

# Performance and Quality Improvement

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## Quarterly Report



# Clear Creek Farm

*Impacting Lives One Youth at a Time!*

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**2025**  
**1<sup>st</sup> Quarter**

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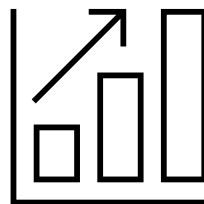
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## Section One – Introduction

Welcome to our Performance and Quality Improvement (PQI) Quarterly Report. This report has been developed for all stakeholders, including clients, staff, community members, board of trustee members, funders or any other individual who may be interested in the quality of work we do here, within Clear Creek Farm. Clear Creek Farm takes performance and quality improvement very seriously, integrating multiple aspects of quality and improvement, not only within our program, but also within our administration. We are in a world where changing and adapting to the times are necessary, in order to continue to provide relevant mechanics, programming and services to the youth we serve. We hope this report serves as a brief glimpse into how committed and dedicated we are to the youth we serve, but also to demonstrate transparency when aspects of our programming do not go as planned. We desire to receive feedback from our stakeholders, if there are ideas for improving this document.

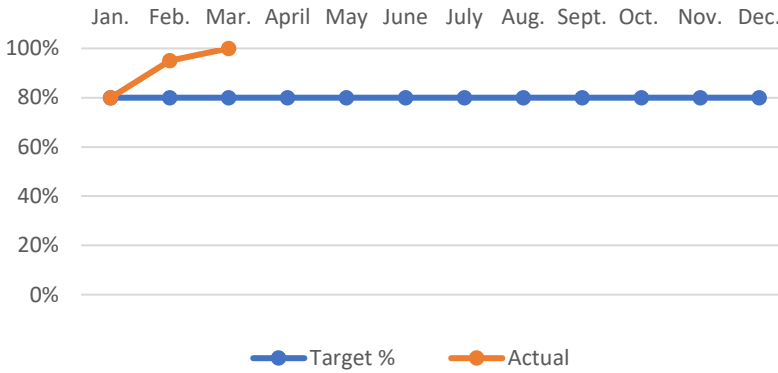
This report is designed to provide information to our stakeholders, with clarity, on various aspects, including, but not limited to; accomplishments, opportunities for improvements, as well as recognition of those going the extra mile, within our organization. As you read through this report, you may find that we have fallen short of some targeted goals, but understand these shortcomings are being addressed within the organization, for improvement. Our next section, *Outputs*, looks at the productivity of the program(s), and quantity/quality of services being provided. For our outputs, you will see a graph specifically designed to show our target, as well as where we currently stand within that specific output. Each output/graph will be accompanied with two additional sections, Plan and On Target, which discuss our current plans for that particular output, how it relates to our organization, and if we are on target or not for that specific quarter. This design gives the opportunity for a quick reference or guide to our outputs and whether or not we are on target.



## Section Two – Outputs

This section provides what outputs we are currently measuring to determine the productivity of our program, as well as identify areas in need of improvement. Our outputs are designed to be simple visual representations of where we are and where we want to be. These outputs do not necessarily mean the youth we serve are any happier or feeling any better about their lives or situations. The data does conclude that staff and administration are providing necessary services, in order to provide the opportunity for growth, for each youth we serve, as well as promoting a positive work environment. In a later section of this PQI report, measurements of improvement for each resident we serve will be discussed and reviewed.

### Number of Group Sessions



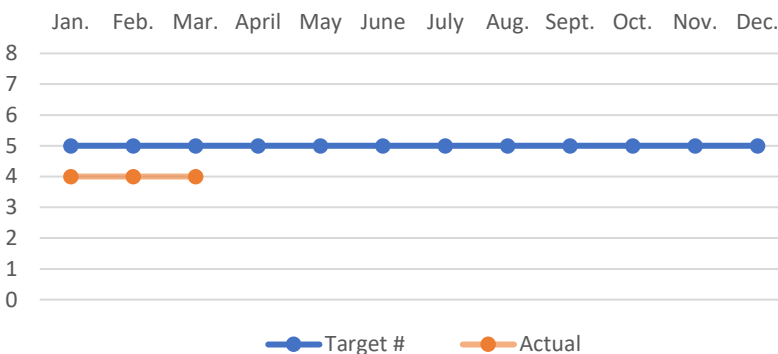
### On Target

The number of group sessions offered within the Lodge Program remains a key component to resident success. Our target goal is offering non-clinical groups, at least 80% of total available weekdays. The Lodge Program met this goal having an overall average of 92%, for this quarter, while individual months were 80% for January, 95% for February and 100% for March.

### Plan

The Lodge Program and its staff will continue to provide scheduled group sessions, on a regular basis. Having a decrease in staff turnover results in trained staff being able to follow programming and routine, including offering groups on available weekdays.

### Number of Residents - Lodge



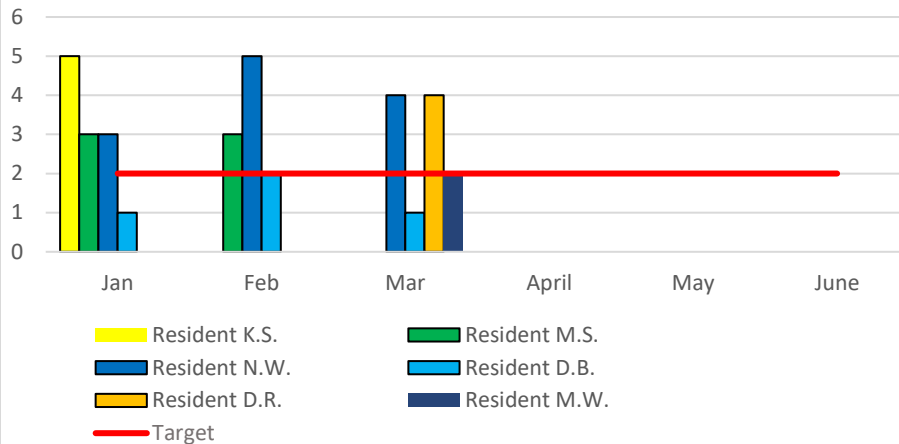
### On Target

For the 1<sup>st</sup> Quarter of 2025, the Lodge Program did not meet the goal of 5 residents in the Lodge Program per month. The over-all average number of residents within the Lodge Program this quarter was 4 residents, or 80%. Clear Creek Farm had 1 program graduates, 1 unsuccessfully discharged during this quarter, as well as accepted 2 new residents this quarter.

### Plan

Maintaining the goal of 5 or more residents within the Lodge Program can be challenging at times, due to foreseen and unforeseen situations; Resident(s) successfully discharged/graduation from the program, or unsuccessful discharges. Decrease in staff turnover can provide more resources toward increasing or maintaining targeted number of residents within the Lodge Program.

### Number of Clinical Sessions - Residents



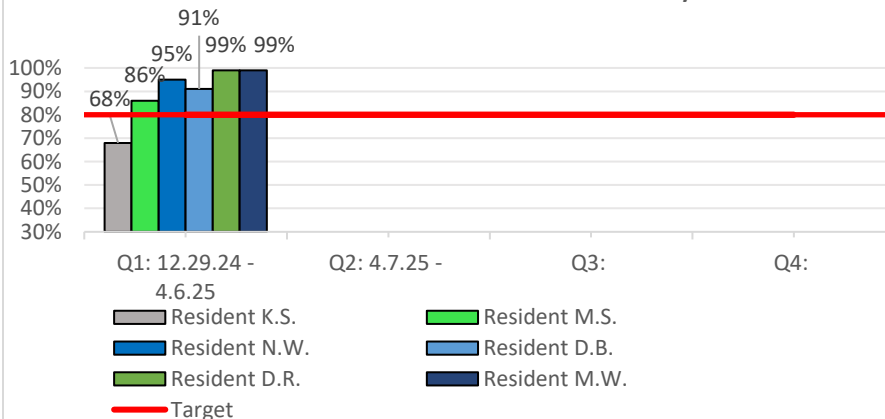
### On Target

Clear Creek Farm's continual target for each resident is to receive 2 clinical sessions within a month, or 6 total in a quarter. We fully understand clinical recommendations may differ from our target. During this quarter, Resident D.R. was placed in the Lodge on 2.20.2025 and was not established with a counselor until March. Resident M.W. was placed on 3.17.2025 and was established with a counselor by her parents, prior to placement. Over-all, January's average was 3, February's was 3.3 and March's was 2.75, with an over-all quarterly average of 3 sessions per month, meeting the goal of 2 sessions per month. Residents K.S. and M.S. were both discharged during this quarter.

### Plan

Clinical sessions for each resident are vital for their personal growth, to dive deep into aspects of their lives, in a professional setting. Within the Lodge Program, our plan for clinical sessions and residents is for residents to receive continual clinical sessions, deemed necessary by the recommendations of their counselor.

### Resident DPR Points - Quarterly



### On Target

The Lodge Program monitors earned points on a daily basis, measuring/combining points in a summary every two weeks, or DPR period (820 Points). The target goal for the Lodge and its full quarter residents earned points is 80% of all possible points during a given quarter (6-7 DPR periods). For this quarter, the targeted goal was a minimum of 5,740 points or 80% of all possible points, during the 1<sup>st</sup> Quarter of 2025, from placement date. During the 1<sup>st</sup> Quarter of 2025, 5 of 6 resident achieved the goal of earning at least 80% of all possible DPR points. The combined average of earned DPR points during this quarter was 90%.

### Plan

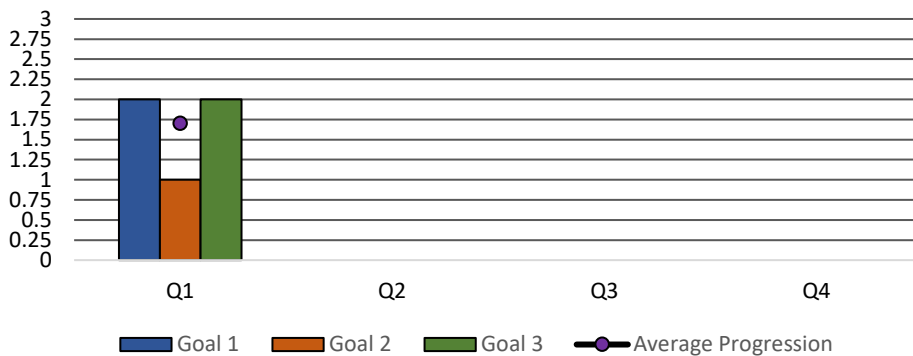
Resident progression is necessary for the ultimate goal of successfully graduating the program. By tracking earned points and utilizing positive reinforcement, it places value in earned points and encourages positive growth, behaviors and relationships between residents and staff members.

## Plan

Individualized goals help tailor each resident's experience and progression within the Lodge Program. During the initial 30-Day Master Care Plan meeting, 3-4 goals are set, through various team member's insight, guidance and recommendations, which are then tracked and measured each month for progression and achievement. Each month, the individual goals are given a score, based on the resident's progress and then averaged out for a quarterly average.

0 = No Progress, 1 = Minimal Progress, 2 = Marginal Progress, 3 = Goal Completion

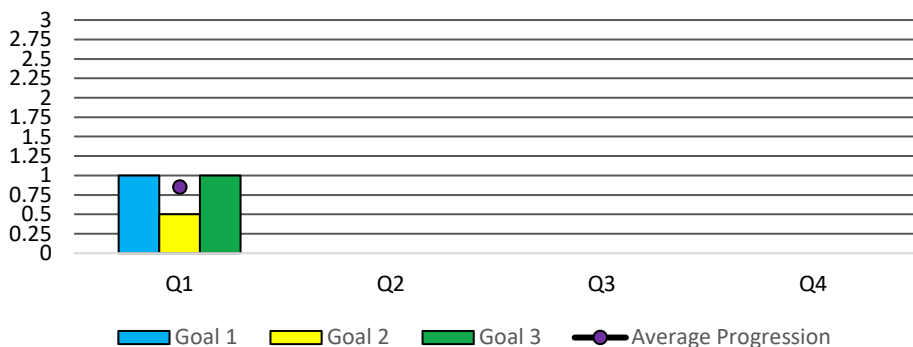
Individual Goal Progression & Achievement  
Resident N.W.



### On Target

Resident N.W. was able to progress through their goals, this quarter, with 2 goals having marginal progress and 1 goal having minimal progress. Overall, the average goal progress for the 1<sup>st</sup> Quarter was just under a marginal average of 2, coming in at 1.7.

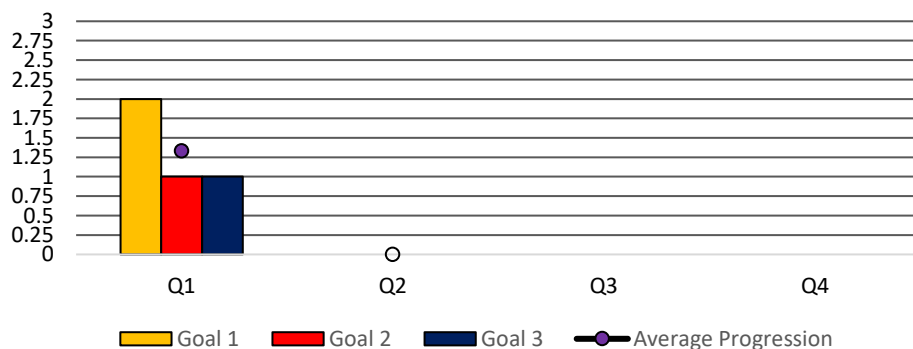
Individual Goal Progression & Achievement  
Resident D.B.



### On Target

Resident D.B. was able to progress, minimally through their goals, this quarter, having 2 goals with minimal progress and 1 goal less than minimal progress. Overall, the average goal progress for the 1<sup>st</sup> Quarter was just below minimal progress.

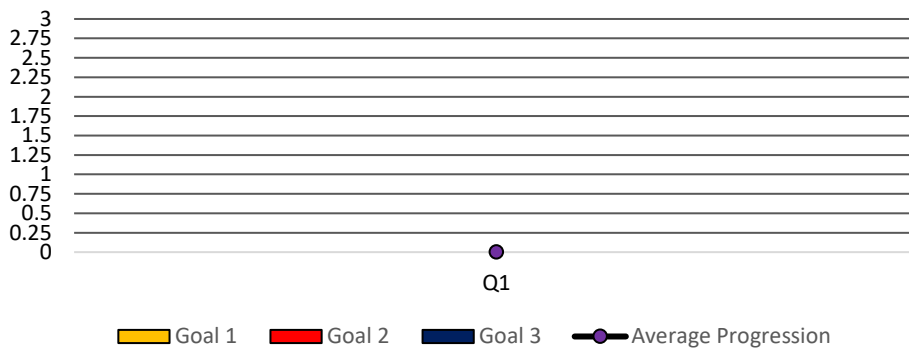
Individual Goal Progression & Achievement  
Resident D.R.



### On Target

Resident D.R. was able to progress, through their goals, this quarter, having 2 goals with minimal progress and 1 goal with marginal progress. Overall, the average goal progress for the 1<sup>st</sup> Quarter was just above minimal progress.

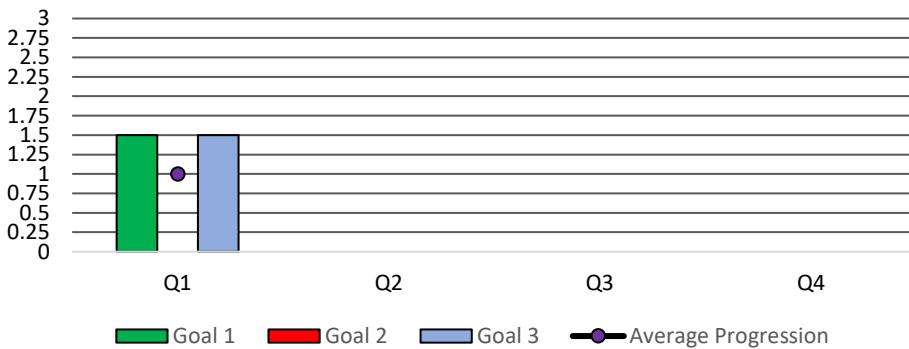
### Individual Goal Progression & Achievement Resident K.S.



### On Target

Resident K.S. did not make any progress with their individual goals, as the majority of this quarter they were placed outside the Lodge Program. K.S. was discharged from the Lodge Program on 3.3.2025.

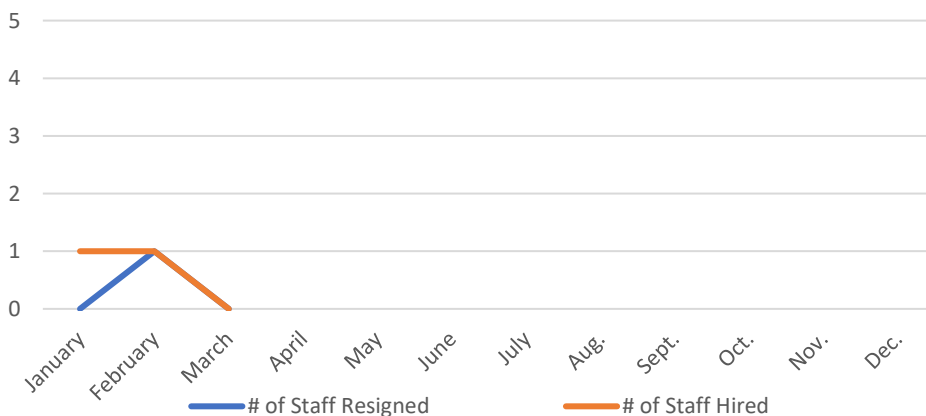
### Individual Goal Progression & Achievement Resident M.S.



### On Target

Resident M.S. was able to progress, minimally through their goals, this quarter, having 2 goals with minimal progress and 1 goal with no progress. Overall, the average goal progress for the 1<sup>st</sup> Quarter was just minimal progress. M.S. was successfully discharged from the Lodge Program on 2.19.2025.

### Staff Turnover



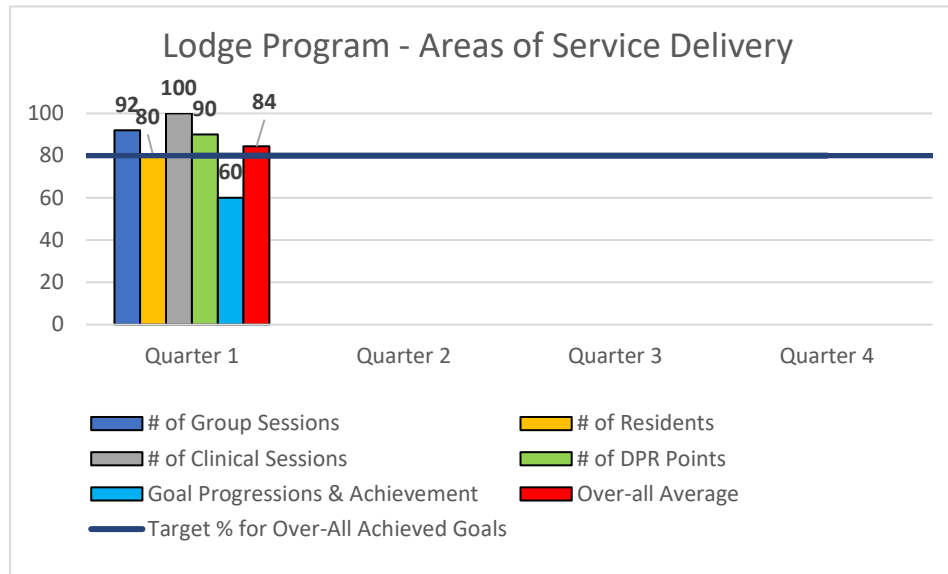
### On Target

During this quarter, Clear Creek Farm had 1 staff member resign their position but did hire 2 full-time staff members. During the 1<sup>st</sup> Quarter of 2025, the average turnover rate was 9%. Comparatively, for Quarter 1 of 2024, the turnover rate was also 9%. See *2024 Staff Retention Plan and Analysis* report for more details regarding all of 2024.

### Plan

Clear Creek Farm values each and every staff member that is a part of this organization, who are engaged and support our mission and vision. Long-term, tenured staff is a steppingstone to resident success and growth. Having stabilized, dedicated staff members is a direct correlation with resident stability and success.

Areas of Service Delivery provides Clear Creek Farm an opportunity to assess the quality of services delivered, through quantifiable data. For this review, Clear Creek Farm administrative staff and PQI Committee members identified 5 measurable areas of service delivery, within the Lodge Program. Areas



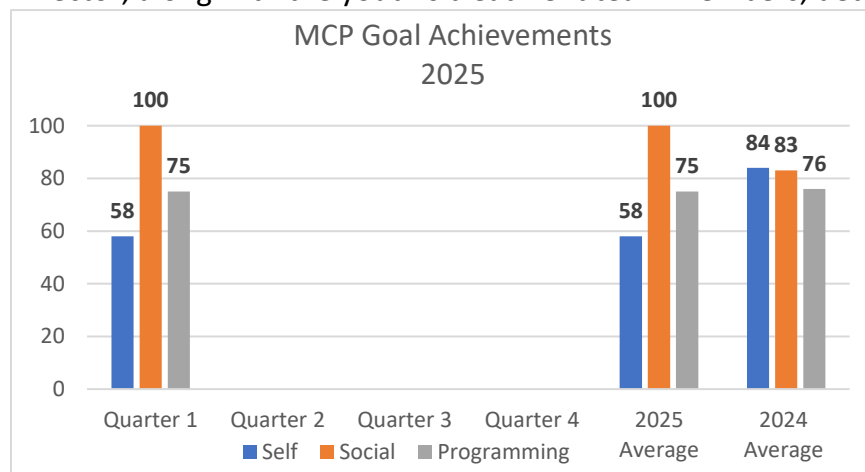
of service delivery include, Number of Group Sessions Provided, Number of Residents within the Lodge Program, Number of Clinical Sessions residents attend, Resident DPR earned points and Individual Goal Progression & Achievement. The targeted goal of the 5 areas of service

delivery is to have an overall average of 80% or higher for all quarterly goals. Programs that perform lower than 80% for 3 consecutive quarters will be required to complete an improvement plan. See the improvement plan sections for additional information on programs which may be required to complete an improvement plan. For the 1<sup>st</sup> Quarter of 2025, the Lodge Program achieved the target goal for 4 of the 5 areas of service delivery, with an over-all average for the combined areas of service delivery being 84%.

### Section Three - Outcomes

This section focuses on our residents' outcomes – personal growth that demonstrates our interventions/services work, while displaying positive, personal growth. Outcomes are measured on a quarterly basis, through data collection from Resident Health and Wellness Surveys, completed at Master Care Plan meetings (MCPs), along with medical appointment documentation and MCP goal achievements.

MCP goal achievement(s) is a measurement of 9 overall individual program goals for each resident. During each resident MCP meeting, the Program Coordinator and/or Program Director, along with the youth's treatment team members, determine if that resident has



achieved any or all 9 program goals. For the purposes of ease of understanding, as well as to better track trends, the PQI committee has broken those 9 goals into 3 separate categories. The 3 categories consist of Self, Social and Programming. These



indicators are combined with all other resident MCP goals, for the specified quarter and input into an easily identifiable chart.

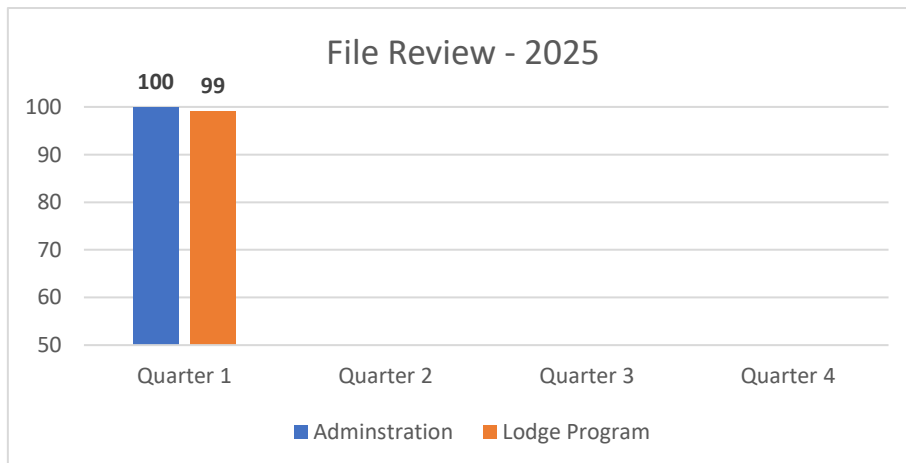
During this 1<sup>st</sup> Quarter of 2025, Clear Creek Farm had 4 MCPs, providing data for tracking goals. Overall, total goal achievement during this quarter was 75%, an increase of 4% from the 4<sup>th</sup> Quarter, 2024. For the “Self” category, residents achieved 75% (7/12) of goals, for the “Social” category, residents achieved 100% (8/8) of goals, and for the “Programming” category, residents achieved 75% (9/12) of goals.

Results of all Resident Health and Wellness Surveys, during each quarter will be combined for tracking purposes, with all resident responses, including written responses. See appendix for total responses. The PQI Sub-Committee and PQI Committee will evaluate any concerning information or results from collected survey results, which will then be further discussed within this section of the PQI Quarterly Report. If no concerning results are identified, the PQI Committee will determine if there are any results that need to be mentioned and included.

For the 1<sup>st</sup> Quarter of 2025, there were 4 Resident Health and Wellness Survey provided by current residents. See appendix for total responses from the combined surveys. Below are various outcomes from the self-reported Resident Health and Wellness Surveys, which we have identified as key components of gauging how our residents are treated within the organization, as well as how they feel about their progress. We understand these are not evidence-based outcomes, but we included them for the purpose of providing insight into our stakeholders, as to how our residents feel. Data from the one Resident Health and Wellness Survey received indicated 100% “Yes” on *“Clear Creek Farm staff encourage me to use healthy coping skills to handle my daily problems/issues/stressor.”* For the question *“What aspects of the program do you feel have helped you improve yourself?”* a resident wrote *“Being in a family setting and improve my independent living.”*

#### Section Four – Random File Review

Random file reviews will take place on a quarterly basis and will be conducted by Clear Creek Farm Administrative Staff and PQI Committee Members. The purpose of file reviews is to establish guidelines



to be followed to ensure files contain necessary information and documents to assess the quality of services provided.

For the 1<sup>st</sup> Quarter of 2025, Clear Creek Farm conducted a file review for the administration office, as well as 4 current open resident files, 2

closed resident files, during this quarter. The administration office achieved a 100% compliance, while the Lodge Program achieved 99%, missing only a past vision appointment documentation.

## **Section Five – Stakeholder Survey Satisfaction**

Clear Creek Farm values stakeholder's views and opinions of operations and programming gathered through stakeholder surveys. We not only look at what our community's view is of Clear Creek Farm but also our Staff, Board of Trustees, and placing agencies, to ensure we are delivering satisfactory services across the board. Our target goal for each stakeholder category is to have a minimum participation rate of 75%. We will continue to emphasize and encourage participation in bi-annual surveys, as best we can, with the resources we have available. During the 1<sup>st</sup> Quarter of 2025, we received 4 of 4 Resident Health and Wellness Surveys. All other surveys are administered bi-annually (April & October) or annually (October).

## **Section Six – Improvement Plans**

For the 1<sup>st</sup> Quarter of 2025, there were no improvement plans required, as there were no identified areas of concerns needing improvement. Clear Creek Farm continues to take all aspects of the organization seriously and are dedicated to continuous improvement, in order to provide quality services that encompasses the organization's core values. Clear Creek Farm will assess for further areas that may be in need of improvement during the next quarterly PQI Committee meeting, set for April 16, 2025.

## **Section Seven – Recognition**

Clear Creek Farm would like to recognize our new staff members, Mallory Slife and Allison Osterhout. We would also like to recognize Baylee Behr for going above and beyond this quarter, being dedicated and committed to the youth we serve. Baylee earned the bi-monthly Employee of the Month! Thank You!!

Clear Creek Farm would also like to recognize and congratulate our newest graduate from the Lodge Program. Clear Creek Farm had 1 resident successfully graduated from the Lodge Program and be reunified with family. Although we are not permitted to use names or pictures of the youth, we still believe it is important to recognize their achievements and progress.



We  
Welcome  
You!!

## **Section Eight – Future Plans**

Clear Creek Farm's new website is up and running. Please check it out! Also, follow along for updates pertaining to our House 2 transformation into an Art & Recreation Center for our youth!

### **Please Contact us!**

If you have any feedback about this report, please contact via email or phone:

[clear.creek.farm@clearcreekfarm.org](mailto:clear.creek.farm@clearcreekfarm.org)

(937) 498-9445

# **Clear Creek Farm**

## **Quarterly Risk Management Report – Quarter 1, 2025**



# **Clear Creek Farm**

*Impacting Lives One Youth at a Time!*

## **Introduction**

Clear Creek Farm's PQI Subcommittee and PQI Committee review, monthly, all immediate and ongoing risks, including, but not limited to; incident reports including critical incident reports, accidents, grievances/complaints, as well as facility safety concerns/issues, serious illness, injury or deaths, situations where a resident was determined to be a danger to themselves or any other person, and all restrictive behavior management interventions (restraints). Clear Creek Farm does not permit the use of seclusion, isolation, chemical/mechanical restraints, prone restraints, or any other form of intervention(s) not identified within Clear Creek Farm's *Disciplinary Philosophy, Behavioral Intervention Policy*, out of the scope of permitted restraints or holds within official passive restraint training (Crisis Prevention Institute – CPI) or any other prohibited punishments (Cruel and Unusual Punishments or Corporal Punishments).

## **Purpose**

The purpose of the Risk Management Report is to compile, analyze, and review all pertinent information provided during a given quarter, for the purposes of identifying trends or areas in need of improvements. Clear Creek Farm regularly reviews all identified information above to ensure the quality of care with its programs, is maintained, while also maintaining the health and safety of all residents and staff.

## **Facility Safety/Maintenance**

Clear Creek Farm received 9 maintenance reports, during the Quarter 1, 2025.

Floor Transition Strip needing repaired, Closet door trim needing reattached, washing machine not spinning (Motor stopped working, machine replaced), Garage door chain needed tightened, Basement ceiling tiles needed replaced, as well as a Ping Pong table needing the leg fixed. The main office had 2 of the maintenance reports for campus pickup for a fallen tree and limbs, and for the Lodge front door alarm contact not working properly.

## **Grievances/Complaints**

Clear Creek Farm did receive 0 grievances/complaint forms during Quarter 1, 2025.

## **Accidents**

Clear Creek Farm had 0 vehicle accidents during Quarter 1, 2025.

## **Incident Reports**

The incident category pertains to all incident reports identified by Clear Creek Farm, which includes Incident of Medical Emergency, Incident of Resident Misbehavior, Incident of Passive Physical Restraint, Incident of Suspected Child Abuse or Neglect and Incident of Community Engagement. These incident reports are utilized for, but not limited to; Non-Routine Medical Appointments, Missed/Refused Medication(s), Self-Harming/Suicidal Ideations or Threats, AWOL/Runaway, School Refusal/Disciplinary Actions, Alleged Delinquent/Criminal Activity, as well as Child Victim of Alleged Delinquent/Criminal Activity.

### **Incident of Medical Emergency**

During Quarter 1, 2025, Clear Creek Farm had a total of 13 incidents of medical emergency, with 1 being identified as Critical Incident Reports. 6 incidents included non-routine medical appointments for various medical concerns such as illnesses, x-rays and toe/foot appointments. See Critical Incident Reports regarding the incident of attempted suicide. There was a total of 4 incidents for missed medications or medication errors, 2 of which were staff errors, 1 was due to a refusal and 1 was due to a resident throwing up their medication.

### **Incident of Resident Misbehavior**

During Quarter 1, 2025, Clear Creek Farm had a total of 6 incidents of resident misbehaviors, with 1 being identified as a Critical Incident Report (Related to the Medical Emergency Critical Incident). There was 1 involving suicidal threats/attempts, 1 involved a resident being suspended from school due to fighting, 1 for threats made to staff, 1 for return from in-patient stay and 2 for behaviors such as; punching walls, screaming and cussing at staff.

### **Incident of Passive Physical Restraint (Behavioral Management Interventions)**

Clear Creek Farm did not have any situations that resulted in behavioral management interventions nor incidents of passive physical restraints during Quarter 1, 2025.

### **Incident of Suspected Child Abuse or Neglect**

Clear Creek Farm did not have any incidents of suspected child abuse or neglect during Quarter 1, 2025.

### **Incidents of Community Engagement**

Clear Creek Farm did not have any incidents of community engagement during Quarter 1, 2025.

### **Critical Incident Reports**

Clear Creek Farm identifies all incident reports as either “not critical” or “critical” based on the incident report information. To be identified as a critical incident, an independent reviewer reviews the original incident report and determines if the incident was either a threat of or actual harm, serious injury, or death. Refer to Clear Creek Farm’s *Procedures for Investigating and Reviewing Critical Incidents* policy for further details regarding critical incidents.

### **Critical Incidents**

During Quarter 1, 2025, Clear Creek Farm had 2 incidents identified as critical incidents, which were the same incident written on a misbehavior incident report for what led up to the medical emergency incident report.

#### **Critical Incidents – Incident of Medical Emergency**

There was 1 incident identified as a critical incident during the 1<sup>st</sup> Quarter of 2025. A resident became upset, becoming dysregulated, cussing, yelling, screaming and threatening staff, leading to barricading herself in her bathroom and attempted to drown herself. The resident was transported to the ER for a mental health evaluation, where they were admitted to Glenwood Behavioral.

#### **Critical Incidents – Incident of Resident Misbehavior**

There was 1 incident identified as a critical incident during the 1<sup>st</sup> Quarter of 2025. A resident became upset, becoming dysregulated, cussing, yelling, screaming and threatening staff, leading to barricading herself in her bathroom and attempted to drown herself. The resident was transported to the ER for a mental health evaluation, where they were admitted to Glenwood Behavioral.

#### **Critical Incidents – Incident of Passive Physical Restraint**

### **Conclusion**

During the PQI Subcommittee and PQI Committee meetings for Quarter 1, 2025, there were 0 trends identified.

# Stakeholder Survey Results

**1<sup>st</sup> Quarter, 2025  
(January - March)**

*\*The following pages contain the results/responses of surveys provided by Clear Creek Farm and its administration. The intended purpose of the data collected is to give each individual associated with Clear Creek Farm, the opportunity to let us know how well we are doing, if there is a need to improve our services for the youth at Clear Creek Farm, as well as, to ensure Clear Creek Farm's mission and vision are being upheld.*

# Stakeholder Survey Results

## **Placing Agency & Appointed Partners (Bi-Annual – April, October)**

1. Clear Creek Farm provides timely responses to referrals made to organization.
2. Clear Creek Farm's admission and discharge procedures are effective and satisfactory.
3. Communication with Clear Creek Farm staff and administration is timely and efficient (Phone Calls, Texting, Emails, Letters).
4. Were monthly and quarterly reviews timely and helpful.
5. I am invited to all Master Care Plans and encouraged to provide input, feedback, and concerns.
6. Clear Creek Farm staff and administration notify me of all progress, including incident reports, academic reports, and all medical concerns/reports).
7. I am satisfied with the living quarters and the care of the resident's physical and mental well-being.
8. Clear Creek Farm provides quality supervision of the resident.
9. Clear Creek Farm staff are cooperative and display a positive and professional attitude.
10. Clear Creek Farm made efforts to support the resident's transition to their next placement.
11. Do you feel the resident has progressed while in the program, have made positive improvements, personal growth and have developed better decision-making skills?
12. What aspects of the program do you feel have helped your child to improve their over-all behaviors and academic achievements?
13. Please provide any feedback or suggestions you feel would be helpful for Clear Creek Farm to continue providing quality services for residents in placement.



# Stakeholder Survey Results

## **Community Partners and Funders (Annual – October)**

1. I am familiar with Clear Creek Farm's mission and vision objectives.
2. I understand and support Clear Creek Farm's mission and vision objectives.
3. I feel my funding/donation is used appropriately within the confines of Clear Creek Farm's mission and vision.
4. I feel Clear Creek Farm is a reputable organization with good standing within the community.
5. Please provide recommendations on how you feel is the most effective way to receive new and updates regarding Clear Creek Farm's fundraising activities.
6. Please provide information on why you choose to donate or support Clear Creek Farm.
7. What matters to you? This is your opportunity to tell us how you think and feel about Clear Creek Farm.

# Stakeholder Survey Results

## Staff Satisfaction Survey (Bi-Annual – April, October)

1. I feel a sense of accomplishment from my position at Clear Creek Farm.
2. I feel my work ethic and dedication is valued by Clear Creek Farm administration.
3. Clear Creek Farm provides me with the necessary tools, resources, and trainings I need to do my job.
4. I am invited/notified of all Staff Meetings?
5. I feel my opinion/concerns are heard and addressed during staff meetings.
6. I feel my supervisor effectively communicates things that affect my work.
7. I feel comfortable taking issues or concerns to my supervisor.
8. I understand and support Clear Creek Farm's mission and vision statements.
9. Administrative staff promote a positive work culture.
10. I have a positive working relationship with other staff.
11. I am over-all satisfied working for Clear Creek Farm.
12. What do you like about your position at Clear Creek Farm and what do you dislike?
13. Do you feel there are services we do not currently provide, that would be helpful in caring for the residents of Clear Creek Farm?
14. Please provide any feedback or suggestions you feel would be helpful for Clear Creek Farm to continue to support you as a staff member.

# Stakeholder Survey Results

## Resident Health and Wellness Survey (All MCP Meeting)

1. Clear Creek Farm staff ensure my medical and clinical needs are met.
  - a. 75% (Yes), 25% (Most of the Time)
2. Clear Creek Farm staff encourage me to use healthy coping skills to handle my daily problems/issues/stressors.
  - a. 100% (Yes)
3. I feel that I am treated well and with respect by Clear Creek Farm staff.
  - a. 75% (Yes), 25% (Most of the Time)
4. I feel my safety and well-being is important to staff, at Clear Creek Farm.
  - a. 75% (Yes), 25% (Most of the Time)
5. Clear Creek Farm staff let me know when I am doing well or making good decisions.
  - a. 50% (Yes), 50% (Most of the Time)
6. Clear Creek Farm staff listen to me when needed and allow opportunities for me to respectfully voice my opinion.
  - a. 50% (Yes), 50% (Most of the Time)
7. Clear Creek Farm staff are sensitive to my cultural background (Race, Religion, Ethnicity).
  - a. 50% (Yes), 25% (N/A), 25% (No)
8. Clear Creek Farm staff have helped me maintain contact with my family and provide opportunities for visitation, if permitted and approved by my placing agency.
  - a. 100% (Yes)
9. As I have progressed through the program, I have made positive improvements, personal growth and have developed better decision-making skills.
  - a. 25% (Yes), 75% (Most of the Time)
10. What aspects of the program do you feel have helped you to improve yourself?
  - a. I don't know.
  - b. No Response.
  - c. Being in a family setting and improve my independent living.
  - d. When I talk o Baylee, Mallory and my counselor and my grandma and also when we do group and rec.
11. Do you have any suggestions of changes/modifications to the program that would better help Clear Creek Farm serve youth in placement?
  - a. Leave the house more.
  - b. No.
  - c. Nope.
  - d. For staff to treat everyone the same and not favor one over all or all over one.
12. If Clear Creek Farm transforms House 2 into an Art & Recreation Center for Lodge Residents, what ideas would you have for the various spaces? (Examples: Art Studio, Movie Theater, Music Room, Gaming Room etc...)
  - a. A chill room with speakers.
  - b. Don't have one.
  - c. Gaming room and movie theater and art studio.
  - d. Like a card game room or something like that or like a lifting room (Weightlifting Room).

# Stakeholder Survey Results

## **Stakeholder Survey – Parent (Direct/Private Placements Only – MCP Meetings)**

1. Clear Creek Farm staff ensure my child's medical and clinical needs are met.
2. Clear Creek Farm staff encourage my child to use healthy coping skills to handle their daily problems/issues/stressors.
3. I feel that my child is treated well and with respect by Clear Creek Farm Staff.
4. I feel my child's safety and well-being is important to staff, at Clear Creek Farm.
5. Clear Creek Farm staff notify me of my child's progress, including incident reports, academic reports, and all medical concerns/reports.
6. I am invited to all Master Care Plan meetings, as well as scheduled for any immediate or on-going concerns.
7. Clear Creek Farm staff are sensitive to my child's cultural background (Race, Religion, Ethnicity).
8. Clear Creek Farm staff have helped me maintain contact with my child and provide opportunities for visitation, phone calls and letter writing, if permitted and approved by the placing agency.
9. As my child has progressed through the program, they have made positive improvements, personal growth and have developed better decision-making skills.
10. What aspects of the program do you feel have helped your child to improve their over-all behavior and academic achievements?
11. Please provide any feedback or suggestions you feel would be helpful for Clear Creek Farm to continue providing quality services for residents in placement.

