



Dear Parent/Guardian:

We would like to take this opportunity to extend a warm welcome to you and your child. We hope that you will review the documents in this folder and take a tour of our school.

As you tour our school we hope that you will get a sense of the compassion, knowledge and experience that our team members possess. The team members at LEAD are excited to serve your child's individual needs.

Our corporate vision at LEAD is to cultivate potential and create opportunities for your child. The process of educating a child is a monumental task and it requires a unified approach from all team members. We see parents and guardians as an integral part of the educational team. We look forward to a collaborative and positive working relationship with you this year!

If you have any questions during your child's enrollment process please do not hesitate to ask. One of our team members will gladly assist you.

You can also check out our website for answers to our most frequently asked questions and for updates on current events! www.leadctr.com

Sincerely,

Chrissy Fukushima, M. Ed.
Executive Director, The LEAD Center, Ltd.



APPLICATION FOR ENROLLMENT

2021 -2022 | STUDENT INFORMATION

Student Information

| | | | |
|-----------------|-----------------|------------------|----------------|
| Student Name | Enrollment Date | DOB | Date of I.E.P. |
| | | | |
| Previous School | Grade | Eligibility Date | |
| | | | |
| L.E.A. | | | |

#1 Parent or Guardian Information

| | | | |
|-------------------------|--------------------------------|------------|------------|
| Name of Parent/Guardian | E-mail Address (Print clearly) | | |
| | | | |
| Address | Home Phone | Cell Phone | Work Phone |
| | | | |

#2 Parent or Guardian Information

| | | | |
|-------------------------|--------------------------------|------------|------------|
| Name of Parent/Guardian | E-mail Address (Print clearly) | | |
| | | | |
| Address | Home Phone | Cell Phone | Work Phone |
| | | | |

#3 EMERGENCY CONTACT – *Must be completed and must be different from primary contact info*

| | | | |
|---------------------------|--------------------------------|------------|------------|
| Name of Emergency Contact | E-mail Address (Print clearly) | | |
| | | | |
| Address | Home Phone | Cell Phone | Work Phone |
| | | | |

To be completed by the parent.



APPLICATION FOR ENROLLMENT

Others living in your household

| Name | Relationship | Age | Grade |
|------|--------------|-----|-------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| Please list below any allergies: |
|----------------------------------|
| |
| |
| |
| |
| |
| |
| |

| Please list all medications: | Dosage: | Frequency: |
|------------------------------|---------|------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

| Allergy Notes: Please list all allergy reactions and anticipated severity. Also, note if precautions need to be taken in the classroom |
|--|
| |
| |
| |
| |
| |

I have given a copy of my child's current physical and immunization record to The LEAD Center.

Yes ☐ No ☐

If no is checked, I will provide The LEAD Center with a current physical and immunization record by: ____/____/____.

Parent/Guardian signature: _____ Date: _____

To be completed by the parent.



APPLICATION FOR ENROLLMENT

AUTHORIZATION TO PICK UP FROM SCHOOL

Please list below all people who are authorized to pick up your child from school. You may add or remove anyone to the list by providing The LEAD Center a written request at any time.

****Your child will not be released to anyone that is not listed on this form unless a release of information is on file for a Counselor, Mentor, In-home worker, Etc.**

| Name | Relationship to student | Phone Number (required) |
|------|-------------------------|-------------------------|
| | | |
| | | |
| | | |
| | | |
| | | |

I give permission for the above named to pick up my child from The LEAD Center.

Parent Name: _____ Signature: _____

Date: _____

622A South 6th Avenue Hopewell, VA 23860 Voice: 804-452-3730 Fax: 804-452-3725

To be completed by the parent.



CONSENT TO RECEIVE SERVICES

| Student Name | Parent/Guardian | Enrollment Date |
|--------------|-----------------|-----------------|
| | | |

Please read each statement below, then **INITIAL EACH BOX** to give consent to receive services.

☐

I give permission for my child to be enrolled at The LEAD Center, Ltd.

☐

I give permission to The LEAD Center, Ltd. to provide the necessary medical intervention should my child become ill or injured and require emergency medical attention. I understand that I will be notified immediately. I will notify the staff of any illness or injury that may affect my child's ability to participate in regular school activities or that may interfere with the staff's ability to intervene physically if needed.

☐

A Medication Administration Form must be signed by the guardian and the prescribing physician for each medication. All Medications must be brought to school by the parent/guardian in a current, pharmacy prepared bottle, which states the name of the medication, the dosage, and the time to be administered. I, as the parent/guardian will be responsible for informing The LEAD Center, Ltd. of any changes in my child's medication. In the event of changes, a new Medication Administration Form must be signed.

☐

I have notified The LEAD Center, Ltd. of any known allergies that my child has by completing the allergy and food intolerance form.

☐

I give The LEAD Center, Ltd. permission to administer the following over the counter medications at the recommended dosage.

☐

Tylenol

☐

Roloids / Tums

☐

Halls (cough drops)

☐

Visine (eye drops)

☐

Pepto Bismol

☐

Neosporin (Antibiotic ointment)

☐

I give permission for my child to participate in activities that require him/her to be transported in The LEAD Center, Ltd. provided transportation vehicles and commercially

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provided vehicles. I understand that a separate permission slip will be provided before each field trip.

☐ The LEAD Center, Ltd reserves the right to search all individuals at anytime within our program if suspicion arises that any items are being carried by a registered student that are prohibited. Additionally, a “pat down” search and a search with a metal detector are completed on every student every morning. Female students will be searched by a female staff member and male students will be searched by a male staff member. Shoes will be removed and searched separately. At this time any items that are considered contraband are confiscated.

☐ I give permission for my child to be searched either randomly or specifically.

☐ I give permission for my child to be photographed for the yearbook and to be photographed, video recorded or otherwise electronically recorded in the course of evaluation or for training purposes only. Any other use will require a separate permission slip.

☐ All LEAD Center, Ltd. staff are trained in the Crisis Wave Behavioral Management System. The Crisis Wave model explains how difficult behaviors begin, escalate into a crisis and then de-escalate. It teaches diffusion techniques and skills to be used before the physical restraint is applied. Should physical restraint be necessary, these techniques are designed to adhere to the principle of minimum force necessary, specifically when a student moves to the “crisis stage.” The “crisis stage” refers to when a student is committed to “fleeing or attacking” which is marked by “fighting with peers and /or staff, destroying property, continuously cursing/yelling, self-mutilation, leaving the building or assigned area or other aggressive acts.” In this stage, the use of a physical restraint will occur to transport the student to a secured time out until they can regain control. The restraint continuum includes a physical escort, passive restraint and/or full restraint. The parent/guardian will receive contact informing them of when their child has been restrained and the circumstances surrounding the restraint.

☐ In the event that my child is experiencing serious stress, physically out of control behavior, or is threatening to do bodily harm to himself/herself or others, or is threatening to run away, or is threatening to do property damage, or otherwise creating an unsafe situation within the program as determined by The LEAD Center, Ltd., the use of time out, secured time out (door closed and secured) and/or physical restraint maybe used in order to maintain the safety of the child or other students or staff at The LEAD Center, Ltd. I understand that the staff at The LEAD Center, Ltd. is trained and I give permission to use time out, secured time out, and/or physical restraint as needed.

☐ I give permission for The LEAD Center, Ltd. personnel to access my child's student records in the performance of their job(s). I understand that all staff at The LEAD Center, Ltd. must sign a letter of confidentiality prior to accessing these files.

Statements of Parental Agreement

☐ In the event that my child's bodily fluids should come in contact with the bodily fluids of any staff or student at The LEAD Center, Ltd. a blood profile will be ordered for my child to determine the possibility of transfer of any infections and I will be responsible for the cost of the test.

☐ I have been given a copy of the parent/student handbook. The specific information related to the behavioral support program provided at The LEAD Center, Ltd. has been reviewed with me.

☐ I have been given a copy of the COVID-19 Return to School Handbook. The handbook includes specific information related to the mitigation protocols in place to reduce the spread of COVID-19 at The LEAD Center, Ltd. I have reviewed the contents of the handbook and agree to allow my child to receive in-person instruction within the guidelines stated in the handbook.

| Parent/Guardian Name Print | Parent/Guardian Signature | Date |
|----------------------------|---------------------------|------|
| | | |
| LEA/Designee Name Print | LEA/Designee Signature | Date |
| | | |
| Student Name Print | Student Signature | Date |
| | | |



INTAKE INFORMATION

2021-2022

| | |
|-------------------------------|-----------------|
| Date | Locality |
| | |
| Student Name | |
| Person completing form | |

| Previous School Placement | | | |
|---------------------------|--|--------------------------|--|
| School Name | | School Name | |
| Reason Discharged | | Reason Discharged | |

| History with Corrections | | | |
|--------------------------|-------------|--|----------------|
| Founded Charges | | | |
| Pending Charges | | | |
| Probation Officer | Name | | Phone # |

| History of Mental Health Issues (Psychiatric Hospitalization (s)) | | | | | | |
|---|-------------------|----------------------------|-------------------|---------------|-------------------|---------------|
| Hospital Name | Date | Discharge Diagnosis | | | | |
| | | | | | | |
| | | | | | | |
| Medications | Medication | Dosage | Medication | Dosage | Medication | Dosage |
| Yes No | | | | | | |

| Check all that are applicable: | | | |
|-------------------------------------|--|--------------------------|------------------------|
| Sex/Assault Perpetrator | | Fire Setting | Intended Victim |
| Reactive Attachment Disorder | | Suicide Ideation | Runaway |
| Victim Sex Assault | | Homicide Ideation | other |

| History with Social Services (check all that apply) | | | |
|---|--|-----------------------------|--|
| | | Explanation | |
| Foster Care | | | |
| Removal From Family | | | |
| SSI Eligible | | Receiving Benefits | |
| CPS Complaint Filed By | | If founded explain results: | |
| Founded | | | |

To be completed by the parent.

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Revised: 7/17/17



The LEAD Center, Ltd.

Photograph & Video Release Form

I hereby authorize and grant permission to The LEAD Center, Ltd., and its officers, employees, subsidiaries, licensees, successors and assigns (collectively "LEAD Center"), to use the following personal information: (1) my child's picture – including photographic, motion picture, video and electronic images, and (2) my child's voice – including sound and video recordings. I agree that such pictures and voice recordings may be edited as desired, and may be used in whole or in part in any print, audio, and/or audio-visual media. This permission extends to all languages, media, markets and formats now known or hereafter devised. I understand this permission signifies that photographic or video recordings of my child may be publicly displayed via the Internet or in public settings. This permission shall continue in perpetuity.

I understand that such photographic, audio or video recordings may be used for any or all of the following purposes: marketing and promotions; conference presentations; educational presentations or courses; informational presentations; on-line educational courses; or educational or training videos. I hereby release any and all claims against LEAD Center arising from or relating to these approved uses.

I hereby waive the right to receive any payment or compensation from LEAD Center's use of any of the materials described above for any of the purposes authorized by this release. I also waive the right to inspect or approve any of the images or sounds that may be used pursuant to this release.

By signing this form I acknowledge that I have completely read and fully understand the above release and agree to be bound thereby. I attest that I am the parent or legal guardian of the child listed below and that I have the authority to authorize LEAD Center to use the materials described above for the purposes listed above.

Name of Child: _____

Address: _____

City, State, ZIP: _____

Parent(s) or Legal Guardian(s):

Print Name: _____

Signature: _____ Date: _____

Print Name: _____

Signature: _____ Date: _____



Medication Release Form

I do give permission for an authorized staff person at The L.E.A.D. Center to administer the following medication(s) to my child during school hours:

Student's name: _____

| Name of medication(s) | Dosage | Time Administered |
|-----------------------|--------|-------------------|
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |
| _____ | _____ | _____ |

Allergies: _____

All medication must be brought to school by the parent/guardian in the current pharmacy prepared bottle, which states the name of the medication, the dosage, and the time to be administered. I, as the parent/guardian will be responsible for informing the Center of any changes in my child's medication. In the event of changes, new administration of medication forms will be designed.

Physician's Signature: _____ Date _____

Parent/Guardian Signature _____ Date _____

When the medication is brought to school by a parent, the supply of the medication must be verified (counted/measured). If possible, the supply of the medication should be verified in the presence of the parent/witness.

***No medication will be administered without this form completed in its entirety.

Rev. 8/18/2016

Food Allergy/ Intolerance Form

Student Name: _____ **School:** _____ **Date:** _____

Completed by: _____ **Relationship to student:** _____

If we have further questions about this allergy how can we contact you:

Please provide as much detail as possible when completing this form. **An allergy** is an immune system response to a substance known as an Allergen. For example, allergens can be foods, insects, medication and plants. **A food intolerance** is an unpleasant digestive response to a food.

| Please list any known allergies: | What is the student's reaction to the allergen(s)? | What treatment should be provided if the child is exposed to the allergen? | Can the student touch the allergen? | Can the student ingest the allergen? | Can the student eat items processed in same plants as allergens? |
|---|---|---|--|---|---|
| | | | Yes No | Yes No | Yes No |
| | | | Yes No | Yes No | Yes No |
| | | | Yes No | Yes No | Yes No |

Any Epi- pens, inhalers or emergency medication will be supplied by the parent and medication forms will need to be signed by all required parties.

Parent Initials: _____

Food Allergy/ Intolerance Form

| Please list any known food intolerances: | What is the student's reaction to the food if ingested? | What treatment should be provided if the child is exposed to the food? | Can the student touch the food? | Can the student ingest the food? | Can the student eat items processed in same plants as food intolerance? |
|--|---|--|---------------------------------|----------------------------------|---|
| | | | Yes No | Yes No | Yes No |
| | | | Yes No | Yes No | Yes No |
| | | | Yes No | Yes No | Yes No |

Any Epi- pens, inhalers or emergency medication will be supplied by the parent and medication forms will need to be signed by all required parties.

Parent Initials: _____

Please list any other known food intolerances and provide information as to how the intolerance is managed.

Parent Signature: _____

Date: _____

*Please attach allergy plan from doctor to this form, if available.



**THE
LEAD
CENTER**

RELEASE OF INFORMATION

TO WHOM IT MAY CONCERN:

| REGARDING: (Student Name) | Birth Date |
|---------------------------|------------|
| | |

I _____ hereby give permission to The LEAD Center, Ltd. to
_____ Release and/or _____ Obtain and/or from:

| Agency | Name | | |
|---------------|------|-------------|-----|
| | | | |
| Address | City | State | ZIP |
| | | | |
| Phone number: | | Fax number: | |

This information is being released and/or obtained for the purposes of educational/behavioral planning.

INFORMATION REQUESTED

| | | | |
|-------|------------------------------|--|-------------------|
| | IEP | | Test Scores |
| | Eligibility Meeting Minutes | | VAAP COE |
| | Social History | | Grade Reports |
| | Psychological Evaluation | | Transcripts |
| | Educational Evaluation | | Progress Notes |
| | Immunization Record | | Counseling Notes |
| | Physical | | Discharge Summary |
| | Course List for Current Year | | History |
| OTHER | | | |
| | | | |
| | | | |

| | Signature | Date |
|-----------------|-----------|------|
| Parent/Guardian | | |
| Witness | | |

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RELEASE OF INFORMATION

TO WHOM IT MAY CONCERN:

| REGARDING: (Student Name) | Birth Date |
|---------------------------|------------|
| | |

I _____ hereby give permission to The LEAD Center, Ltd. to
 _____ Release and/or _____ Obtain and/or from:

| Agency | Name | | |
|---------------|------|-------------|-----|
| | | | |
| Address | City | State | ZIP |
| | | | |
| Phone number: | | Fax number: | |

This information is being released and/or obtained for the purposes of educational/behavioral planning.

INFORMATION REQUESTED

| | | | |
|-------|------------------------|--|---------------------|
| | Progress Notes | | Physical |
| | Educational Evaluation | | Immunization Record |
| | Social History | | Counseling Notes |
| | Psychological | | IEP |
| | History | | Grade Reports |
| | Test Scores | | Discharge Summary |
| | Transcripts | | |
| OTHER | | | |
| | | | |
| | | | |

| | Signature | Date |
|-----------------|-----------|------|
| Parent/Guardian | | |
| Witness | | |

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POLICY AND PROCEDURES FOR MANAGING BEHAVIORS

Student folder copy.

Notification Process

Under State regulation and guidelines this policy is to be reviewed and discussed to the parent's satisfaction at each enrollment and whenever a request by the parent for review is requested.

The following signatures are required:

- Staff
 - Upon acceptance of their application for employment each employee must sign that they have received and reviewed the policy and procedure manual.
- Parent/Guardian
 - Stating that they understand the policy and accept its practice as presented.
- Student
 - As appropriate the student should also sign the documents to witness that the policy has been explained to them
- LEA
 - A representative of the placing agency must also sign this document

Signatures:

I have reviewed this document with a TLC staff member and accept it as a condition of my enrollment:

Parent: _____

Student: _____

I have reviewed the policy.

LEA Representative: _____

TECHNOLOGY USER AGREEMENT

Grades 6-12 Student Regulations

Students are expected to:

1. Use the computer for educational purposes only.
2. Use the computer in a manner which does not harm
 - a. People
 - b. Physical equipment, hardware
 - c. Software, operating systems, folders, and files
3. Protect the privacy of self and others by
 - a. Keeping passwords secret
 - b. Respecting the privacy of other students', teachers', and the school system's files.
4. Access Internet sites that are appropriate and avoid sites that
 - a. Are offensive, obscene, libelous, or disruptive or contain inflammatory language or pictures
 - b. Require a fee for access (unless authorized by the school and teacher permission is granted).
5. Use computer resources responsibly by
 - a. Self-limiting use of disk space
 - b. Self-limiting use of printing paper
6. Download materials from the Internet, or copy materials from the network, only as approved by a teacher.
7. Protect the use of the computer for others by never
 - a. Knowingly loading or creating viruses
 - b. Violating copyright laws
 - c. Destroying or deleting other's files, folders or programs.
 - d. Deliberately causing harm to any computer, system, or network
8. Use Odyssey Ware messaging responsibly by
 - a. Using appropriate language and subject matter
9. Protect, for personal safety reasons, your own privacy on the Internet by using first name and last initial unless the teacher-approved activity requires full names. Home telephone numbers, addresses, and other personal information may not be released unless written parental permission is granted.
10. Accept the consequences of improper use of computers that may include loss of Computer privileges and other disciplinary actions.

Acceptable Use of Technology Policy Acknowledgment

I have read The LEAD Center's Parent Student Handbook Acceptable Use policy and I fully understand and agree to abide by its requirements in all respects. Should I violate any aspect of this Policy, I specifically agree that I shall accept and be subject to all ramifications, including but not limited to the loss of access and other privileges.

Student Name _____

School Name _____

Student Signature _____ Date _____

Parent's/Legal Guardian's Signature _____ Date _____

NOTE: Your signature on this acknowledgment is binding and establishes that you understand the terms and conditions of this policy and their significance.

TECHNOLOGY USER AGREEMENT

Grades K-5 Student Regulations

A Good Computer User:

1. Uses the computer with good intentions. Does not use a computer to hurt people or their work.
2. Respects the computer as our school's property. Does not damage the computer or other school community property.
3. Respects the law. Does not download and/or install software, shareware, or freeware unless approved by a teacher and does not violate copyright laws.
4. Practices good computer citizenship. Does not look at, send, or print inappropriate messages or pictures.
5. Respects the environment. Does not waste paper by printing too much.
6. Respects privacy rights. Does not share or use passwords that are not his/her own without a teacher's permission.
7. Respects the rights of others. Does not go into another person's folders, work, or files without permission.
8. Acts responsibly. Tells an adult if his/her computer displays inappropriate material.
9. Accepts responsibility for proper computer use. Misuse of the computer can result in loss of computer privileges and other punishments.

I agree to be a good computer user!

Student Name

Student Signature

Date

I expect my student to be a good computer user as defined by this document and The LEAD Center's Acceptable Use policy in the student handbook.

Parent's/Legal Guardian's Signature Date



2021 - 2022 School Year

MEMO:

The LEAD Center, Ltd. school hours are 8:20am – 2:35pm.

Student Drop Off: 8:15am

Instruction Begins: 8:20am

Tardy: 8:25am

Student Dismissal: 2:35pm

Student Dismissal on Early Release Days: 11:35am

The LEAD Center, Ltd.

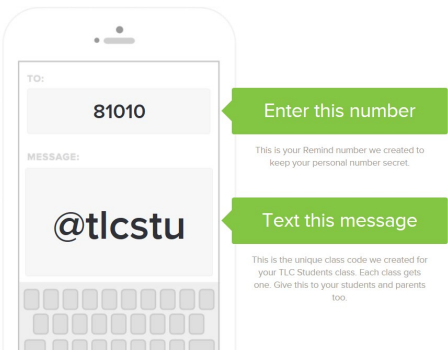
PARENT COMMUNICATION AND NOTIFICATION SYSTEM

Dear Parent or Guardian,

2021 – 2022 School year

This is the method that we use to alert you of upcoming events or reminders for your child. **Please sign up for these messages. And re-sign up if/when your phone number changes.**

We typically follow the Hopewell Public Schools schedules for inclement weather. If we alter the delay or closing information from Hopewell Public Schools, we will notify you via Remind.com.

| Two ways to sign up for weather alerts from LEAD | |
|--|--|
| Option 1 (via cell phone text) | Option 2 (via web & e-mail) |
| <p>Step 1: Send text to 81010 with message @tlcstu</p> <p>Step 2: Verify your number by texting your full name to the verification message.</p>  | <p>Step 1: Enter this web address in your browser: https://www.remind.com/join/tlcstu</p> <p>Step 2: Enter a cell phone # or e-mail address that you would like for notifications to be sent to.</p> <p>Step 3: Verify your e-mail or cell phone number by responding to the initial message and entering your full name in the verification message.</p> |

The LEAD Center Dress Code

2021 - 2022

This information is taken directly from the parent/student handbook. Please note the following:

If dress code is violated student will be offered appropriate clothing or **MUST** be picked up by an authorized person to change clothes at home. This would be considered an unexcused absence from school.

All Students:

- ***Pants must be worn at the waist.*** Pants may not sag and may not show undergarments.
- Students must wear shirts with sleeves (short or long, no sleeveless tank tops).
 - Shirt must completely cover the stomach area.
 - If t-shirts are worn, it cannot depict drugs, alcohol, weapons, war, gang, or religious affiliations.
- Clothes must be clean.
- Absolutely ***no headgear of any kind is allowed in the building at any time.*** (ball caps, do rags, scarves, and bandanas are not allowed). This does not include ponytail holders or headbands as a part of hair care.
- Outer garments (coats, jackets, heavy winter sweaters) must be removed in the building. Students will not be allowed to sit in class with outer garments on. If the student feels that they will be cold in the classroom, they should bring or wear an appropriate indoor sweater.
- Students are allowed to wear small necklaces or bracelets. If earrings are worn, they must be small and tasteful. Large hoops are unacceptable and inappropriate. If earrings are deemed inappropriate, the student will be asked to remove them.
- No sunglasses should be worn in the building.
- If shorts are being worn, they may not be any shorter than two inches above the knee.
- **No paisley/bandana clothing is allowed.**
- Any clothing that is affiliated with gang representation will not be allowed. Administration has full discretion over what is acceptable or not acceptable.
- Pants with excessive slits or rips in them are not acceptable.

Girls

- Female students should not wear skirts or dresses to school.
- All clothes must fit appropriately (no tight pants, dresses, tops; no cleavage should be exposed).
- Leggings/yoga pants should be covered by a long shirt or they shall not be worn.

Graduation Requirements

For more information please visit: <http://www.doe.virginia.gov/instruction/graduation/>

| Standard Diploma Course Requirements (8 VAC 20-131-50.B) | | | |
|--|---|--|---|
| Discipline Area | Standard Credits: effective with first-time ninth graders in 2003-2004 through 2010-2011 | Standard Credits: effective with first-time ninth graders in 2011-2012 and beyond | Verified Credits: effective for first- time ninth graders in 2003-2004 and beyond |
| English | 4 | 4 | 2 |
| Mathematics [Note 1] | 3 | 3 | 1 |
| Laboratory Science [Notes 2 & 6] | 3 | 3 | 1 |
| History & Social Sciences [Notes 3 & 6] | 3 | 3 | 1 |
| Health & Physical Education | 2 | 2 | |
| Fine Arts or Career & Technical Education | 1 | | |
| Foreign Language, Fine Arts or Career & Technical Education [Note 7] | | 2 | |
| Economics and Personal Finance | | 1 | |
| Electives [Note 4] | 6 | 4 | |
| Student Selected Test [Note 5] | | | 1 |
| Total | 22 | 22 | 6 |

| Advanced Studies Diploma Course Requirements (8 VAC 20-131-50.C) | | | |
|--|---|--|---|
| Discipline Area | Standard Credits: effective with first-time ninth graders in 2003-2004 through 2010-2011 | Standard Credits: effective with first-time ninth graders in 2011- 2012 and beyond | Verified Credits - effective with ninth graders in 2000-2001 and beyond |
| English | 4 | 4 | 2 |
| Mathematics [Note 1] | 4 | 4 | 2 |
| Laboratory Science [Note 2] | 4 | 4 | 2 |
| History & Social Sciences [Note 3] | 4 | 4 | 2 |
| Foreign Languages [Note 4] | 3 | 3 | |
| Health & Physical Education | 2 | 2 | |
| Fine Arts or Career & Technical Education | 1 | 1 | |
| Economics and Personal Finance | | 1 | |
| Electives | 2 | 3 | |
| Student Selected Test [Note 5] | | | 1 |
| Total | 24 | 26 | 9 |

| Modified Standard Diploma Course Requirements (8 VAC 20-131-50.D) | |
|---|------------------|
| Discipline Area | Standard Credits |
| English | 4 |
| Mathematics [Note 1] | 3 |
| Laboratory Science [Note 2] | 2 |
| History & Social Sciences [Note 3] | 2 |
| Health & Physical Education | 2 |
| Fine Arts or Career & Technical Education | 1 |
| Electives [Note 4] | 6 |
| Total | 20 |

The LEAD Center, Ltd
Policy Procedures for Managing Behaviors
Parent Review and Authorization



Philosophy

The LEAD Center, Ltd (TLC) is committed to a positive atmosphere of learning both academically and behaviorally. This policy is a description of our methods and boundaries in managing behaviors within our programs to:

- Assist students in managing their own behaviors
- Ensure staff compliance with these guidelines
- Set boundaries of use of the various techniques available in assisting students with mal-adaptive behaviors.
- Comply with State and Local regulations regarding the use of restraint and seclusion in assisting students regroup.

Each child is a part of the educational process within our programs. TLC is tasked with providing a safe environment for each of its students along with staff members and a place where respect and dignity are valued at a high level. When the need arises to address violent or aggressive behaviors there must be a balance between maintaining an effective and safe learning environment for children and school staff, while safeguarding each individual's rights and dignity.

This policy is in accordance with sustaining this philosophy along with other policies to ensure that we meet the highest standards throughout our programs.

Policy Goals

1. The Lead Center is a therapeutic day school; emphasis on "Therapeutic". This word implies we handle behaviors as a matter of professional review and intervention.
2. Each behavior as presented is unique and has its own set of circumstances and cannot be generalized in the areas of remediation.
3. All staff at TLC is in the position to render aid to a student who is frustrated and acting out as a result of their disability.
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- Placement of a student alone in a room, where the door is locked or held shut and the student is prevented from leaving the room
- Forced exercise where
 - the student's behavior is related to his/her disability,
 - the exercise would have a harmful effect on the student's health, or
 - the student's disability prevents participation in activities
- Deprivation of necessities including
 - food or liquid at a time when it is customarily served
 - medication, or
 - use of restroom

Behavioral Intervention Plan- (BIP) A plan that utilizes positive behavior interventions and supports to address behavior that interferes with the learning of a student, learning of others, or requires disciplinary action. BIP is the result of behavioral assessments.

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Safety Care – An evidence based crisis intervention model to included verbal de- escalation and physical restraint techniques to safely and effectively eliminate or minimize injury and damage. Physical restraint is a last resort method of maintaining safety until a student can begin regaining control of their aggressive behavior which has escalated to the point of being a danger to themselves or others.

Emergency means a situation that requires a person(s) to take immediate action to avoid harm, injury, or death to a student or to others, or to avoid substantial property damage.

Functional Behavioral Assessment – (FBA) is a process to determine the underlying causes or functions of a child's behavior that impeded the learning of the child or the learning of the child's peers. A functional behavioral assessment may include a review of existing data or new testing data or evaluation.

Intervention- The application of evidenced based practices to increase pro-social and pro-academic behaviors and/or decrease behaviors that impede the learning of the student or others.

Proximity – The use of space and/or environment as an intervention

Removal – Excluding the student from the place where current educational services are provided until the student can demonstrate appropriate classroom behavior.

Restraint – A restraint is the restriction of movement or immobilization of a student who has entered into a crisis mode and requires immobilization to protect him/herself and/or others.

Seclusion – is the involuntary confinement of a student alone in a room or area from which the student is physically prevented from leaving until the student no longer presents immediate danger to self or others. This includes any time a student is involuntarily alone in a room and prevented from leaving regardless of the intended purpose or the name of the area where the student is secluded.

Separation – Any time a student is separated from the main group due to a behavioral concern but does not require seclusion. This includes moving a student within the learning environment, a time out in the hallway, resource time in a different learning environment or a student initiated time out.

Therapeutic- A holistic approach utilizing interventions that are student-centered with a focus on respect and dignity while addressing student goals.

Prevention and Intervention

All students have the fundamental right to be treated with dignity and respect and free of techniques that pose physical or psychological danger. To achieve this goal, TLC uses developmentally appropriate behavioral approaches in a safe and least restrictive environment. The holistic approach utilized school-wide emphasizes prevention and positive behavioral interventions in order to develop and maintain pro-social and pro-academic behaviors before relying on more restrictive approaches.

Physical restraint and seclusion are emergency safety procedures to be used as a last resort in response to dangerous behavior(s) that place the student or others at immediate risk. To prevent need for restraint and seclusion behavioral interventions are used to teach adaptive behaviors and reduce problem behaviors. Staff are trained in continuum of behavioral supports, including separation and removal, and specific plans may be in place for students who present with serious challenging behaviors. Proactive and instructive behavior interventions are important in decreasing the number of emergency situations requiring physical restraint and seclusion.

TLC emphasizes the following proactive and behavioral principles:

- Establish a positive foundation between students and staff utilizing reinforcement and supportive interactions
- Teach and acknowledge appropriate behavior before the student exhibits problem behavior
- Identify students who need more intense support and provide intervention as early as possible
- Use data from progress monitoring to assess ongoing supports
- Identify the events that reliably predict and maintain problem/targeted behavior through the examination of data
- Increase prediction of when and where targeted behavior will occur
- Identify patterns of behavior rather than describe individual occurrences
- Examine the motivation or function of the behavior
- Develop and implement the BIP when determined as necessary

- Teach acceptable behaviors that serve the same function
- Modify classroom setting, curriculum, and instruction
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- Provide frequent opportunities for reinforcement

TLC utilizes the following methods for providing a safe environment:

- Students are searched appropriately when entering the school in the morning or when they have been outside of our supervision regardless of reason.
- Reviewing data for each student and putting appropriate supports in place.
- School rules and policies for students who attend TLC (limit concealment areas).
- Student profiles are developed at enrollment to help us understand the student's specific needs and disability manifestations.
- Our enrollment team reviews, with all appropriate personnel within our program and the placing agency, the specific behaviors we possibly could be encountering. We endeavor to ensure we have the appropriate resources in place to meet the student's needs.

TLC emphasizes that the following procedures are unacceptable practices:

- Non-therapeutic interventions that are intended as corporal punishment, with intent to harm physically or emotionally or abusive in nature will not be tolerated and are subject to outside state agency(s) reporting and review
- Making a student aware of the consequences as a main means of redirecting
- Guiltting a student into appropriate behavior
- Using staff emotions as a general method of getting our point across. (Expressing anger, frustration or fear within our communications during a behavioral manifestation)
- Causing the situation to escalate by challenging the student's disability

Training and Certification

All TLC employees have the responsibility for understating policies and regulations related to the appropriate management of student behavior include the appropriate use of physical restraint and seclusion. TLC Behavior Management Policies, as with all TLC policy and procedures, are a part of the new employee orientation, in-service trainings, and beginning of the school year orientation.

The training of TLC employees must include the following:

- Prevention of student violence, self-injurious behavior, and suicide
- Prohibition of certain behavioral interventions
- Certification in Safety Care including instruction in de-escalation strategies and physical restraint
- Regular updates for recertification
- Education in the use of positive, instructional, and preventative methods for addressing student behavior
- Methods for monitoring a student's well-being when utilizing safety procedures

The intent of this training policy is to notify staff members of specific appropriate boundaries working with children with disabilities. This policy is not all inclusive. The art of being

therapeutic is a developed skill over time and requires collaboration with all to be effective. Staff are encouraged to seek guidance from administration and case managers when they have any questions concerning appropriate interventions.

Reporting, Documentation, and Debriefing

- All incidents involving the following must be reported on the appropriate forms:
 - Peer on peer violence
 - When physical restraint is used
 - When a student is placed in seclusion
 - Illegal activities/contraband discovery
 - Property damage
- The report will include all of the information concerning Who, What, Where and When along with:
 - Duration of the event and the intervention
 - The antecedent
 - A list of the appropriate persons contacted during and after the event, along with a note in the student's log of the call contents
 - The appropriate form will be filled out completely
- All reports will be reviewed by a director and investigated for accuracy and to ensure proper use of behavioral management policies.
 - Any event found outside of the policy will reviewed by a team and possible actions taken may include.
 - Additional training
 - Suspension of physical contact by the staff until re-certified in Safety Care
 - Exercising the discipline procedures stated elsewhere within the policy manual.
- Parent notification
 - Parents/Guardians will be notified within 24 hours of any incident reports that have been filed. (Restraint, Seclusion and Incident reports require notification)
 - Any review of an incident at a parent's request will not include any disciplinary measures regarding the individual staff member(s) that may have been involved.
- CPS Notification
 - TLC is a reporting agency and under State regulations we also must report on ourselves. In the event that a restraint or seclusion is investigated and was deemed to be inappropriate, a report will be filed with CPS and VADOE.
 - TLC does not determine the outcome or have any input other than the facts in the investigative process.

Physical Restraint Policy

The procedures for the appropriate use of physical restraint must be followed by all staff working with students in the school setting. The use of physical restraint in managing severe student behavior is allowable under the following guidelines:

- there is an emergency situation and physical restraint is necessary to protect the student or another person, other less intrusive interventions should have been attempted if time and circumstance permitted, and failed to manage that particular behavior and there is a

substantial explanation for why other interventions were deemed inadequate or inappropriate,

- the student's parents have provided informed and voluntary consent in writing for the use of physical restraint,
- the physical restraint is used only for a period of time that is necessary to contain the behavior of the student, so that the student no longer poses an immediate threat of causing physical injury to himself or others,
- the staff member will monitor the student for any safety or medical concerns, including risk of injury,
- the staff member is certified in Safety Care,
- the use of restraint is not a teaching procedure or behavioral intervention and should not be used as punishment or to address behaviors that are not dangerous,
- the use of force in the application of physical restraint does not exceed the force that is reasonable and necessary under the circumstances that precipitated the use of the physical restraint.

Seclusion Policy

The procedures for the appropriate use of seclusion must be followed by all staff working with students in the school setting. The use of seclusion in managing severe student behavior is allowable under the following guidelines:

- there is an emergency situation and seclusion is necessary to protect the student or another person, other less intrusive interventions should have been attempted if time and circumstance permitted, and failed to manage that particular behavior and there is a substantial explanation for why other interventions were deemed inadequate or inappropriate,
- the student's parents have provided informed and voluntary consent in writing for the use of physical restraint,
- the seclusion is used only for a period of time that is necessary to contain the behavior of the student, so that the student no longer poses an immediate threat of causing physical injury to himself or others,
- the staff member will monitor the student for any safety or medical concerns, including risk of injury,
- seclusion must be in the area designated by TLC,
- the staff member must supervise the seclusion with continuous visual monitoring,
- the use of seclusion is not a teaching procedure or behavioral intervention and should not be used as punishment or to address behaviors that are not dangerous.

Notification Process

Under State regulation and guidelines this policy is to be reviewed and discussed to the parent's satisfaction at each enrollment and whenever a request by the parent for review is requested.

The following signatures are required:

- Staff

- Upon acceptance of their application for employment each employee must sign that they have received and reviewed the policy and procedure manual.
- Parent/Guardian
 - Stating that they understand the policy and accept its practice as presented.
- Student
 - As appropriate the student should also sign the documents to witness that the policy has been explained to them
- LEA
 - A representative of the placing agency must also sign this document

Signatures:

I have reviewed this document with a TLC staff member and accept it as a condition of my enrollment:

Parent: _____

Student: _____

I have reviewed the policy.

LEA Representative: _____

POLICY AND PROCEDURES FOR MANAGING BEHAVIORS

Student folder copy.

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Procedures for Contacting School Personnel | Phone and E-mail

| | | |
|--|--------------------------------|--|
| Chrissy Fukushima – Executive Director LEAD Center Programming Suspensions Academic/Graduation | X-348 | clfukushima@leadctr.com |
| Parish Hebb – Student Services Director Enrollments & Discharges Data & Reporting State Testing (SOL, VAAP) Restraint/Seclusion Reporting | X-349 | cphebb@leadctr.com |
| Alexis Gregory – Programming Director ED/LD/OHI Program Behavioral Programming Student Harassment Claims | X-340 | avgregory@leadctr.com |
| Kim Muldoon – BCBA ABA Program | X-313 | kemuldoon@leadctr.com |
| Aimee Decker – BCBA VIP Program ABA Program | X-315 | asdecker@leadctr.com |
| Mary Beth Mohan – Student Services Student Attendance Student Records | X-300 | memohan@leadctr.com |
| Nurse Station/medication management | X-324 | bkwilcox@leadctr.com; cakocik@leadctr.com |
| Classroom Staff Classroom staff take calls before 8:15 and after 2:35. | X-0, then ask for staff | |
| If emergency message needs to be given to student during school hours | X-0, and give message | |



Inclement Weather/Irregular Closing Policy, 2021-2022

The LEAD Center, LTD is required to provide 180 days or 990 hours of “Instructional Time”. Although we present a calendar with 180 days of instructional time for billing purposes, inclement weather and transportation concerns necessitate the use of hours instead of days to achieve the required VDOE instructional time requirements.

We have designed our school day and annual calendar to exceed the daily hour requirements set forth by the VDOE. This allows us to ‘bank’ instructional hours that may be missed due to inclement weather or irregular closings. In anticipation of possible school closings due to inclement weather/irregular closings for the 2021-2022 school year, The LEAD Center, LTD has added additional time to each school day throughout the school year. The result is an additional 6.7 days of instructional time. If The LEAD Center, LTD is closed due to weather or other situations, this additional time will be considered as make-up time for days missed. If additional time is missed beyond 6.7 days, additional make-up time will be added to the school calendar. Should a whole or partial make up day be required to fulfill the hours requirement, these will not be billed additionally to the LEA. No LEA will be billed for more than 180 days total for the regular school year.

The LEAD Center, LTD has established a policy of closing based on conditions/situations within Hopewell, VA. These are reflected in the closing of Hopewell Public Schools by announcements via television and other media outlets.

On occasion there may be exceptions to this. Parents/guardians, LEAs, and key personnel within localities’ transportation departments are encouraged to complete an inclement weather notification form to be notified of LEAD Center, LTD closings via e-mail or text. E-mail and text notifications will be made the evening before, or by 6:00 AM on a school closing day.

If transportation is not provided by a student’s home school due to weather, the student’s absence will be excused.

Weather and irregular closing days will be billed on their occurrence by using the built in additional instructional time included in our schedule.

The LEAD Center, Ltd
Policy Procedures for Managing Behaviors
Parent Review and Authorization



Philosophy

The LEAD Center, Ltd (TLC) is committed to a positive atmosphere of learning both academically and behaviorally. This policy is a description of our methods and boundaries in managing behaviors within our programs to:

- Assist students in managing their own behaviors
- Ensure staff compliance with these guidelines
- Set boundaries of use of the various techniques available in assisting students with mal-adaptive behaviors.
- Comply with State and Local regulations regarding the use of restraint and seclusion in assisting students regroup.

Each child is a part of the educational process within our programs. TLC is tasked with providing a safe environment for each of its students along with staff members and a place where respect and dignity are valued at a high level. When the need arises to address violent or aggressive behaviors there must be a balance between maintaining an effective and safe learning environment for children and school staff, while safeguarding each individual's rights and dignity.

This policy is in accordance with sustaining this philosophy along with other policies to ensure that we meet the highest standards throughout our programs.

Policy Goals

1. The Lead Center is a therapeutic day school; emphasis on "Therapeutic". This word implies we handle behaviors as a matter of professional review and intervention.
2. Each behavior as presented is unique and has its own set of circumstances and cannot be generalized in the areas of remediation.
3. All staff at TLC is in the position to render aid to a student who is frustrated and acting out as a result of their disability.
4. Assist our students to manage their behaviors through methods that retain and protect their rights and dignity.
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Definitions

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- the physical restraint is used only for a period of time that is necessary to contain the behavior of the student, so that the student no longer poses an immediate threat of causing physical injury to himself or others,
- the staff member will monitor the student for any safety or medical concerns, including risk of injury,
- the staff member is certified in Safety Care,
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POLICY AND PROCEDURES FOR MANAGING BEHAVIORS

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Sign up for important updates from The LEAD Center.

Get information for The LEAD Center, LTD right on your phone—not on handouts.

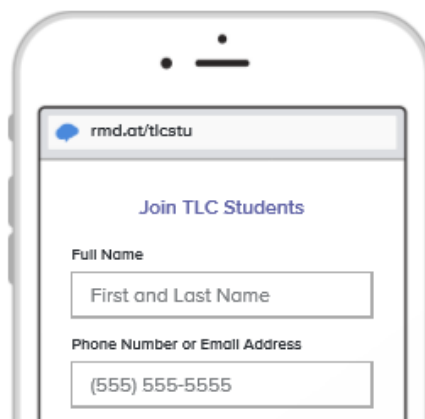
Pick a way to receive messages for TLC Students:

A If you have a smartphone, get push notifications.

On your iPhone or Android phone, open your web browser and go to the following link:

rmd.at/tlcstu

Follow the instructions to sign up for Remind. You'll be prompted to download the mobile app.



B If you don't have a smartphone, get text notifications.

Text the message [@tlcstu](https://www.tlcstu.org) to the number **81010**.

If you're having trouble with **81010**, try texting [@tlcstu](https://www.tlcstu.org) to **(804) 823-2075**.

* Standard text message rates apply.



Don't have a mobile phone? Go to rmd.at/tlcstu on a desktop computer to sign up for email notifications.

PLEASE SIGN UP FOR TEXT MESSAGES – THIS IS LEAD'S PRIMARY FORM OF CONTACT FOR STUDENT/SCHOOL UPDATES.