

**Monarch School**  
**2016-2017 Parent Satisfaction Survey**

In an effort to maintain high standards and quality of service, we are seeking your input on the educational programming your child received this academic year at Monarch School. Your participation in this survey is very important to us and your responses will be treated with confidentiality. Please Note: we've updated this year's survey to more closely reflect the Ohio Department of Education's "Special Education Parent Survey." Please answer the following questions and return the completed survey in the self-addressed, stamped envelope **by Friday, July 21, 2017 to:**

**ATTN: Debra Mandell, Monarch School, 22001 Fairmount Boulevard, Shaker Heights, Ohio 44118**

1. Your name (person completing the survey) – *optional* \_\_\_\_\_
2. Your email address (person completing the survey) – *optional* \_\_\_\_\_
3. Name of student – *optional* \_\_\_\_\_
4. For how many years has your child attended Monarch School? \_\_\_\_\_

**Please check one response for each of the statements below:**

**Overall:**

- |  | Very Strongly Disagree   | Strongly Disagree        | Disagree                 | Agree                    | Strongly Agree           | Very Strongly Agree      |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 5. My child enjoyed his/her experiences at Monarch School.                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. My child benefitted from his/her experiences at Monarch School.                 | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. My child's improvement this school year was higher than expected.               | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. I am satisfied with the services my child received this year at Monarch School. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**Staff/Parent Collaboration:**

- |   |                          |                          |                          |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 9. Staff acted in a professional manner.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. Staff helped me understand my child's needs.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. Staff explained the goals and objectives of my child's program.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. Staff regularly communicated with me about my child's performance and progress.                         | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Staff were available to speak with me.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. Staff treated me as a team member.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Staff sought my input.  | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 16. Staff encouraged me to participate in the decision-making process.                                      | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 17. I had an opportunity to share ideas, concerns and goals for my child.                                   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 18. I was considered an equal partner with teachers and other professionals in planning my child's program. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**Staffings / IEP Meetings / Evaluations:**

- |   |                          |                          |                          |                          |                          |                          |
|---|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 19. The team staffings effectively helped me understand my child's program.                     | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 20. At the IEP meeting, we discussed how my child would participate in statewide assessments.   | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 21. At the IEP meeting, we discussed accommodations and modifications that my child would need. | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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**Please check one response for each of the statements below:**

**Staffings / IEP Meetings / Evaluations (cont.):**

	Very Strongly Disagree	Strongly Disagree	Disagree	Agree	Strongly Agree	Very Strongly Agree
22. All of my concerns and recommendations were documented on the IEP.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
23. I received regular communication regarding my child's progress on IEP goals.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
24. My child's evaluation report was written in terms I understood.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
25. Written information I received was written in an understandable way.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**The School...**

26. --- The school's staff was available to answer parents' questions in numerous ways (face-to-face meetings, phone calls, emails).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
27. --- gave me choices with regard to services that addressed my child's needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
28. --- offered parents training about special education issues.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
29. --- gave parents the help they may have needed to play an active role in their child's education.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
30. --- showed sensitivity to the needs of students with disabilities and their families.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
31. --- respected my cultural heritage.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
32. --- ensured that I received a copy of "A Guide to Parent Rights in Special Education" formerly known as "Whose IDEA Is This?" [special education procedural safeguards from the Ohio Department of Education].	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
33. --- provided information about agencies that could assist my child in the transition from school to adulthood (only if age appropriate).	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Since my child's enrollment at Monarch School...**

34. I have had more time for routine chores and taking care of personal needs.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
35. I have had an increased opportunity to interact with peers, friends and/or family on a weekly basis.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
36. I have observed fewer behavioral problems at home.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
37. My child's ability to communicate basic wants and needs has improved.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
38. I am better able to take my child into the community to restaurants, stores, etc.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
39. The overall quality of our family's interactions has improved.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Suggestions/Comments:**

40. We are always looking for ways to improve your child's experience at Monarch School. Please provide additional suggestions and comments below.

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**2016-2017 Monarch Webinar/Lecture Series:**

**Topics: Functional Communication; Neuropsychological Evaluation & Intervention; Navigating the Transition into Adult Services; STABLE Accounts; Autism & Anxiety; Current & Emerging Technology; Communication Innovations; Art, Music & Recreational Therapy**

41. If you attended, please rate the overall value (e.g., usefulness and effectiveness) of our webinar series. If you indicated "fair" or "poor" please explain why.

- Excellent       Good       Fair       Poor

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42. Which timeframe is most convenient for you to attend a webinar/lecture?

- Morning (11am-12pm)       Afternoon (3-4pm)       Evening (7-8pm)

43. Please provide recommendations for future topics and/or presenters.

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