury to the student. Staff attending the student at the time of the incident, illness, accident, or injury will determine whether or not the student requires the attention of a community health care professional or emergency room visit based on training guidelines. If the Grafton nurse or on-duty manager is immediately available, he/she will make the determination.

Injuries that are not serious enough to require a doctor visit but have left marks, such as bruises or scrapes (i.e. student falling on the playground) will be reported in the daily communication log.

The case manager or nurse will call parents/guardians regarding medication, or any other health-related problems or needs.

Should a student exhibit concerning symptoms of potential illness during the school day, a Grafton nurse or case manager will contact the parent and arrange for early pick-up. Upon assessment by an external healthcare provider, should it be determined that a student is unable to attend school due to illness, he/she will be excluded from school attendance as per the medical provider's order. Should the student not require medical attention, he/she will be allowed to return to school as per and Virginia Department of Health guidelines (**Attachment A**) and remediation of symptoms.

Grafton uses community hospital services within all regions. Local rescue squads provide emergency services on-site and transportation to the hospital.

All individuals enrolled in Grafton who receive psychotropic medications are required to have an external treating psychiatrist.

Unspecified epinephrine injectors are available at all school sites and all school staff are trained as per regulation in proper identification of a crisis event and administration of the injection. Specific locations for each site are monitored by nursing, clearly labeled, communicated to staff via written correspondence, and included in annual refresher trainings.

Until a determination is made by the COVID-team that these procedures are not needed, students will continue to be pre-screened and temperature screened upon arrival to school. This includes ensuring that students are not sent to school if they have been in contact with someone who has been diagnosed with COVID-19. If they have been in contact with someone with COVID-19, parents/guardians should contact their student's assigned case manager to determine what is needed for a return to school. Based on COVID protocols, if a student has a fever upon arriving to school or has a fever during school, parents/guardians will be contacted and expected to pick up their child from school or arrange for transportation of their student from

the school. Parents/guardians are expected to follow all COVID-19 procedures put in place by the school in regard to health and safety.

H. Protection from Abuse and Neglect

All Grafton staff are mandated reporters of any suspected abuse and/or neglect. Staff is trained annually in accordance with all applicable state and federal regulations. Policies and procedures for reporting any suspected occurrences of abuse and/or neglect are detailed within the Grafton Policy Manual. (**Attachment B**)

H. Behavioral Supports

1. General Information

Students who receive services through Grafton often display serious acting out behaviors. Grafton is committed to helping our students develop positive behavior patterns that they will be able to take with them when they leave Grafton. As such, all staff is trained in approved behavior management and de-escalation techniques. Staff are trained utilizing UKERU. Functional Behavioral Assessments are completed to identify the functions that the behaviors serve for the client. Individualized positive behavior plans are then developed to teach alternative/ replacement behaviors. These new skills are reinforced using a variety of individualized reinforcers.

From time to time however, restrictive consequences may be required as discipline for inappropriate behavior by the student. All restrictive consequences are designed to reduce the reoccurrence of the unwanted behavior. Restrictive interventions are described below.

2. Time Out

In accordance with State rights regulations, "time out means assisting an individual to regain emotional control by removing the individual from his immediate environment to a different, open location until he is calm or the problem behavior has subsided". The instruction to the individual to move or remain in the alternative location may not take the form of a threat. An individual may not be in time out for more than 30 minutes per episode. Time out must be part of a written behavioral support plan with approval from a clinical and rights review. During a timeout, an individual may not be placed alone in a locked or secured area from which he is physically prevented from leaving (seclusion).

Note: Grafton does not use seclusion of any type across all locations.

3. Restriction

While receiving Grafton supports, each individual is entitled to:

1. Enjoy all the freedoms of everyday life that are consistent with his need for services, his protection, and the protection of others, and that do not interfere with his services or the services of others.
2. Receive services in that setting and under those conditions that are least restrictive of his freedom.

Grafton encourages each individual's participation in normal activities and conditions of everyday living and supports each individual's freedoms. Limitations or restrictions on an individual's freedom will not be more

than needed to achieve a therapeutic benefit, maintain a safe and orderly environment, or intervene in an emergency. Restrictions will not be imposed on an individual unless the restriction is justified and carried out according to State rights regulations. A qualified professional team will regularly review every restriction and ensure the restriction is discontinued when the individual has met the criteria for removal.

4. Physical Restraint

The Richmond school site is restraint free. Therefore, a physical restraint will only be used as an extreme emergency measure to assure safety of the student and others in an emergent situation and when all other alternative methods to ensure safety have failed. The use of any physical restraint will be in accordance with all applicable laws and regulations to include the prohibition of prone restraint of any type.

Physical restraint will not be used as punishment, reprisal, or for the convenience of staff. Only employees who hold current certification in Grafton's approved behavior intervention system may implement a physical restraint. For more information on Ukeru, please contact a case manager.

6. Restitution

Restitution may be approved in an effort to provide for more naturalistic consequences for the destruction of property by any of the following methods as part of an approved individualized behavioral support plan.

Chores may be performed within the following parameters:

1. Chores may not displace or replace an employee. Chores assigned do not release an individual paid to perform that chore from doing that chore. (Example: If an individual messes up the bathroom, he may be required to clean it up but his compliance does not release the housekeeping staff from having to clean it.)
2. Chore assignments must be time-limited.
3. Chores that benefit an individual staff member must be avoided;
4. Chores assigned should be concretely related to the infraction;
5. The individual may be asked to fix what he has broken, if able.

Money may be used as a means of restitution within the following parameters:

1. Money from general funds, such as activity or reinforcer money, may be used within the context of a restitution program.
2. No more than 50% of an individual's money may be designated for restitution.

The individualized behavioral support plan will:

1. Specify the behaviors that may result in the use of restitution;
2. Provide a menu of specific tasks that will be used for restitution;
3. Designate who has the authority to approve the restitution assigned to a specific incident (manager or therapist – someone not directly involved in the incident);
4. Specify the maximum amount or total duration of restitution that can be assigned for any one incident.

7. Increased Structure

Increased Structure Program may be used for students who demonstrate very dangerous behaviors and who are making regularly staffed academic environments unsafe for others or themselves. These students may be assigned to instructional areas with lower student to staff ratios and more highly structured activity schedules.

Use of the Increased Structure Program must be incorporated into an approved individualized behavioral support plan.

8. Punishments/Actions Prohibited at Grafton

1. Deprivation of drinking water or food necessary to meet an individual's daily nutritional needs except as ordered by a licensed physician for a legitimate medical purpose and documented in the individual's record;
2. Limitation on contacts and visits with the individual's attorney, a probation officer, regulators or placing agency representative;
3. Bans on contacts and visits with family or legal guardians except as permitted by other applicable state regulations or by order of a court of competent jurisdiction;
4. Delay or withholding of incoming or outgoing mail except as permitted by other applicable state and federal regulations or by order of a court of competent jurisdiction;
5. Any action which is humiliating, degrading, or abusive;
6. Corporal punishment;
7. Subjection to unsanitary living conditions;
8. Deprivation of opportunities for bathing or access to toilet facilities except as ordered by a licensed physician for a legitimate medical purpose and documented in the individual's record;
9. Deprivation of health care;
10. Deprivation of appropriate services and treatment;
11. Application of aversive stimuli except as permitted pursuant to applicable state regulations;
12. Administration of laxatives, enemas, or emetics except as ordered by a licensed physician or poison control center for a legitimate medical purpose and documented in the individual's record;
13. Deprivation of opportunities for sleep or rest except as ordered by a licensed physician for a legitimate medical purpose and documented in the individual's record; and
14. Limitation on contacts and visits with advocates employed by the Department of Mental Health, Mental Retardation and Substance Abuse Services or the Department for Rights of Virginians with Disabilities.

H. Complaint Resolution

Parents, guardians, Grafton staff, and/or individuals receiving services may bring a complaint or concern to the attention of any member of the multidisciplinary treatment team. The person receiving the problem attempts to resolve it at the time of contact. If the team member is unable to provide immediate resolution, the concern is forwarded to the individual's case manager. The case manager determines the nature of the concern and who must be involved in its resolution. The person making the complaint will be contacted within 24 hours by the case manager concerning the matter. At any point in the process, if the person making the complaint is not satisfied with the proposed solution, the case manager or other team members may request help as needed and/or appropriate to the issue from the regional management team and the corporate office.

In regard to our Private Day School services, in the event that the complainant is not satisfied with the internal resolution or prefers, they may file a complaint with the office of Private Days Schools for Students with Disabilities, Virginia Department of Education, P.O. Box 2120, Richmond, Virginia 23218-2120. Additionally, if the home school district of the complainant is outside of the Commonwealth, they may also file a complaint the home state's appropriate office. Information for other regulatory contacts outside of the Commonwealth of Virginia may be obtained from the case manager.

I. Confidentiality

Each individual receiving services is entitled to have all information that Grafton maintains or knows about him remain confidential. Each individual has a right to give his consent before Grafton shares information about him or his care unless another law, federal regulation, or State rights regulations specifically require or permit Grafton to disclose certain specific information.

Grafton will prevent unauthorized disclosures of information from service records and will convey the information in a secure manner.

If consent to disclosure is required, Grafton gets written consent of the individual or the parent/guardian/legally authorized representative, as applicable, before disclosing information.

When information is disclosed, Grafton will attach a statement that informs the person receiving the information that it must not be disclosed to anyone else unless the individual consents or unless the law allows or requires further disclosure without consent.

Upon request, Grafton will tell individuals the sources of information contained in their services records and the names of anyone, other than Grafton employees, who has received information about them from Grafton. Individuals receiving services will be informed that regulatory authorities may have access to their records.

J. Inspection & Review of Records

Each individual receiving Grafton services has a right to see, read and get a copy of his own services record. Minors must have their parent or guardian's permission first. If this right is restricted according to law, the individual has a right to let certain other people see his record. Each individual has a right to challenge, correct or explain anything in his record. Whether or not corrections are made as a result, each individual has a right to let anyone who sees his record know that he tried to correct or explain his position and what happened as a result. An individual's legally authorized representative has the same rights as the individual himself has.

Grafton will permit each individual to see his records when he requests them and to provide corrections if necessary. Grafton, without charge, will give individuals any help they may need to read and understand their service records and provide corrections to them.

If Grafton limits or refuses to let an individual see his service records, Grafton will notify the human rights advocate and tell the individual that he can ask to have a lawyer, physician, or psychologist of his choice see his records. If the individual makes this request, the provider will disclose the record to that lawyer, physician, or psychologist.

Grafton will document in the record the decision and reason for the decision to limit or refuse access to the individual's medical record. The individual will be notified of time limits and conditions for removal of the restriction. These time limits and conditions will also be specified in the record.

If an individual asks to challenge, correct, or explain any information contained in his service record, Grafton will investigate and file in the service record a written report concerning the individual's request.

- If the report finds that the services record is incomplete, inaccurate, not pertinent, not timely, or not necessary, Grafton will: 1. Either mark that part of the services record clearly to say so, or

else remove that part of the services record and file it separately with an appropriate cross reference to indicate that the information was removed; 2. Not disclose the original services record without separate specific consent or legal authority (e.g., if compelled by subpoena or other court order); 3. Promptly notify in writing all persons who have received the incorrect information that the service record has been corrected and request that recipients acknowledge the correction.

- If the report does not result in action satisfactory to the individual, Grafton will, upon request, file in the service record the individual's statement explaining his position. If needed, Grafton will help the individual to write this statement. If a statement is filed, Grafton will: 1. Give all persons who have copies of the record a copy of the individual's statement; 2. Clearly note in any later disclosure of the record that it is disputed and include a copy of the statement with the disputed record.

Grafton may deny access to all or a part of an individual's services record only if a physician or a licensed psychologist involved in providing services to the individual talks to the individual, looks over the services record as a result of the individual's request for access, signs and puts in the services record permanently a written statement that he thinks access to the services records by the individual at this time would be physically or mentally harmful to the individual. The physician or licensed psychologist must also tell the individual as much about his service record as he can without risking harm to the individual.

An access log will be signed by anyone that uses a student's file for any reason, with the date and purpose for its use. Principal or designee is always available to explain the records to parents on request. A designated person will be provided for any parents who need any translation of the records.

If the school closes, student records will be returned to the home school, Local Education Agency (LEA), from which the students came.

Grafton Integrated Health Network student records include the following: Access/Disclosure Record, Current IEP, Phone call record, Transcripts/Grade Cards, Standard of Learning Scores, Diagnostic or Educational Testing, Application, a Parent Rights Form receipt and understanding signature, Correspondence, Physician's Certificate (no more than 3 years old), Critical Incident Reports, if any (Only one student's name appears in any student file).

Previous school information provided may include: Grade cards/Transcripts, Past/current IEP's, triennial reviews, School test evaluation, Psycho-educational evaluations, Speech-Hearing screening or reports, Physician's Certificate.

School files are maintained in accordance with legal and regulatory requirements regarding confidentiality and access.

K. Financial Information

1. General Fees

General fees are the responsibility of the sponsoring agency(ies).

- **Educational Day:** Please refer to the web site for the Office of Comprehensive Services Act for At-Risk Youth and Families which publishes Virginia's Service Fee Directory (www.csa.state.va.us/index.htm). Day fees cover all academic costs including tuition, textbooks, writing, and other instructional materials,

library resources, program supplies, lunch on each academic day, and supervision on those days during school hours. No transportation to and from home is provided.

- **Therapy:** When needed, an individual's program will be designed to include speech-language therapy, occupational therapy, or other individualized services as appropriate. Costs will be determined according to rates listed on the Service Fee Directory.

2. Medical Fees

- **Medical and Pharmaceutical:** Fees for these services (including dental, pharmaceutical and psychiatric services) are not included in the general fees and will be billed by the community provider as needed. **If a student is unable to receive the required medical treatment or medication due to unpaid bills, Grafton may suspend services until the matter is resolved.**

3. Insurance

Please note that Grafton does **not** provide accident or medical insurance. However, Grafton **does** provide liability insurance. Please contact our Finance Office for more information at 540-542-0200, extension 6478.

4. Refund Policy

All charges are prorated on a per diem basis, computed from the day of enrollment. In the event an individual does not actually enter Grafton, is withdrawn by the sponsor permanently, or is dismissed by Grafton permanently, any tuition that has been collected that covers any service days beyond those during which the individual was served will be refunded by prior negotiation; negotiated exceptions include holding an individual's place for a specified period during a placement elsewhere. Note that this policy does not include any temporary absences following which the sponsor intends the individual to return to school.

L. Discharge

It is the goal of Grafton staff to teach skills in education, vocation, community living, residential living, leisure and recreation, language and social interactions. Any individual whose skill levels permit movement to a less restrictive or preferred residence will be transitioned into that residence with appropriate approvals from guardians and funding agencies, as long as funding is possible.

Discharge from any of Grafton's programs can be classified in one of four ways: Planned, Grafton-initiated/Emergency, Parent/Agency-initiated, or Individual-initiated. Whatever basis a discharge has, its purpose is to assist the individual in pursuing individual growth and development. Discharge planning is carried out in coordination with the sponsoring agency and other involved agencies, the individual and the parents/guardians to ensure that the best possible alternative placement is selected. In all cases, the agency which referred the individual for placement will be notified immediately regarding a discharge.

- **Planned Discharge:** A planned discharge may occur under circumstances such as an individual has met stated objective, programming alternatives have been unsuccessful, the individual has reached the maximum age allowed in the current program, or an individual is transitioning to their home community. A minimum of 90 days notice will be given to responsible parties involved regarding a planned discharge.
- **Grafton-Initiated/Emergency Discharge:** Emergency discharges may be required for individuals who cannot receive necessary and appropriate services from Grafton. This includes individuals who require medical services not provided by Grafton, individuals who require psychiatric hospitalization, and

individuals who present clear danger to themselves or others. Notice of such discharge will be negotiated with the appropriate sponsoring agency and/or Community Services Board. Agencies will be notified of required earlier program changes which should preclude any actual last moment notices.

When regular program procedures do not provide the necessary motivation to maintain appropriate behavior, treatment plan changes or requests for additional services, including additional staff support will be made prior to consideration of a Grafton-initiated/emergency discharge.

If the parent/legal guardian goes to due process to prevent a Grafton-initiated discharge, Grafton will maintain the placement during due process proceedings. An exception to this policy may occur for individuals determined by a psychiatrist or physician to require hospitalization or those determined by law enforcement agencies to require a secured facility. Grafton does not offer intensive medical, psychiatric or detention services.

- **Parent/Agency-Initiated Discharge:** A decision for discharge may be made by a parent/legal guardian or agency for their own purposes and reasons. A minimum of 30 days notice is requested for such a discharge. The specific time of discharge may be negotiated with the parent/legal guardian and funding agency.

If a local school system requests discharge and parents/legal guardians go to due process to prevent the discharge, Grafton will maintain the placement as long as there is a contract to pay for the services rendered. Grafton will support movement to an alternative placement only if the parent/legal guardian has agreed to the alternative placement.

- **Individual-Initiated Discharge:** When individuals 18 years of age or older initiate discharge from Grafton services, Grafton staff will work cooperatively with them. Notification of this decision will be made to the funding agency and parents. Individuals who are their own legal guardian, and are not legally entrusted into someone else's care such as the court system, are legally entitled to make such a decision.

Within one year of discharge, Grafton may contact parents, guardians, social workers, other care providers or the individual served by Grafton about adjustments and progress as part of Grafton's on-going quality improvement efforts.



Communicable Disease Reference Chart for School Personnel

DISEASE	INCUBATION PERIOD	TRANSMISSION	COMMON SYMPTOMS	RECOMMENDATIONS
Chickenpox* (Varicella)	10-21 days, usually 14-16 days. (Incubation period in persons who receive VarIZIG or IGIV extends through day 28.)	By direct contact with vesicular fluid or by airborne spread from respiratory tract secretions. Infectious from 2 days before rash onset until all lesions are crusted over and no new lesions appear within a 24-hour period (average is 4-7 days).	Sudden onset with slight fever and itchy eruptions which become vesicular (small blisters) within a few hours. Lesions commonly occur in successive crops, with several stages of maturity present at the same time. Communicable for as long as 5 days (usually 1-2 days) before eruption of vesicles and until all lesions are crusted (usually 5 days). Communicability may be prolonged in immunocompromised people.	CASE: Exclude from school for at least 5 days after eruptions first appear or until vesicles become dry. Avoid exposure to women in early pregnancy who have not had chickenpox and/or varicella vaccine. CONTACTS: Check vaccination status of contacts and recommend vaccination if needed. On appearance of symptoms, exclude from school.
Conjunctivitis, Acute Bacterial (Pink Eye)	Varies depending on causative agent.	By contact with discharges from the conjunctivae or contaminated articles.	Pink or red eyeball with swelling of the eyelids and eye discharge. Eyelids may be matted shut after sleep. May involve one or both eyes.	CASE: Exclude from school while symptomatic or until 24 hours of antibiotic treatment has been completed. CONTACTS: School exclusion not indicated.
Diarrheal Diseases* (Campylobacteriosis, E. coli/O157:H7, Giardiasis, Salmonellosis, Shigellosis, etc.)	Campylobacteriosis: 1-10 days; usually 2-5 days. E. coli/O157:H7: 1-8 days, average 3-5 days. Giardiasis: 3-23 days; usually 7-10 days. Salmonellosis: 6-72 hours, usually 12-36 hours. Shigellosis: 12-96 hours, usually 1-3 days.	By the fecal-oral route through direct contact or by ingestion of contaminated food or water.	Ranges from sudden onset of fever, abdominal pain, diarrhea, nausea, and sometimes vomiting in salmonellosis; to cramps and bloody stools in severe cases of shigellosis and E. coli/O157:H7. Dangerous dehydration may occur in younger children. In giardiasis, persons may be asymptomatic or have decreased appetite and weight loss.	CASE: Exclude from school until cessation of acute diarrhea. Stress importance of proper handwashing. CONTACTS: School exclusion and stool cultures not indicated in absence of symptoms. Consult with your local health department for advice during suspected school outbreaks.
Fifth Disease (Erythema Infectiosum)	From 4-21 days.	Primarily through contact with respiratory secretions.	Rash characterized by a vivid reddening of the skin, especially of the face, which fades and recurs; classically, described as a "slapped face appearance." Mild symptoms of fever, body aches, and headache may occur 7-10 days before rash.	CASE: Exclusion from school not indicated. CONTACTS: School exclusion not indicated. Pregnant women and immunocompromised persons should seek medical advice.
Hepatitis A*	From 15-50 days; average 28-30 days.	By the fecal-oral route through direct contact or ingestion of contaminated food or water.	Fever, loss of appetite, nausea, abdominal discomfort and weakness followed by jaundice. Many unrecognized mild cases without jaundice occur, especially in children. Communicability greatest from 7 days before to several days after onset of jaundice.	CASE: Follow advice of child's physician and/or your local health department. CONTACTS: School exclusion not indicated. Stress importance of proper handwashing.

NOTE: THESE RECOMMENDATIONS APPLY ONLY TO SCHOOL-AGED CHILDREN. A more complete discussion of these conditions and other communicable diseases may be found in *Control of Communicable Diseases Manual* (2008) published by the American Public Health Association and the 2009 *Report of the Committee on Infectious Diseases (The Red Book)* published by the American Academy of Pediatrics. Additional information and consultation are also available through your local health department.
* Officially reportable in Virginia to the local health department. All outbreaks and unusual occurrences of disease are also reportable.

DISEASE	INCUBATION PERIOD	TRANSMISSION	COMMON SYMPTOMS	RECOMMENDATIONS
Hepatitis B*	From 45-160 days, average 90 days.	By direct contact with infected blood or body fluids. Transmission occurs when the hepatitis B virus enters the body through broken skin or mucous membranes.	Only a small proportion of acute infections have clinical symptoms. Symptoms are similar to those of hepatitis A.	CASE: Follow advice of child's physician and/or your local health department. CONTACTS: School exclusion not indicated.
HIV infection* and AIDS*	Variable	By direct contact with infected blood or body fluids. Transmission occurs when the human immunodeficiency virus enters the body through broken skin or mucous membranes.	A broad range of disease manifestations affecting multiple organ systems. Many children remain asymptomatic.	CASE: Follow advice of child's physician and/or your local health department. CONTACTS: School exclusion not indicated.
Influenza	Usually 1-4 days	Person to person by respiratory droplets created by coughing or sneezing.	Sudden onset of fever, chills, headache, malaise, and nonproductive cough. Subsequently, respiratory tract signs including sore throat, nasal congestion, rhinitis, and cough become more prominent.	CASE: Exclude from school until at least 24 hours following resolution of fever. CONTACTS: School exclusion not indicated. Seasonal influenza vaccination encouraged to reduce spread of influenza.
Measles* (Rubeola, Red Measles)	From 7-21 days (usually 8-12 days from exposure to onset of symptoms).	Airborne by droplet spread or direct contact with nasal or throat secretions of an infected person.	Prodrome characterized by fever followed by reddened eyes, runny nose, and cough. Dusky-red blotchy rash appears on day 3 or 4 and lasts 4 to 7 days. Communicable from 4 days before to 4 days after the appearance of the rash.	CASE: Exclude from school until at least 4 days after appearance of the rash. Check immunization records of all students. Discuss with your local health department. CONTACTS: Exclude from school immediately on signs of prodrome. Unimmunized students may need to be excluded from school. Follow recommendations of your local health department.
Meningitis, Bacterial (<i>H. influenzae</i> *, Meningococcal*, Pneumococcal)	<i>H. influenzae</i> : 2-4 days Meningococcal: 2-10 days, usually 3-4 days Pneumococcal: 1-4 days	By direct contact or droplet spread of nasopharyngeal secretions of an infected person.	Sudden onset of fever, headache, nausea, stiff neck and photophobia. Rash may occur in cases of meningococcal disease.	CASE: Exclude from school during acute illness. Non-communicable after 24-48 hours of appropriate drug therapy. CONTACTS: School exclusion not indicated. Discuss with your local health department to determine if close contacts need prophylactic treatment for <i>H. influenzae</i> or meningococcal meningitis.
Mumps*	From 12-25 days, usually 16-18 days.	By droplet spread or by direct contact with the saliva of an infected person.	Fever with swelling and tenderness of one or both parotid glands located below and in front of the ears. Unrecognized mild cases without swelling may occur. Communicable from 3 days before swelling until 5 days after.	CASE: Exclude from school for 5 days after the onset of parotid gland swelling. CONTACTS: School exclusion not indicated.

NOTE: THESE RECOMMENDATIONS APPLY ONLY TO SCHOOL-AGED CHILDREN - A more complete discussion of these conditions and other communicable diseases may be found in *Control of Communicable Diseases Manual* (2010) published by the American Public Health Association and the 2009 *Report of the Committee on Infectious Diseases (The Red Book)* published by the American Academy of Pediatrics. Additional information and consultation are also available through your local health department.

* Officially reportable in Virginia to the local health department. All outbreaks and unusual occurrences of disease are also reportable.

DISEASE	INCUBATION PERIOD	TRANSMISSION	COMMON SYMPTOMS	RECOMMENDATIONS
Norovirus	From 12-48 hours	Primarily by the fecal-oral route through direct contact or ingestion of contaminated food. Transmission is also possible through contact with surfaces contaminated by, or direct contact with, the vomit of an infected person.	Sudden onset of vomiting and/or diarrhea, abdominal cramps, and nausea.	CASE: Exclude from school until 24 hours after symptoms resolve. Stress importance of proper handwashing as virus is shed in stool for weeks after symptoms resolve. CONTACTS: School exclusion not indicated.
Pediculosis (Head Lice)	Eggs hatch in 7-12 days and reach maturity 9-12 days later.	By direct contact with an infested person or their personal belongings such as combs, brushes, and hats.	Severe itching and scratching, often with secondary infection. Eggs of head lice (nits) attach to hairs as small, round, gray lumps.	CASE: Notify parents; inform that child has lice and should be treated. School exclusion is not indicated. CONTACTS: Inspect head for evidence of infestation. Refer for treatment if infested.
Pertussis*	From 4-21 days, usually 9-10 days.	By direct contact with respiratory secretions of an infected person by the airborne route.	The initial stage begins with upper respiratory symptoms and increasingly irritating cough. The paroxysmal stage usually follows within 1 to 2 weeks, and lasts 1 to 2 months. Paroxysmal stages is characterized by repeated episodes of violent cough broken by a high-pitched inspiratory whoop and vomiting. Older children may not have whoop. Convalescence may require many weeks.	CASE: Exclude from school until a physician advises return (usually 5 days after initiation of appropriate antibiotic therapy). Discuss with your local health department. CONTACTS: Exclude on first indication of symptoms.
Ringworm of the Body (Tinea Corporis)	Unknown.	By contact with lesions of an infected person, animals or fomites.	Circular well-demarcated lesion that can involve face, trunk, or limbs. Itching is common.	CASE: Exclusion from school not indicated as long as lesions are covered or child is receiving treatment. CONTACTS: School exclusion is not indicated.
Rubella* (German Measles)	From 12 to 23 days, usually 14 to 17 days.	By direct contact or droplet spread of nasopharyngeal secretions of an infected person.	Mild symptoms: slight fever, rash of variable character lasting about 3 days; enlarged head and neck lymph glands common. Joint pain may occur, especially in older children and adults. Communicable for 7 days before onset of rash and at least 7 days thereafter.	CASE: Exclude from school for 7 days after onset of rash. Avoid exposure to women in early pregnancy. Check immunization records of all students. Discuss with your local health department. CONTACTS: Discuss with your local health department; unimmunized contacts may need to be excluded. Those who are pregnant and not immunized should be urged to seek medical advice.

NOTE: THESE RECOMMENDATIONS APPLY ONLY TO SCHOOL-AGED CHILDREN. A more complete discussion of these conditions and other communicable diseases may be found in *Control of Communicable Diseases Manual* (2008) published by the American Public Health Association and the 2009 *Report of the Committee on Infectious Diseases (The Red Book)* published by the American Academy of Pediatrics. Additional information and consultation are also available through your local health department.

* Officially reportable in Virginia to the local health department. All outbreaks and unusual occurrences of disease are also reportable.

DISEASE	INCUBATION PERIOD	TRANSMISSION	COMMON SYMPTOMS	RECOMMENDATIONS
Scabies	Persons without previous exposure: 4 to 6 weeks. Previously infested and sensitized: 1-4 days after re-exposure.	By direct skin-to-skin contact.	Begins as itchy raised areas around finger webs, wrists, elbows, armpits, belt-line, and/or genitalia. Extensive scratching often results in secondary infection.	<p>CASE: Exclude from school until 24 hours of appropriate treatment has been completed.</p> <p>CONTACTS: Inspect for evidence of infestation and refer for treatment if necessary. School exclusion is not indicated in the absence of infestation.</p>
Streptococcal Diseases (Including Impetigo, Scarlet Fever, and Strep* Throat)	Variable, often 2-5 days, may be longer.	By direct contact with infected persons and carriers or by contact with their respiratory droplets.	<p>Impetigo: Multiple skin lesions usually of exposed area (e.g., elbows, legs and knees), but may involve any area. Lesions vary in size and shape, and begin as blisters, which rapidly mature into brown crusts on a reddened base. Healing from center outward produces circular areas, which may resemble ringworm.</p> <p>Scarlet Fever: Fever, sore throat, exudative tonsillitis or pharyngitis. Sandpaper-like rash appears most often on neck, chest, and skin folds of arms, elbows, groin, and inner aspect of thighs.</p> <p>*"Strep" throat: Sudden onset of fever, sore throat, exudative tonsillitis or pharyngitis, and enlarged lymph nodes. Symptoms may be absent in some cases.</p>	<p>CASE: Exclude from school until lesions are healed or until 24 hours of antibiotic treatment has been completed.</p> <p>CONTACTS: Exclusion from school not indicated. Observe carefully for symptoms.</p> <p>CASE: Exclude from school during acute illness. Non-communicable after 24 hours of appropriate drug therapy.</p> <p>CONTACTS: Exclude on first indication of symptoms. Culturing of school contacts and treatment of carriers not usually indicated.</p> <p>CASE: Exclude from school until 24 hours of antibiotic treatment has been completed.</p> <p>CONTACTS: Exclusion from school not indicated. Observe carefully for symptoms.</p>

NOTE: THESE RECOMMENDATIONS APPLY ONLY TO SCHOOL-AGED CHILDREN - A more complete discussion of these conditions and other communicable diseases may be found in *Control of Communicable Diseases Manual* (2009) published by the American Public Health Association and the *2009 Report of the Committee on Infectious Diseases (The Red Book)* published by the American Academy of Pediatrics. Additional information and consultation are also available through your local health department.

* Officially reportable in Virginia to the local health department. All outbreaks and unusual occurrences of disease are also reportable.

MAIN	GRAFTON	Policy and Procedures
Name of Policy:	Protection from Harm	
Policy Number:	CR 50	
Section:	Client Rights	
Policy Owner:	Director of Quality Assurance and Compliance	
Approval/Revision Date:	3/28/2018; 4/24/2017; 3/01/2008; 3/17/2003	

Policy:	<p>All Grafton employees are responsible for the proper treatment of individuals receiving services. Under no condition may any individual served by Grafton be abused, neglected, or exploited. Any employee found to have mistreated, neglected, abused, or exploited a client will be subject to disciplinary action, up to and including termination.</p> <p>As a condition of employment, any employee who knows of or has reason to believe that an individual receiving services may have been abused, neglected, or exploited, will immediately report this information directly to the Quality Assurance (QA) Supervisor or to the on-site/on-call program manager. This requirement also applies to consultants, student interns, and volunteers.</p> <p>Grafton's Quality Assurance Department is identified as the internal central contact for filing Grafton-related abuse/neglect allegation reports. However, an employee retains the right to make such reports directly to the Department of Social Services (DSS) and may freely do so.</p> <p>The QA Supervisor and/or program manager will immediately take necessary steps to assure the safety of individuals receiving services.</p> <p>An abuse or neglect allegation from parents or other persons not employed by Grafton should be forwarded to the QA Supervisor who will take appropriate follow-up action.</p> <p>Employees' Interactions with Clients:</p> <ul style="list-style-type: none"> A. Staff should avoid being alone with individuals receiving services except when required. For example, staff should not go behind closed doors with an individual supported or out of sight of other adults, when possible. B. Roughhousing is not permitted. Prohibited activities include tackle games, games that include exchanging slaps (does not include use of "high five" reinforcement), pinches, excessive tickling and wrestling. C. Staff must use only age appropriate physical touch with individuals supported by Grafton. Consideration should be given to the age of the individual before offering hugs. Exchanging notes or letters with individuals receiving services should be avoided as well as any physical touch that might be misinterpreted.
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	<ul style="list-style-type: none"> D. When working with students, staff must always maintain authority as the in-charge adult. When working with adults, staff is expected to maintain a professional supporting relationship. E. Staff persons are always responsible for behavioral intervention. Individuals receiving services may never be the manager of another individual's behavior. F. Only Grafton-approved behavior intervention techniques may be used when attempting to assist an individual with gaining behavioral control. G. The use of manual prompts should be restricted to that which is absolutely necessary. H. When staff are at risk of losing their temper, they are responsible for letting another staff person know. At these times, staff should walk away if necessary. Cursing in front of individuals receiving services is never acceptable. An employee must never touch an individual served when the employee himself/herself is out of emotional control. I. If another staff person tells an employee to take a break, they must do so without question. <p>Potential Outcomes of Investigations:</p> <ul style="list-style-type: none"> A. Because of Grafton's moral and legal responsibility for the well-being of individuals with special needs and because of the importance of preserving a constructive rather than destructive milieu, the organization reserves the right to suspend an employee during the investigation and/or dismiss an employee under such an allegation without conclusive evidence, if this is not obtainable. Such a finding will be noted in the QA Supervisor's summary report of the investigation. B. An employee may be suspended by an executive manager, director or administrator, or by the supervisor or on-duty manager. The QA Supervisor may recommend suspension of the employee to any of the individuals listed above. C. Any employee who commits a major violation will be dismissed, the date of dismissal subject to consideration of the welfare of the individuals receiving services and any mitigating behavior on the part of the employee. D. Any employee with a minor violation will have personnel action as determined by their direct supervisor and Human Resources Manager. Examples of personnel action include probation, leave without pay, re-training, or change in location of job assignment. Continued minor violations by an employee may result in termination.
<p>Procedure:</p>	<p>Reporting The reporting procedures are designed to maximize the confidentiality of those persons reporting such incidents.</p> <p>Persons observing acts identified as mistreatment, abuse or neglect, or receiving information indicating the possible mistreatment, abuse or neglect of a client must immediately contact the QA Supervisor in person or by phone. If the QA Supervisor</p>

is not available, the staff must immediately contact the on duty or on-call program manager. Any employee may call DSS directly to make a report of abuse or neglect, if they choose.

The program manager who receives a complaint will immediately contact the QA Supervisor and follow the *Serious Incidents* policy and procedure.

When there is reason to suspect abuse or neglect as defined in state law and regulations, DSS in the area of the alleged abuse or neglect must be notified within 24 hours. The State Abuse Hotline may be contacted if the local department is not to be opened within 24 hours. The QA Supervisor or the program manager receiving the report will make this notification.

For programs licensed by the Virginia Department of Behavioral Health and Developmental Services (DBHDS), notifications of allegations will be made to DBHDS in accordance with the Department's reporting protocol. Allegations involving one of Grafton's private day schools will be reported to the Virginia Department of Education. These notifications are made immediately, but no later than 24 hours.

The allegation is not to be discussed with individuals other than those identified in these policies and direct support professionals should not attempt to interview the client for additional information.

If the report of alleged abuse or neglect involves an individual other than a Grafton employee, the information will be turned over to DSS in the area the alleged abuse or neglect occurred. Grafton will provide assistance to DSS as requested. Additional notifications to the client's family/guardian are made dependent on consultation with DSS.

Investigations

External agencies may choose to conduct investigations into an allegation. Grafton will work collaboratively with external agencies during this process. An internal investigation will always be conducted following a Grafton-related abuse or neglect allegation. Grafton will take steps necessary to ensure the health, safety and welfare of clients, including the client alleged to be a victim of abuse or neglect.

The employee named in an abuse or neglect report may be asked by a program manager to leave work immediately, if on duty. The employee will receive general information related to the complaint at that time. The employee's supervisor will contact the employee with more information or to arrange for an interview. There will be opportunities for the involved staff to describe events and discuss information regarding the complaint.

If the allegation leads to an investigation by the Department of Social Services, the

employee named in the allegation may be placed on “investigative suspension”. This step is not intended to be a presumption of guilt or a punitive action. At this point, the complaint is an allegation that must be investigated. Investigative suspension is a safeguard for the employee, to prevent additional allegations of abuse, neglect or intimidation. The employee is paid during a period of investigative suspension.

If the allegation does not lead to an investigation by DSS, the individual's supervisor or on-call manager will determine staff action, including suspension (with or without pay) or re-assignment during the investigation.

During an investigation, the QA Supervisor will gather documentation, as applicable, including: daily narrative notes, serious incident notification forms, medical information, telephone call records, work schedules, client face sheet information, and pertinent personnel information. Interviews will be conducted with employees and individuals, as relevant to the case. Additional information may be gathered, as needed, for any investigation.

The QA Supervisor will determine the date, approximate time of the alleged violation, name of individual(s) involved, and the name of the employee(s) involved based on information gathered.

In the case of suspected sexual abuse, DSS typically requires that a physical examination be scheduled, as soon as possible.

In the case of an allegation of physical mistreatment, abuse or neglect, a nurse or designated manager will examine the individual for physical marks or signs, as soon as possible, and refer the individual for an additional medical examination, as required. Findings of this examination will be documented.

Requested internal documentation will be made available to the DSS investigator, the licensing reviewer, and the Human Rights Advocate. The name of the person making the initial report will be kept confidential except to those directly responsible for the investigation.

Within 10 working days of initiation of an investigation, the QA Supervisor will provide a written report to the Human Rights Advocate via the DBHDS web-based reporting application and to the Director, to include whether abuse, neglect, or exploitation occurred, the type of abuse, and whether the act resulted in injury.

Abuse/neglect reports are reviewed by different agencies for different purposes. The Virginia Department of Education and Virginia DBHDS review a report from the perspective of compliance with licensure standards. The Human Rights Advocate may investigate to ensure an individual's rights were protected. Internally, the allegation is reviewed for the above purposes, as well as to ensure policies and

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	<p>procedures were followed, and to recommend changes, as needed, to ensure proper treatment of all our individuals. DSS investigates to determine specifically if abuse or neglect occurred in accordance with their Department definitions and policies.</p> <p>If Grafton finds sufficient evidence of abuse, the employee will be terminated. Disciplinary actions will be dependent on information gathered during the investigation, even if the DSS disposition is unfounded. For example, an employee's actions may not meet the DSS definition for abuse, but may clearly violate Grafton's policies on the treatment of individuals. Documentation and reporting procedures, maintenance of confidentiality, use of approved behavioral management techniques and other treatment issues are examples of other aspects of an investigation which may lead to employee disciplinary actions.</p>
Referenced Policies:	RM 10: Serious Incidents
Referenced Forms:	N/A

Richmond Educational Objectives and Program Description

By using a synergistic approach, Grafton Integrated Health Network – Richmond Region is committed to:

1. delivering researched based, data driven methodologies in order to support individuals with Intellectual Disabilities, Developmental Disabilities, Autism, along with co-existing physical, medical, sensory or emotional disabilities .
2. providing a multi-disciplinary continuum of care that will ensure that those we serve achieve maximum independence and the highest level of autonomy.
3. providing each student with the skills necessary to increase their capabilities through a supportive, collaborative, and therapeutic environment.

In order to accomplish these objectives each student will receive instruction through an Integrated Program of Studies. This program exists for those students whose IEPs indicates that they cannot meet, in full, the requirements of the Virginia Standards of Learning (SOL's). The students in this program participate in the Virginia Alternate Assessment Program (VAAP) or the alternate assessment program of their placing state. This program is designed for the student who needs a highly specialized learning environment in functional life-skills. The program of studies will include skill development in communication, daily living and occupational preparation. Blended into the program of studies are the academic areas of English/reading, mathematics, history/social science, and science, which are based on the aligned state standards of learning. Students participate in learning with emphasis on communication skills in functional context. The student may spend a portion of each school day in career and technology exploration, assessment or training as called for in the IEP. The areas covered include job exploration, a career and technical education assessment (typically situational), and job training via an individualized task analysis for each job skill set. Training areas are tracked according to labor standards and students who participate are paid a stipend based on a predetermined set of work skills and work behaviors. These work experiences may be in school or community-based. The completion of this program and the requirements of the student's Individualized Education Program (IEP) results in the issuance of a Certificate of Applied Studies or Certificate of Completion.

GRAFTON		Policy and Procedures
Name of Policy:	Nutrition and Physical Activity	
Policy Number:		
Policy Manual Section:	Medical/Nutrition/Wellness	
Policy Owner:	Director of Quality Assurance and Compliance	
Approval/Revision Date:		

Definitions:	
Policy:	It is the policy of Grafton that the employees are committed to the optimal development of every student by providing the opportunity to achieve personal, academic, developmental, and social success, through creating positive, safe, and health-promoting learning environments at every level, in every setting, throughout the school year. All students will have the opportunity to practice healthy eating and physical activity behaviors throughout the school day while Grafton ensures commercial distractions are minimized.
Procedure:	<ul style="list-style-type: none"> ▪ Staff will provide the students access to healthy foods throughout the school day—both through reimbursable school meals and other foods available throughout the school campus—in accordance with Federal and state nutrition standards; ▪ Staff will provide quality nutrition education that helps students develop lifelong healthy eating behaviors; ▪ Staff will provide the students with opportunities to be physically active before, during, and after school; ▪ Staff will engage in nutrition and physical activity promotion and other activities that promote student wellness; ▪ School staff are encouraged and supported to practice healthy nutrition and physical activity behaviors in and out of school; ▪ The residential community is engaged in supporting the work of the academic community in creating continuity between school and other settings for students and staff to practice lifelong healthy habits; and ▪ An infrastructure for the management, oversight, implementation, communication about, and monitoring of the policy and its established goals and objectives will be maintained through the School Wellness Committee; ▪ The School Wellness Committee will develop and maintain a plan for implementation to manage and coordinate the execution of this wellness policy. This plan will be modeled after the <u>Model Local School Wellness Policy</u>, developed by the Alliance for a Healthier Generation, has been thoroughly reviewed by the USDA, Food and Nutrition Service and is in compliance with the statutory requirements for local school wellness policies, as per the proposed regulation, “Local School Wellness Policy Implementation Under the

	<p>Healthy, Hunger-Free Kids Act of 2010.”</p> <ul style="list-style-type: none"> ▪ Grafton will retain records to document compliance with the requirements of the wellness policy at the Berryville Campus in the Nutrition Office and/or on Grafton's shared drive. Documentation maintained in this location will include but will not be limited to: <ul style="list-style-type: none"> ○ The written wellness policy; ○ Documentation demonstrating compliance with community involvement requirements, including (1) Efforts to actively solicit Grafton Wellness Committee membership from the required stakeholder groups; and (2) These groups' participation in the development, implementation, and periodic review and update of the wellness policy; ○ Documentation of annual policy progress reports for each school; and ○ Documentation of the triennial assessment* of the policy for each school; ○ Documentation demonstrating compliance with public notification requirements, including: (1) Methods by which the wellness policy, annual progress reports, and triennial assessments are made available to the public; and (2) Efforts to actively notify families about the availability of wellness policy. ▪ Grafton will offer school meals through the NSLP and SBP programs, and After School Snack program. All meals: <ul style="list-style-type: none"> • Are accessible to all students; • Are appealing and attractive to children; • Are served in clean and pleasant settings; • Meet or exceed current nutrition requirements established by local, state, and Federal statutes and regulations. (Grafton offers reimbursable school meals that meet USDA Nutrition Standards.) <ul style="list-style-type: none"> ○ Promote healthy food and beverage choices
<p>Referenced Policies:</p>	<p>http://www.fns.usda.gov/school-meals/nutrition-standards-school-meals</p> <p>https://www.healthiergeneration.org/</p>
<p>Referenced Form(s):</p>	



Education Calendar July 1, 2021 - June 30, 2022

Richmond Campus
4100 Price Club Blvd.
Midlothian, VA 23112
804-674-8888

	No School, Principal, Asst-Principal & Teacher Break Day
	No School, Teacher Break Day
	No School, Acad. Break, Teacher Workday
	Early Dismissal Teacher Workday

July 2021							July, 2021:	January, 2022:	January 2022						
S	M	T	W	T	F	S			S	M	T	W	T	F	S
				1	2	3	July 1st-2nd: No School, Teacher Break Day	January 17th: No School, Teacher Break Day							1
4	5	6	7	8	9	10	July 5th-9th: No School, Teacher Break Day	January 19th: Early Dismissal	2	3	4	5	6	7	8
11	12	13	14	15	16	17	July 14th: Early Dismissal		9	10	11	12	13	14	15
18	19	20	21	22	23	24			16	17	18	19	20	21	22
25	26	27	28	29	30	31			23	24	25	26	27	28	29
									30	31					

August 2021							August, 2021:	February, 2022:	February 2022						
S	M	T	W	T	F	S			S	M	T	W	T	F	S
1	2	3	4	5	6	7	August 9th-13th: No School, Teacher Break Day	February 11th: No School, Teacher Work Day			1	2	3	4	5
8	9	10	11	12	13	14	August 18th: Early Dismissal	February 16th: Early Dismissal	6	7	8	9	10	11	12
15	16	17	18	19	20	21		February 21st: No School, Teacher Break Day	13	14	15	16	17	18	19
22	23	24	25	26	27	28			20	21	22	23	24	25	26
29	30	31							27	28					

September 2021							September, 2021:	March, 2022:	March 2022						
S	M	T	W	T	F	S			S	M	T	W	T	F	S
			1	2	3	4	September 6th: No School, Teacher Break Day	March 3rd-4th: No School, Teacher Work Day			1	2	3	4	5
5	6	7	8	9	10	11	September 15th: Early Dismissal	March 16th: Early Dismissal	6	7	8	9	10	11	12
12	13	14	15	16	17	18			13	14	15	16	17	18	19
19	20	21	22	23	24	25			20	21	22	23	24	25	26
26	27	28	29	30					27	28	29	30	31		

October 2021							October, 2021:	April, 2022:	April 2022						
S	M	T	W	T	F	S			S	M	T	W	T	F	S
						1	October 20th: Early Dismissal	April 4th-8th: No School, Teacher Break Day							1
3	4	5	6	7	8	9		April 20th: Early Dismissal	3	4	5	6	7	8	9
10	11	12	13	14	15	16			10	11	12	13	14	15	16
17	18	19	20	21	22	23			17	18	19	20	21	22	23
24	25	26	27	28	29	30			24	25	26	27	28	29	30
31															

November 2021							November, 2021:	May, 2022:	May 2022						
S	M	T	W	T	F	S			S	M	T	W	T	F	S
	1	2	3	4	5	6	November 17th: Early Dismissal	May 18th: Early Dismissal	1	2	3	4	5	6	7
7	8	9	10	11	12	13	November 24th-26th: No School, Teacher Break Day	May 30th: No School, Teacher Break Day	8	9	10	11	12	13	14
14	15	16	17	18	19	20			15	16	17	18	19	20	21
21	22	23	24	25	26	27			22	23	24	25	26	27	28
28	29	30							29	30	31				

December 2021							December, 2021:	June, 2022:	June 2022							
S	M	T	W	T	F	S			S	M	T	W	T	F	S	
			1	2	3	4	December 15th: Early Dismissal	June 15th: Early Dismissal					1	2	3	4
5	6	7	8	9	10	11	December 21st-31st: No School, Teacher Break Day	June 29th-30th: No School, Teacher Work Day	5	6	7	8	9	10	11	
12	13	14	15	16	17	18			12	13	14	15	16	17	18	
19	20	21	22	23	24	25			19	20	21	22	23	24	25	
26	27	28	29	30	31				26	27	28	29	30			