Performance and Quality Improvement

Quarterly Report



Clear Creek Farm

Impacting Lives One Youth at a Time!

2025 2nd Quarter

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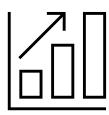
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Section One – Introduction

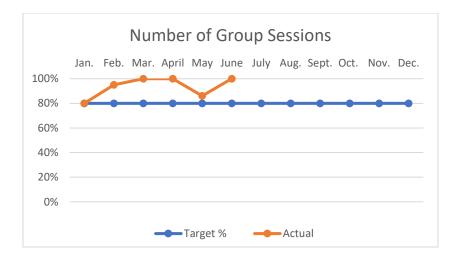
Welcome to our Performance and Quality Improvement (PQI) Quarterly Report. This report has been developed for all stakeholders, including clients, staff, community members, board of trustee members, funders or any other individual who may be interested in the quality of work we do here, within Clear 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.



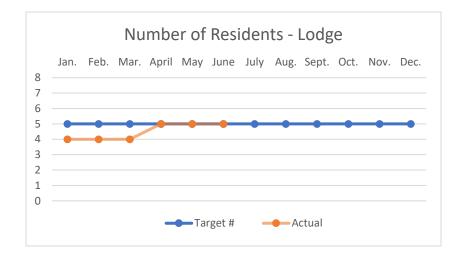
Section Two – Outputs

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.



<u>Plan</u>

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.



Plan

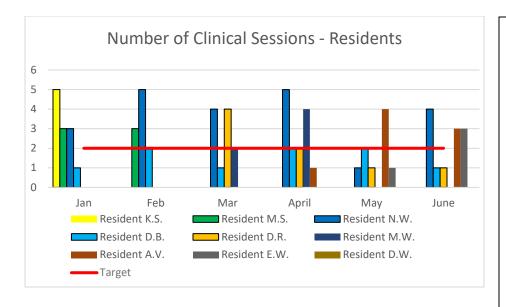
Maintaining the goal of 5 or more residents within the Lodge Program can be challenging at times, due to foreseen and unforeseen situations; Resident(s) successfully discharged/graduation from the program, or unsuccessful discharges. Decrease in staff turnover can provide more resources toward increasing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

On Target

The number of group sessions offered within the Lodge Program remains a key component to resident success. Our target goal is offering nonclinical groups, at least 80% of total available weekdays. The Lodge Program met this goal having an overall average of 95%, for this quarter, up 3% from Quarter 1, while individual months were 100% for April, 86% for May and 100% for June. For the halfway mark of 2025, the Lodge's overall average is 94%.

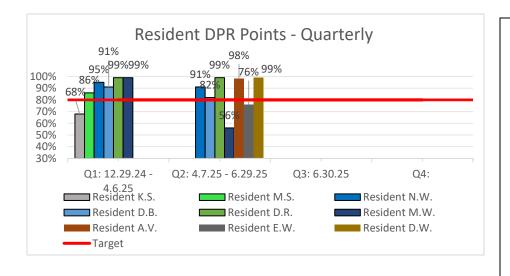
On Target

For the 2nd Quarter of 2025, the Lodge Program met 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 5 residents. Clear Creek Farm did not have any program graduates and had 2 unsuccessful discharged residents 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.



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.

On Target

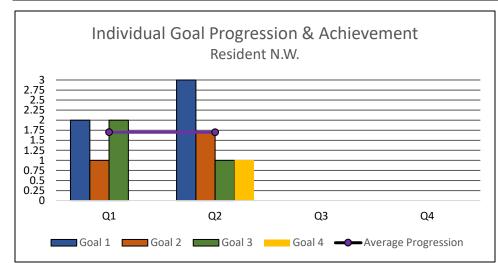
Clear Creek Farm's continual target for each resident is to receive 2 clinical sessions within a month, or 6 total in a quarter. We fully understand clinical recommendations may differ from our target. During this quarter, Resident D.W. was placed in the Lodge on 6.25.2025 and was not established with a counselor. Over-all, April's average was 2.8, May's was 1.8 and June's was 2.4, with an over-all quarterly average of 3 sessions per month, meeting the goal of 2 sessions per month. Resident N.W.'s counselor had the majority of the month of May off. Resident D.R.'s counselor felt that D.R. only needed 1 sessions every 3 weeks. Residents M.W. and E.W. were both discharged during this quarter.

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 4,920 points or 80% of all possible points, during the 2nd Quarter of 2025, from placement date. During the 2nd Quarter of 2025, 5 of 7 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 86%. The two residents who did not achieve this goal this quarter, Residents M.W. and E.W. were both unsuccessfully discharged from the Lodge Program.

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. While we celebrate any goal progression, the target goal each quarter is for each resident is to average at or above "Minimal Progress" for their overall goal progression average.



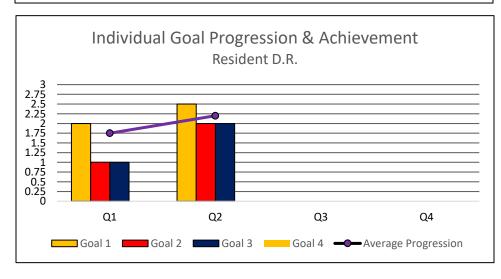
On Target

Resident N.W. was able to progress through their goals, this quarter, with 1 goal being successfully completed, 1 being between marginal/minimal progress (1.7) and 1 goal having minimal progress. Overall, the average goal progression for the 2nd Quarter was just under a marginal average of 2, coming in at 1.7, the same as Quarter 1. N.W. had a new goal (goal 4), which averaged minimal progression this quarter.



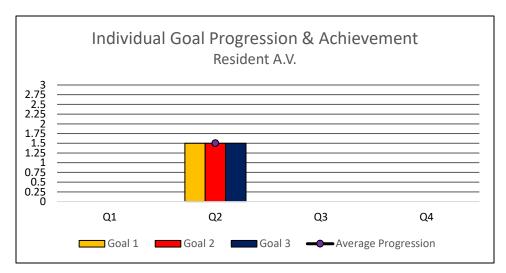
On Target

Resident D.B. was able to improve significantly with his progression through his goals, this quarter, having successfully completed 1 goal and 2 goals between marginal/minimal progress. Overall, the average goal progress for the 2nd Quarter was just barely below marginal progress (1.97).



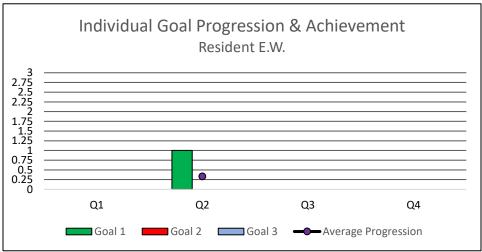
On Target

Resident D.R. was able to progress, through her goals, this quarter, having 2 goals with marginal progress and 1 goal being successfully completed. Overall, the average goal progress for the 2nd Quarter was just above marginal progress (2.20). D.R.'s 4th goal was developed at the end of the quarter with no time for progression.



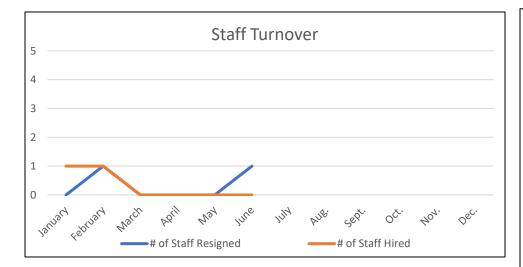
On Target

Resident A.V. was placed in the Lodge Program on 4.7.2025. For the 2nd Quarter of 2025, A.V. averaged marginal/minimal progression through her goals (1.5).



On Target

Resident E.W. was placed in the Lodge Program on 5.5.2025. E.W. made minimal progress on goal 1, but 0 progress on goals 2 and 3, during this quarter. E.W.'s overall progression average was .33, well below minimal progression. E.W. was unsuccessfully discharged from the Lodge Program on 6.17.2025.



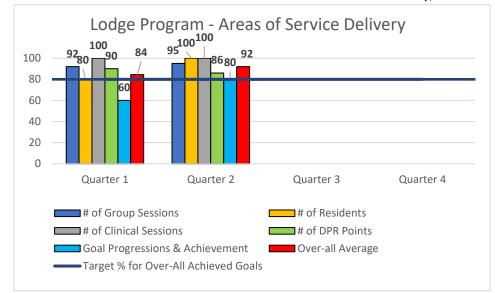
On Target

During this quarter, Clear Creek Farm had 1 staff member resign their position and did not have any new hires. During the 2nd Quarter of 2025, the average turnover rate was 9%, which matched the 1st Quarter of 2025.

<u>Plan</u>

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 2nd Quarter of 2025, the Lodge Program achieved the target goal in 5 of the 5 areas of service delivery, with an over-all average for the combined areas of service delivery being 92%, an 8% increase from Quarter 1.

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.

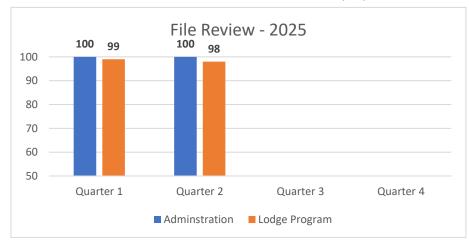
During this 2nd Quarter of 2025, Clear Creek Farm had 7 MCPs, providing data for tracking goals. Overall, total goal achievement during this quarter was 70%, a decrease of 5% from the 1st Quarter, 2025. For the "Self" category, residents achieved 62% (13/21) of goals, for the "Social" category, residents achieved 79% (11/14) of goals, and for the "Programming" category, residents achieved 71% (15/21) 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 2nd Quarter of 2025, there were 5 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 80% "Yes" and 20% "Most of the Time" on "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." For the question "What aspects of the program do you feel have helped you improve yourself?" a resident wrote "Some of the staff and just wanting to be the person everyone wants me to be but the support here has helped me a lot."

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 2nd Quarter of 2025, Clear Creek Farm conducted a file review for the administration office, as well as 5 current open resident files, 2 closed resident files, during this quarter. The administration office achieved a 100% compliance, while the Lodge Program achieved 98% compliance, only missing 3 monthly mentoring forms.

Section Five - Stakeholder Survey Satisfaction

Clear Creek Farm values stakeholders' 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 2nd Quarter of 2025, we received 5 of 7 (71%) Resident Health and Wellness Surveys, 6 of 11 (55%) Staff Satisfaction Surveys, 3 of 7 (43%) Placing Agency & Appointed Partners Surveys, as well as 0 of 3 Parent Surveys. All other surveys are administered bi-annually (April & October) or annually (October).

Section Six – Improvement Plans

For the 2nd 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 October 15, 2025.

Section Seven - Recognition

Clear Creek Farm would like to recognize our tenure staff, as well as a few other staff who have worked in the Lodge Program for 1-3 years! Lance Miller reached his 7-year mark in June! Ashley Inman will reach her 2-year mark in July, as well as Jennifer Friesthler, who reached her 1-year mark in April! We will continue to recognize and celebrate our other staff during future reports. Thank You!!



Clear Creek Farm would also like to recognize and congratulate all our residents who were able to work through the previous school year, earning their required credits and progressing into the next grade level. For the 4 residents that completed their school year while being placed in the Lodge Program averaged a GPA of 2.95, which is exceptional! The individual GPAs were 3.85, 3.00, 2.25 and 2.71. This is an amazing achievement by all residents!

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

(937) 498-9445

Clear Creek Farm Quarterly Risk Management Report – Quarter 2, 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 5 maintenance reports, during the Quarter 2, 2025.

There was a drain plug in a resident's bathroom sink that needed reattached underneath the sink, the office gutter needed a debris cleanout, the refrigerator line in the Lodge Program needed fixed due to leaking, as well as the staff bathroom exhaust fan in the Lodge needing replaced and a bedroom intercom needing reattached to the wall.

Grievances/Complaints

Clear Creek Farm did receive 0 grievances/complaint forms during Quarter 2, 2025.

Accidents

Clear Creek Farm had 0 vehicle accidents during Quarter 2, 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 2, 2025, Clear Creek Farm had a total of 35 incidents of medical emergency, with 0 being identified as Critical Incident Reports. 14 incidents included non-routine medical appointments for various medical concerns such as illnesses, x-rays, UTI symptoms, minor burns, dental and birth control patch issues. There was a total of 3 incidents for missed medications or medication errors by staff, 1 missed medication due to shortage, 10 were resident refusal and 1 incident of AM/PM medications being mixed up. There was 1 incident of a resident throwing up their medications. There were 4 incidents of ER visits due to suicidal threats/attempts and 1 ER visit due to severe stomach pain.

Incident of Resident Misbehavior

During Quarter 2, 2025, Clear Creek Farm had a total of 23 incidents of resident misbehaviors, with 0 being identified as a Critical Incident Report. There was 1 involving school refusal, 13 were self-harming attempts/behaviors, 5 for behaviors such as; punching walls, screaming, cussing and threatening staff/others. There were 2 incidents of residents going awol and 2 for their return.

Incident of Passive Physical Restraint (Behavioral Management Interventions)

Clear Creek Farm had 1 situation that resulted in behavioral management interventions and/or incidents of passive physical restraints during Quarter 2, 2025, which was also identified as a Critical Incident Report (See Below). A resident had barricaded herself in her bathroom and once staff were able to get into the bathroom, the resident had tied a shirt around her neck and was attempting to suffocate herself.

Incident of Suspected Child Abuse or Neglect

Clear Creek Farm did not have any incidents of suspected child abuse or neglect during Quarter 2, 2025.

Incidents of Community Engagement

Clear Creek Farm did not have any incidents of community engagement during Quarter 2, 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 2, 2025, Clear Creek Farm had 1 incident identified as critical incident.

Critical Incidents – Incident of Medical Emergency

There were 0 incidents identified as a critical incident during the 2nd Quarter of 2025.

Critical Incidents – Incident of Resident Misbehavior

There were 0 incidents identified as a critical incident during the 2nd Quarter of 2025.

Critical Incidents – Incident of Passive Physical Restraint

There was 1 incident identified as a critical incident during the 2nd Quarter of 2025. A resident had barricaded herself in her bathroom and once staff were able to get into the bathroom, the resident had tied a shirt around her neck and was attempting to suffocate herself. The resident was transported to Upper Valley Hospital for an evaluation and medical exam. The resident was discharged from the hospital to return to Clear Creek Farm with a safety plan.

Conclusion

During the PQI Subcommittee and PQI Committee meetings for Quarter 2, 2025, there were 0 trends identified.

2nd Quarter, 2025 (April - June)

*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.

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

- 1. Clear Creek Farm provides timely responses to referrals made to organization.
 - a. 100% (Yes)
- 2. Clear Creek Farm's admission and discharge procedures are effective and satisfactory.
 - a. 66% (Yes), 33% (Most of the Time)
- 3. Communication with Clear Creek Farm staff and administration is timely and efficient (Phone Calls, Texting, Emails, Letters).
 - a. 66% (Yes), 33% (Rarely)
- 4. Were monthly and quarterly reviews timely and helpful.
 - a. 66% (Yes), 33% (Most of the Time)
- 5. I am invited to all Master Care Plans and encouraged to provide input, feedback, and concerns.
 - a. 66% (Yes), 33% (Rarely)
- 6. Clear Creek Farm staff and administration notify me of all progress, including incident reports, academic reports, and all medical concerns/reports).
 - a. 66% (Yes), 33% (Most of the Time)
- 7. I am satisfied with the living quarters and the care of the resident's physical and mental well-being.
 - a. 100% (Yes)
- 8. Clear Creek Farm provides quality supervision of the resident.
 - a. 100% (Yes)
- 9. Clear Creek Farm staff are cooperative and display a positive and professional attitude.
 - a. 66% (Yes), 33% (Most of the Time)
- 10. Clear Creek Farm made efforts to support the resident's transition to their next placement.
 - a. 100% (Yes)
- 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?
 - a. Yes, I feel the resident we have placed at Clear Creek has made progress and positive improvements.
 - b. I believe there was some growth.
 - c. Yes. She is showing she has the ability to make improvements when in the proper "home" structure
- 12. What aspects of the program do you feel have helped your child to improve their over-all behaviors and academic achievements?
 - a. Consistency and structure.
 - b. My recent placement did not need very many credits, so her education plan was tailored to her needs.
 - c. Being able to build trust and receive simple reward/incentives. She needed a positive and caring home environment and Clear Creek is able to provide this.
- 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.
 - a. No Response.
 - b. I did not feel like communication was as strong as it was in the past, no monthly meetings.
 - c. N/A

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.

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

- 1. I feel a sense of accomplishment from my position at Clear Creek Farm.
 - a. 84% (Yes), 16% (Most of the Time)
- 2. I feel my work ethic and dedication is valued by Clear Creek Farm administration.
 - a. 68% (Yes), 32% (Most of the Time)
- 3. Clear Creek Farm provides me with the necessary tools, resources, and trainings I need to do my job.
 - a. 100% (Yes)
- 4. I am invited/notified of all Staff Meetings?
 - a. 100% (Yes)
- 5. I feel my opinion/concerns are heard and addressed during staff meetings.
 - a. 84% (Yes), 16% (Neutral)
- 6. I feel my supervisor effectively communicates things that affect my work.
 - a. 100% (Yes)
- 7. I feel comfortable taking issues or concerns to my supervisor.
 - a. 84% (Yes), 16% (Neutral)
- 8. I understand and support Clear Creek Farm's mission and vision statements.
 - a. 100% (Strongly Agree)
- 9. Administrative staff promote a positive work culture.
 - a. 68% (Strongly Agree), 16% (Agree), 16% (Neutral)
- 10. I have a positive working relationship with other staff.
 - a. 50% (Strongly Agree), 34% (Agree), 16% (Neutral)
- 11. I am over-all satisfied working for Clear Creek Farm.
 - a. 84% (Strongly Agree), 16% (Agree)
- 12. What do you like about your position at Clear Creek Farm and what do you dislike?
 - a. No Response
 - b. No Response
 - c. There is a genuine team atmosphere that is promoted amongst staff that will help the kids meet their goals. Ultimately it will be up to the kids and their willingness to change their circumstances. I do not believe as a consequence a child should be made to miss a practice or any other activity they have committed to.
 - d. I like being able to help youth and provide a place they can feel safe, supported, and encouraged to grow.
 - e. I love that I have a positive relationship with my supervisor and that she is always accessible, helpful and supportive. She keeps things running smoothly.
 - f. I like that I am able to help youths who are in need of it. I also like that I get to be a person that the kids look up to.
- 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?
 - a. No Response
 - b. No Response
 - c. Promote as many off-campus activities, as possible, interacting with other clubs, organizations etc.
 - d. No Response
 - e. Offer therapy/service dogs @ CCF or staff bring their dogs with the right training and papers to show that it is a safe dog.

- f. I think that it would be a good stress reliever/coping strategy if we could have therapy dogs come out some times for the kids.
- 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.
 - a. I'd keep my eye on [Name Redacted], She makes multiple staff uncomfortable. Constantly cussing, talking badly about others, being petty. Took pictures of another staff member and showed/sent them to others to make fun of how they looked. Ignores rules. Very buddy-buddy with Ashley. I also hear multiple staff saying there is no point in talking to Program Coordinator or Director about anything cause "nothing will get done." This is about anything in general. I personally think [Name Redacted] needs talked to about maturity and professionalism. I've had 4 staff come to me about all of this as well as me experiencing it.
 - b. No Response
 - c. You guys do great.
 - d. No Response
 - e. N/A
 - f. I can't think of any feedback, because the PC, Ashley, does a very good job of being there for her staff. She is very supportive and dependable.

Resident Health and Wellness Survey (All MCP Meeting)

- 1. Clear Creek Farm staff ensure my medical and clinical needs are met.
 - a. 80% (Yes), 20% (N/A)
- 2. Clear Creek Farm staff encourage me to use healthy coping skills to handle my daily problems/issues/stressors.
 - a. 80% (Yes), 20% (N/A)
- 3. I feel that I am treated well and with respect by Clear Creek Farm staff.
 - a. 60% (Yes), 20% (Most of the Time), 20% (No)
- 4. I feel my safety and well-being is important to staff, at Clear Creek Farm.
 - a. 60% (Yes), 20% (Most of the Time), 20% (No)
- 5. Clear Creek Farm staff let me know when I am doing well or making good decisions.
 - a. 80% (Yes), 20% (No)
- 6. Clear Creek Farm staff listen to me when needed and allow opportunities for me to respectfully voice my opinion.
 - a. 80% (Yes), 20% (No)
- 7. Clear Creek Farm staff are sensitive to my cultural background (Race, Religion, Ethnicity).
 - a. 60% (Yes), 20% (N/A), 20% (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. 80% (Yes), 20% (Most of the Time)
- 9. As I have progressed through the program, I have made positive improvements, personal growth and have developed better decision-making skills.
 - a. 40% (Yes), 40% (Most of the Time), 20% (N/A)
- 10. What aspects of the program do you feel have helped you to improve yourself?
 - a. Nothing really has helped me here at ccf.
 - b. Coping Skills
 - c. A lot of it did
 - d. I honestly have no clue.
 - e. Some of the staff and just wanting to be the person everyone wants me to be but the support here has helped me a lot.
- 11. Do you have any suggestions of changes/modifications to the program that would better help Clear Creek Farm serve youth in placement?
 - a. Not favor one or two over the others.
 - b. None
 - c. No.
 - d. There is nothing you guys can change it's all up to me and I knew that.
 - e. I feel like when someone does something sometimes the backlash hits everyone.
- 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. Gymnastic Room
 - b. Gaming Room, Music Room
 - c. Movie Theater, Gaming Room
 - d. Movie Theater
 - e. Indoor pool lol Buy a lifeguard lol

^{*}Total respondents for 2nd Quarter, 2025 - 5 of 7

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.