

## Region II Recovery School Program Proposal

*Note: As VBCPS is the fiscal agent for the Region II recovery school, **Harbor Hope Center**, this document provides an outline of the proposal based on information needed according to VBCPS School Board regulation 6-24.2. Each participating Region II division may adopt or alter according to each board's requirement.*

### **Purpose, Description, and Mission of the Program**

#### **Purpose**

The Region II recovery school, **Harbor Hope Center**, will provide students recovering from substance abuse disorders a range of academic and therapeutic services in a structured environment where individual recovery and progress towards a high school diploma are prioritized. As appropriate, students will reintegrate into the home school setting or remain at **Harbor Hope Center** through graduation.

#### **Description**

Students with substance abuse disorders, committed to recovery, in all Region II school divisions with a targeted population of divisions on the Southside of Virginia including Chesapeake, Norfolk, Portsmouth Suffolk and Virginia Beach, may voluntarily seek enrollment in the **Harbor Hope Center**, a full day center geographically located in the city of Chesapeake. Students will complete a comprehensive application and screening process to determine eligibility, and once accepted and enrolled, will work with a program coordinator, teacher, teacher assistant, and licensed clinical staff including a clinical coordinator and peer recovery specialist to receive a range of academic and therapeutic services. Although physically at the **Harbor Hope Center**, students will remain concurrently enrolled in the home school of record which will maintain official academic, disciplinary, 504/ IEP, and attendance records.

#### **Mission**

The mission of **Harbor Hope Center** is to provide all our students a safe place to learn and develop healthy coping skills while reflecting on their individual relationships with substance use as we encourage our students to work towards sobriety and recognize that recovery often follows a nonlinear path.

### **Rationale**

#### **Need for Program**

Research over the last decade has confirmed that adolescents can develop substance use and addictive disorders. While they may present differently from adults, adolescents do become addicted (Deas, Riggs, Langenbucher, Goldman & Brown, 2000, Johnston, O'Mailey, Bachman & Schulenberg, 2009, Weinberg, Rahdenrt, Collver, & Glentx, 1998). Research has also shown that the risk of addiction is worse the younger a person starts using, but the prognosis for recovery improves the younger a person stops using. Clearly, the key to a positive outcome is intervening earlier in the process (Dennis & Scott, 2007). A highly impactful research finding is that co-occurring mental health and substance abuse disorders are more prevalent than substance use disorders alone (Davidson & Hite, 2007). At one time, it was thought a minority of adolescents with an addiction might have a co-occurring mental health disorder. Now we know it is a majority and many young people in recovery are trauma survivors as well (Dennis, 2004). Finally, recent research tells us that treatment with a continuing care component has better outcomes than treatment with no continuing care component (Burleon, Kaminer, & Burke, 2012). While this appears to be common sense, there are now empirical studies to support the importance of

continuing care, though the outcomes vary according to program quality and implementations (Godley, Gamer, Passetti, Funk, Demas, & Godfrey, 2010, McKay et. al 2009).

In 2020, the National Center for Drug Abuse Statistics (NCDAS) provided data on drug use at the national and state levels. Data was obtained through self-reported surveys of respondents aged 12- to 17- years. Overall, early drug abuse correlates with substance abuse problems later in life, and the most significant increases in destructive behavior appear to take place among older teens and young adults, and by the time they are in twelfth grade, approximately 47 percent of teens have tried illicit drugs.<sup>1</sup> Findings from the NCDAS showed that approximately 26 percent of eighth graders have abused alcohol and that figure increased to 62 percent for twelfth graders. Additionally, 9 percent of 12- to 17-year-olds used alcohol in the last month, and 1 percent of tenth graders and 3 percent of twelfth graders drink daily. According to data from the NCDAS, approximately 44 percent of students have tried marijuana in their lifetime, 35 percent consumed marijuana in the last year, and approximately 7 percent of twelfth graders used marijuana daily. Data on additional drug use shows that less than 1 percent of seniors have abused heroin, but 5 percent have abused other types of opioids and 5 percent of 12- to 17-year-olds reported using cocaine in the last year.

The most recent data from the NCDAS for the state of Virginia is from 2019 and shows that overall, approximately 20,200 (3.2%) of 12- to -17-year-olds met the criteria for an illicit drug use disorder, and approximately 10,000 (1.6%) met the criteria for an alcohol use disorder. Approximately 7 percent of teens in Virginia use drugs and 9 percent drink alcohol. Of the 7 percent of teens who reported using drugs, 77 percent indicated they used marijuana in the last month. Approximately 10 percent of all 12- to 17-year olds in Virginia reported using marijuana in the last year. Data provided by the NCDAS regarding other drug use in Virginia indicated approximately 2 percent misuse painkillers and less than 1 percent used cocaine, methamphetamines, or heroin.

Results from the 2021 Virginia Department of Health's Virginia Youth Survey for the Eastern region of Virginia provide insight into the alcohol and substance abuse in the region.<sup>2</sup> Approximately 23 percent of respondents in grades 9 through 12 indicated they are currently drinking alcohol, and 10 percent indicated they first tried alcohol before the age of 13. Additionally, 10 percent indicated they currently binge drink. When asked about marijuana usage, approximately 16 percent indicated they are currently using marijuana, and 4 percent indicated they first tried marijuana before the age of 13. When asked about other current drug use, approximately 1 percent used cocaine, 1 percent used heroin, 1 percent used methamphetamines, and 1 percent used ecstasy. Respondents were asked about their prescription drug usage, and 5 percent of respondents indicated they took prescription pain medicine without a doctor's prescription or differently than how a doctor told them to use it. Additionally, 8 percent of students indicated they were offered, sold, or given an illegal drug on school property.

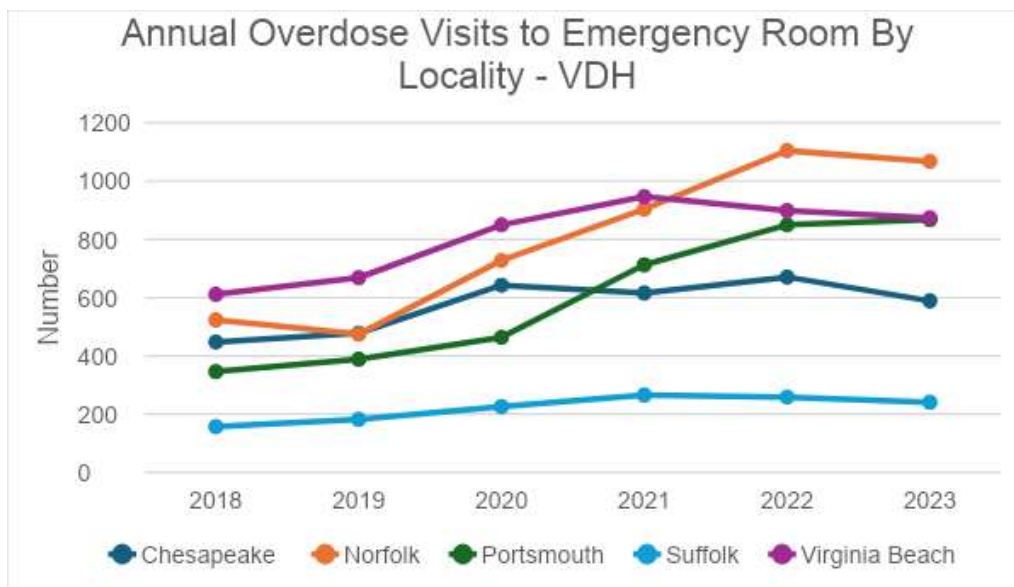
The Virginia Department of Health (VDH) tracks the number of visits to emergency departments for drug overdoses by locality and type of drug as well as by age group across the state as a whole. The chart below displays the number of annual overdose visits to emergency departments for all Virginia residents for all drugs by locality. Although not specific to the high school population, over the last six years, there has been a general upward trend in the number of overdose visits to emergency departments in the five cities. Additional recent data from the Virginia Department of Health shows increases in the number of emergency room visits for 15-19 year olds across the state from quarter 3 of 2023 through quarter 1 of

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<sup>1</sup> [Teenage Drug Use Statistics \[2023\]: Data & Trends on Abuse \(drugabusestatistics.org\)](https://www.drugabusestatistics.org/teenage-drug-use-statistics-2023/)

<sup>2</sup> Virginia Department of Health. "2021 High School Regional Reports" provided via personal communication with F. Williams on August 12, 2024.

2024. When the overdose emergency department visit rates for all drugs were examined by age group, the rate was highest among 15-19 year olds, and it increased by 15 percent in quarter 1 of 2024 compared to quarter 4 of 2023.<sup>3</sup> The rate declined somewhat in quarter 2 of 2024, but remained higher than other age groups.<sup>4</sup>

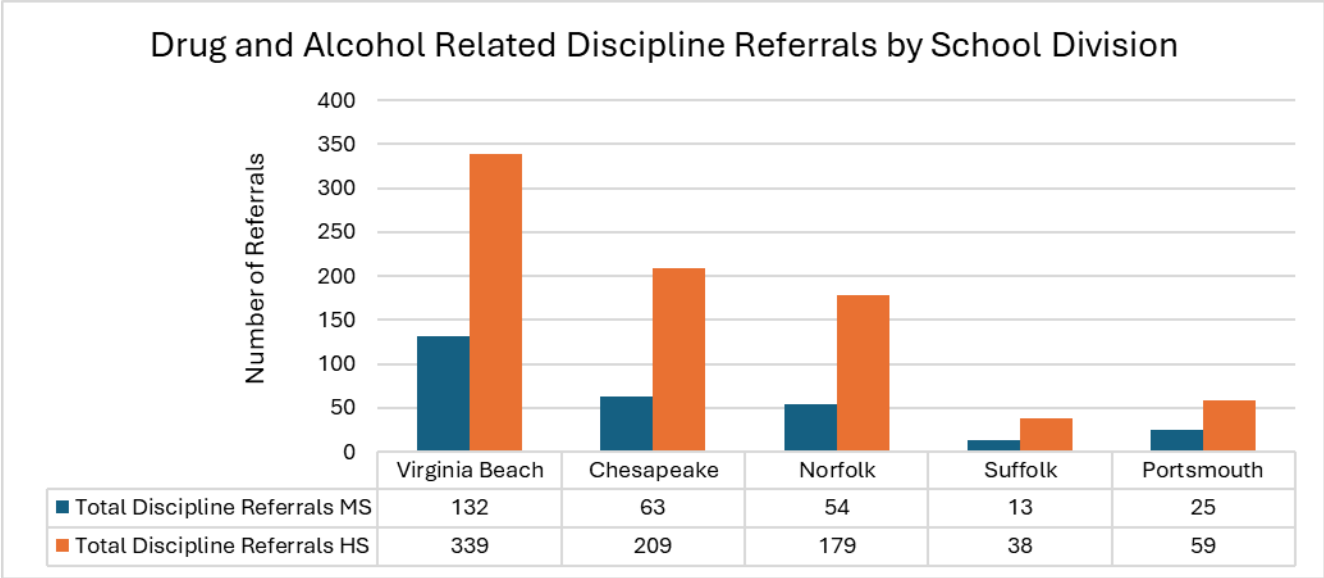


Data from the five school divisions' discipline offenses also offer another source of information about the extent of substance abuse that occurs within secondary schools in the region.<sup>5</sup> During the 2023-2024 school year, school discipline data revealed 471 offenses of alcohol and/or drugs were addressed by secondary schools in Virginia Beach, 272 in Chesapeake, 233 in Norfolk, 84 in Portsmouth, and 51 in Suffolk.

<sup>3</sup> <https://www.vdh.virginia.gov/content/uploads/sites/13/2024/04/Emergency-Department-Visits-for-Unintentional-Drug-Overdose-2024-Q1-2024-04-10.pdf> (page 3)

<sup>4</sup> [Emergency-Department-Visits-for-Unintentional-Drug-Overdose-2024-Q2-2024-07-08.pdf \(virginia.gov\)](#)

<sup>5</sup> Substance abuse offenses included offenses in the following categories: violating school board medication policy; possessing drug paraphernalia; possessing, using, or being under the influence of alcohol; distributing alcohol to other students; possessing controlled substances, illegal drugs, inhalants, or synthetic hallucinogens or unauthorized prescription medications; being under the influence of controlled substances, illegal drugs, inhalants, or synthetic hallucinogens or unauthorized prescription medications; using controlled substances or using illegal drugs or synthetic hallucinogens or unauthorized prescription medications; and illegal possession of controlled drugs and substances with intent to distribute or sell.



**Prevalence of Recovery Schools and Outcomes**

As reported by the Legislative Analysis and Public Policy Association in 2020, recovery schools first appeared in the 1970’s and were meant to provide post-treatment services to students immediately after leaving a recovery program. The concept of Recovery Schools has evolved over time and the need has increased since the opioid crisis started. According to recent media reports, the Association of Recovery Schools indicates there are about 45 recovery schools in the United States.<sup>6</sup> Additionally, the first recovery school in Virginia, Chesterfield Recovery Academy, opened in August 2022 in Chesterfield County. Based on promising trends, the Surgeon General’s report explicitly mentions the need for more research in this area, and many states have passed legislation authorizing and/or funding recovery high schools. In addition to providing traditional educational services, the National Wraparound Initiative (2022) outlines how recovery schools often include:

- Focusing on relapse prevention
- Encouraging healthy choices and the use of a wide range of social services to provide additional support
- Teaching problem solving and social emotional skills
- Providing a sober peer group
- Providing wraparound services for families that include comprehensive, holistic services for youth and families in a culturally responsive manner that connects them with services based on their specific needs

As reported by the Association of Recovery Schools<sup>7</sup>, promising evidence is emerging that shows, compared to students in non-recovery high schools who have received substance use treatment, students in recovery high schools (RHS):

<sup>6</sup> <https://www.wtkr.com/investigations/lawmakers-discussing-recovery-high-school-in-hampton-roads#:~:text=There%20are%20about%2045%20recovery,group%20Association%20of%20Recovery%20Schools.>

<sup>7</sup> Association of Recovery Schools. April 7, 2022. “Recovery High Schools” Provided via personal communication with A. Finch on May 6, 2022.

- Have higher graduation rates and lower dropout rates
  - As reported by the Association of Recovery Schools, students who participated in an RHS for at least 30 days had graduation rates that were at least 20 percentage points higher than students who did not participate.
  - Students attending an RHS had a dropout rate of 10 percent, while the dropout rate for students who did not attend an RHS was 27 percent.
- Report significantly lower absenteeism
  - Students who attended RHSs reported significantly less overall absenteeism.
  - RHS attendance was associated with a decrease in absenteeism such that students who attended an RHS had five fewer absences over a 90-day period.
- Are more likely to abstain from using substances
  - After six months in an RHS, 59 percent of students reported completely abstaining from alcohol, marijuana, and other drugs at 6-month and 12-month follow-ups.
- Have significantly fewer days using marijuana and other drugs
  - Students in RHSs reported significantly greater declines in alcohol, marijuana, and other drug use, compared to students attending non-RHSs.

Coupled with these findings on outcomes are recommendations from several Association of Recovery Schools resources or ARS partner schools regarding operating a successful recovery school program.<sup>8</sup> The recommendations synthesized by EAB (2024) included the following:

- Encourage students to help create their own personalized recovery plans
- Ensure student commitment to recovery through admissions requirements and relapse self-reporting
- Emphasize academic rigor alongside the school’s therapeutic focus
- Partner with community organizations to expand support network and deepen curricula

### **Alignment with School Division Priorities and Strategic Plan**

#### **Participating School Division Strategic Alignment**

All participating Region II divisions share a common thread in their strategic plans, a goal or belief for student well-being for all students.

**CPS:** *Safe and Supportive Learning Environment: establish an inclusive space and platform where our students, staff, and parents feel valued, supported, and safe (both physically and psychologically), to cultivate a sense of belonging and generate a welcoming environment for all.*

**NPS:** *Safety and Climate: Cultivate a safe, caring, and welcoming environment whereby the physical and social-emotional needs of each student and member of NPS workforce are valued.*

**PPS:** *Social-Emotional Development: PPS will provide equitable opportunities using the social-emotional curriculum, lessons and programs to promote learning environments that foster inclusivity, wellness, and connectedness to meet the needs of all students and staff.*

**SPS:** *Climate and Culture: Create a dynamic learning environment that promotes high student achievement, stimulates student engagement, supports staff creativity, ensures school safety, and reinforces positive staff and student relationships.*

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<sup>8</sup> EAB (2024). Recovery Schools Research Request – Virginia Beach City Public Schools.

**VBCPS:** *Student Well-Being: Create an inclusive learning environment that supports the physical and mental health of all students and strengthens the social-emotional skills they need to become balanced, resilient learners who are personally and socially responsible.*

### **Goals and Objectives**

**Goal 1:** The **Harbor Hope Center** will educate students in a safe and nurturing environment. Students will:

- report the school is nurturing, safe, and welcoming as measured by student survey responses.
- report a sense of belonging to their school as measured by student survey responses.
- report positive relationships with peers, teachers, and administrators as measured by student survey responses.
- consistently attend school as measured by the percentage of students who have attendance rates of 90 percent or higher.

**Goal 2:** The **Harbor Hope Center** will ensure students in the program receive a rigorous academic curriculum to receive their high school diploma or GED. Students will:

- graduate from the home school as measured by individual diploma attainment.
- attain a GED where graduation is not a viable option as measured by GED attainment.
- reintegrate back to the home school with a plan for graduation and a post-secondary plan or graduate with a post-secondary plan.

**Goal 3:** The **Harbor Hope Center** will support and strengthens students' mental and social-emotional health while in the program. Students will:

- report having access to necessary therapeutic resources to support students' substance abuse disorder and co-occurring mental health issues as measured by student survey.
- report that students' social-emotional health is strengthened during participation in the program.
- demonstrate social-emotional competence as measured by student SEL self-ratings in self-awareness, self-management, social awareness, relationship skills, and responsible decision making as measured by student survey.
- report having access to necessary resources to maintain sobriety as measured by student survey response and mandatory drug testing.
- report the assistance of a sober peer support group as measured by student survey response and mandatory drug testing.

**Goal 4:** The **Harbor Hope Center** will engage students and families in wrap around services throughout the program. Students and families will:

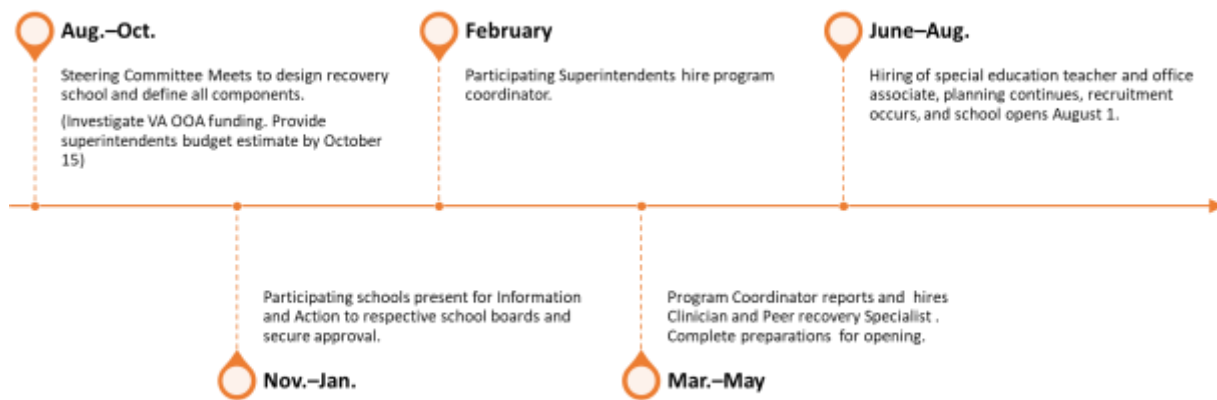
- report involvement in their child's learning and recovery as measured by parent and staff survey responses.
- report they are kept informed about students' academic and recovery progress as measured by student and parent survey responses.
- report connections with community resources by specific need as measured by student and parent survey responses.

**Goal 5:** The **Harbor Hope Center** will provide students with the skills to abstain from using substances during and after completing the program. Students will:

- Report attainment of skills to help make decisions to abstain from using alcohol, marijuana, opioids, and other drugs as measured by student and parent survey responses.
- report abstaining from alcohol, marijuana, opioids and other drugs as measured by student survey responses and mandatory drug testing.
- will record a decline in the number of relapses as measured by student survey response and mandatory drug testing.

## Operation and Calendar

### Planning Calendar



## Program Implementation

**Programming Framework:** Harbor Hope Center will operate with two primary components:

### 1) Academic Component:

The academic classroom will blend student grade levels and abilities and will tailor programming to individual student needs based on one or more of the components which follow.

Multi-Division Online Platform (MOP) Students will be enrolled in Imagine Learning, a state approved Multi-division online learning platform which operates on a 4 x 4. Students may take up to 8 courses in a year, and although 100% asynchronous, students will work under the face-to-face facilitation of a special education teacher who will serve as the assigned mentor and students will have access via email, phone, or video to the course instructor.

Credit Recovery: Students who have previously failed a course will have the opportunity to retake a course asynchronously under the face-to-face facilitation of a special education teacher who will serve as the assigned coach.

General Education Development (GED): For those students who, given academic progress and age, are unlikely to achieve a standard diploma, a GED program will be developed.

### 2) Clinical Component:

Individual and Group Supportive Counseling: Students will receive therapeutic services daily both individual and group provided by clinical staff members to address substance abuse disorder and co-occurring mental health issues.

Family Wrap Around Services: A family support component will be developed by clinical staff who will oversee Case management and coordination with outside providers.

### **Location**

**Harbor Hope Center** will be housed in a Chesapeake City Public Schools building, the SECEP Building, 369 Battlefield Blvd., South, Chesapeake, VA., 23322. Chesapeake City Public Schools will provide classroom and office space for the program at no charge to Region II schools.

### **Transportation**

Participating schools in Region II will provide transportation for their respective students:

**CPS:** Bus Hub System

**NPS:** Passenger Motor Pool

**PPS:** Bus

**SPS:** Passenger Motor Pool

**VBCPS:** Passenger Motor Pool

### **Operational Hours/Calendar**

**Harbor Hope Center** will operate on a modified year-round schedule following the academic calendar for Chesapeake Public Schools. When Chesapeake Public Schools are in session, the program will operate from 9:15 AM to 3:45 PM with a one-hour rolling start and stop to accommodate arrival and departure schedules of participating Region II schools. During summer months, students will meet virtually with staff and continue course work and therapeutic services. In the summer, as needed, students may report to the **Harbor Hope Center** if the individual student is able to provide transportation.

### **Application/Enrollment**

Attendance at **Harbor Hope Center** is voluntary; students will not be assigned nor compelled. A comprehensive application process for students in recovery to include defined criteria, application, interviews with student and family, review of student record, and recommendation of a medical provider will be developed by the program coordinator and clinical staff.

### **Mandatory Drug Testing**

As a condition of continued enrollment, students at **Harbor Hope Center** will be required to participate in mandatory drug testing. A mandatory drug testing protocol will be developed by the program coordinator and clinical staff. Drug testing will be based on a keystone of the Association of Recovery Schools (ARS) guidance of recovery as nonlinear.

### **Recruitment and Marketing**



## Full Implementation

Program capacity is slated for 50 students. It is anticipated capacity will be reached in year 4 of implementation, during the 2028-29 school year. As enrollments increase, additional staff may be required.

## Staffing

### Staff Requirements, Qualifications, Selection, Training, and Evaluation

Harbor Hope Center Minimum Staffing Requirements				
Title (hyperlinked)	Contract Source	Selection	Training	Evaluation
<a href="#">Coordinator, Regional Recovery School</a> 12-mo. (U22) (1) ( <i>Program Coordinator</i> ) Range: 86,578-157,889 Midpoint: 122,233 Midpoint w/benefits: <b>163,242</b>	VBCPS	Five Region II Superintendents	Shadowing at Chesterfield Recovery, ARS Annual Conference, VBCPS division leadership training, assigned principal mentor and DOSL/DTAL coaching	VBCPS
<a href="#">Teacher-Academic Facilitator</a> , 10-mo. (Teacher Scale) (1) ( <i>Academic Facilitator</i> ) Range: 54,065 – 105,660 Average Sal: 68,113 Average w/benefits: <b>95,446</b>	VBCPS	Program Coordinator	Shadowing at Chesterfield Recovery, ARS Annual Conference, VBCPS division teacher/special education training, and assigned mentor	VBCPS
<a href="#">Teacher Assistant, Special Education</a> , 10-mo. (U10) (1) Range: 24,919-45,445 Midpoint: 35,182 Midpoint w/benefits: <b>54,193</b>	VBCPS	Program Coordinator	Shadowing at Chesterfield Recovery, ARS Annual Conference, VBCPS Frontline training, and teacher mentor	VBCPS
<a href="#">School Administrative Office Associate I</a> 12-mo. (MS) (U11) (1) Range: 40,506-73,870 Midpoint: 57,188 Midpoint w/benefits: <b>81,760.41</b>	VBCPS	Program Coordinator	VBCPS Frontline training, shadowing of office associates, and assigned mentor	VBCPS
Clinician (1) 12-mo. Range: TBD CIBH Midpoint: TBD Midpoint w/benefits:	CIBH	CIBH w/Program Coordinator	Shadowing at Chesterfield Recovery, ARS Annual Conference, CIBH Training	CIBH
Peer Recovery Specialist (1) 12-mo. Range: TBD CIBH Midpoint: TBD CIBH	CIBH	CIBH w/Program Coordinator	Shadowing at Chesterfield Recovery, ARS Annual Conference, CIBH Training	CIBH

Midpoint w/benefits: TBD CIBH				
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**Related Services**

Chesapeake Public Schools will further provide at no charge to Region II schools access to school breakfast and lunch, a school nurse, on-site building security, a GED program, and custodial and maintenance services.

**Budget**

*(Include projected costs of the program including salaries and fringe benefits, training, supplies, materials, equipment, space renovations, communications, and transportation, etc. Budget should identify start-up costs and annual costs for subsequent years)*

**Evaluation**

*(This section includes the evaluation design and is collaboratively planned with the VBCPS Planning, Innovation, and Accountability’s Office of Research and Evaluation)*

*(Note: Evaluation plan is based on assumption this is not a phased-in implementation plan. Evaluation plan/goals and objectives will need to be completed after the description of the program is completed, including the source for student and staff data across the five cities.)*

**Year-One Evaluation** (Focused on SY 2025-2026; Report in fall of 2026)

The focus of the year-one evaluation will be the implementation of the program. Baseline data related to the program’s goals and objectives, along with data related to overall effectiveness, will also be collected. At regularly scheduled intervals, the program evaluator(s) from the VBCPS Office of Planning, Innovation and Accountability will meet with the program staff to determine if the program is being implemented as designed and to analyze the data that is collected. Program staff will be responsible for developing a written justification for any modifications to the program that have occurred. The evaluator(s) will assist with the collection and maintenance of data. An interim program evaluation will be presented to the School Board after the first year.

The following evaluation questions will be addressed in the year-one evaluation:

- What were the components of the program?
- What were the student eligibility criteria and referral process?
- How many students participated in the program, what were their characteristics (e.g., demographics, reasons for enrolling), and how long were they enrolled?
- What staff were involved in the Recovery School and what were the staff characteristics (e.g., demographics, qualifications)?
- What professional learning opportunities did the program staff receive to assist them in effectively meeting students’ needs?
- What were the perceptions of students, parents, and staff of the Recovery School and the program’s effectiveness in meeting students’ academic, social-emotional, and recovery needs?
- What progress was made toward meeting the program goals and objectives?
- How did the actual costs of the program compare to the costs specified in the proposal?

**Year-Two Evaluation** (Focused on SY 2026-2027; Report in fall of 2027)

During the second year, the focus of the evaluation will be on the program outcomes, progress made toward meeting the program's goals and objectives, and program effectiveness. The program evaluator(s) from the VBCPS Office of Planning, Innovation and Accountability will continue to meet with the program staff to determine if there were changes to the program being implemented during the second year and to analyze the data collected. Program staff will be responsible for developing a written justification for any modifications to the program that have occurred. After the close of the second year, the evaluator(s) will compile and analyze all pertinent data unless otherwise stipulated by the School Board. A formal evaluation report will be written and presented to the School Board after the second year.

The following evaluation questions will be addressed in the year-two evaluation:

- What actions were taken as a result of the recommendations that emerged from the year-one evaluation? (if applicable)
- What were the components of the program and were there any changes to the program during the second year of implementation?
- How many students participated in the program, what were their characteristics (e.g., demographics, reasons for enrolling, previous participation in the program), and how long were they enrolled?
- Were there any changes to staffing during the second year of implementation, and what were the staff characteristics (e.g., demographics, qualifications)?
- What professional learning opportunities did the program staff receive to assist them in effectively meeting students' needs?
- What were the perceptions of students, parents, and staff of the Recovery School and the program's effectiveness in meeting students' academic, social-emotional, and recovery needs?
- What progress was made toward meeting the program goals and objectives?
- How did the actual costs of the program compare to the costs specified in the proposal?

Program evaluators from the VBCPS Office of Planning, Innovation, and Accountability will collect data throughout the evaluation period including the following:

- qualitative data from reviews of program documents, interviews with program managers, and survey questions;
- data regarding staff characteristics from the Department of Human Resources;
- data regarding characteristics of students participating in the program from the VBCPS data warehouse;
- students' graduation data from the Virginia Department of Education (VDOE);
- stakeholder perception data using survey instruments; and
- cost data from applicable departments.

Program documentation during the implementation and operation of the program will be gathered and compared to information in this proposal to determine alignment with plans. Qualitative data from surveys or interviews will be analyzed for themes, quantitative data will be analyzed using frequency analyses. Cost data will be compiled and compared to the budget in this proposal. Indicators of program effectiveness will be aligned with the goals and objectives of the program as well as stakeholder's perception data from surveys.

## **Program Considerations**

*(Include a paragraph in this section whether the program requires a waiver of any of the Standards of Accreditation or a waiver of any School Board policy and regulations.)*

If a recovery school is approved, program planners must consider the following which may require waivers of state code, board policy or regulation, or special legislation.

### **Waiver to Code of Virginia §22.1-26.**

Currently Region 2 is operating pursuant to the exploration process for the Recovery School under Budget Item 124 #13C. It is expected that the General Assembly would amend Code of Virginia § 22.1-26 and VDOE would amend 8VAC20-281-10 Definitions to include recovery schools as authorized regional schools if the Region 2 proposal is approved by respective school boards in each locality. If that does not happen, then there would need to be special legislation, new legislation, or some form or waiver to allow for recovery school. Chesterfield Public Schools has such special legislation under 2020 Uncodified Acts Chapter 2042.

It is unclear whether Code of Virginia § 22.1-209.1:2. Regional alternative education programs for certain students would apply to a Recovery School. It does not appear that a waiver would be needed to this statute.

### **Student Discipline procedures and related statutes concerning student conduct or surveys**

Generally, recovery schools have more lenient standards for student discipline for students who are under the influence or facing criminal/juvenile offenses for drug or substance abuse. If the recovery school creates a code of conduct and discipline continuum which offers more lenient standards, there will be a need to obtain waivers from student disciplinary procedures. The statutory requirements for expulsion and long-term suspension have some discretion to impose alternative discipline options and may not require waivers. Additionally, if there are questionnaires or surveys regarding substance abuse or requirements to report substance abuse violations that are inconsistent with the program design for the Recovery School, waivers may be required. Below listed are the statutes that may apply:

§ 22.1-277.08. Expulsion of students for certain drug offenses.

§ 22.1-277. Suspensions and expulsions of students generally (G)

§ 22.1-279.3:1. Reports of certain acts to school authorities; reports of certain acts by school authorities to parents; reports of certain acts by school authorities to law enforcement.

§ 22.1-279.6. Board of Education guidelines and model policies for codes of student conduct; school board regulations.

§ 22.1-279.7. Guidelines for student searches

§ 22.1-79.3 ( C ) Policies regarding certain activities.

8VAC20-560-10. Reportable incidents

### **Drug Testing**

Mandatory drug testing will be required to participate in the Recovery School, therefore, an MOU between the participating school divisions will need to incorporate the decision of the school divisions to incorporate the drug testing as a requirement of enrollment. If substance abuse is detected through drug testing, some of the above noted statutes may need to be reviewed for waivers.

Code of Virginia § 22.1-279.6. Nothing in this section shall be construed to require any school board to adopt policies requiring or encouraging any drug testing in schools. However, a school board may, in its discretion, require or encourage drug testing in accordance with the Board of Education's guidelines and model student conduct policies required by subsection A and the Board's guidelines for student searches required by § 22.1-279.7.

The Virginia Department of Education (VDOE) has guidance on drug testing of students which can be found at [DrugTestingGuidelines-Final.doc \(virginia.gov\)](#). VDOE's guidance does not anticipate mandatory drug testing to participate in a recovery school program. It is not clear whether a waiver is needed for this guidance. However, it will be necessary to adopt much of the guidance's language into an MOU.

### **Other Areas for Waiver**

Insufficient information has been provided regarding whether there will be a need to waive "seat time" or provide extended day for the purposes of incorporating therapeutic or other forms of counseling or drug testing. The recovery school will be run as a "center" and not a separate school. The Virginia Department of Education would need to approve the center designation- it is unclear if that would require a waiver. There may be waiver requirements related to health, safety and food service that may need to be incorporated into the proposal.

### Course requirements

8VAC20-131-110. Standard and verified units of credit.

8VAC20-131-150. Standard school year and school day.

8VAC20-131-190. Library media, materials, and equipment.

8VAC20-131-420. Waivers and alternative accreditation plans

### Standardized testing

If students enrolled at the recovery school will do standardized testing at the Recovery School or through their home schools, clarification may be required regarding any testing waivers needed if testing is done at the recovery school.

### Other areas that may require waivers or special approvals

*Food services-* CPS or VBCPS need any waivers regarding how the school cafeteria will be run for this school as food will be brought from a school in close vicinity. There may be additional waivers needed to share information and funding regarding Free and Reduced Lunch information.

*Special education-* may require a waiver for least restrictive environment (LRE). This could be handled through the student's IEP team acknowledging that the placement at the recovery school meets LRE based on the family's decision to enroll the student at the Recovery School. VDOE may need to be made aware of how special education matters will be handled for individual students and which school division will be responsible for the student's IEP development and implementation.

*VHSL, intramural and extracurricular activities-* information has not been provided as to whether a student enrolled at the Recovery School who has a positive drug or substance abuse test will be eligible to participate in VHSL activities. When deciding how information regarding drug testing will be handled, a decision will need to be made regarding how to address this information. Further discussion will be needed regarding reporting to home schools about intramural or other extracurricular activities where the student safety could be jeopardized by positive substance abuse testing.

*The VBCPS Department of Legal Services is prepared to assist the school divisions that will be participating in the Hampton Roads Regional Recovery School with reviewing any further need for waivers and with drafting the necessary documents to establish the Recovery School, and any facility use agreements between Chesapeake Public Schools and Virginia Beach City Public Schools. As further information is provided regarding the specifics of the Recovery School program, Legal Services will assist in evaluating the need for additional waivers.*

#### **Sunset Provision**

The RS will seek reauthorization of respective school boards by the participating Region II divisions to continue beyond the 2029-30 school year.