

Your feedback is important to Life Without Barriers (LWB). If you would like to send us feedback please answer as many, or few, questions as you want to. You can ask someone to help you do this if you like.

### Please Tell Us About You

<b>Name</b>	
<b>LWB Supports Received</b>	
<b>Do you want us to contact you?</b>	<input type="checkbox"/> No <input type="checkbox"/> Yes, please list the best way to contact you
<b>Preferred Contact Method</b>	

### Please Tell Us About Your Supports at LWB

<b>Please mark the face that is true for you</b>	<b>Agree</b>	<b>Disagree</b>	<b>Unsure</b>
<b>LWB staff listened to me</b>			
<b>I was happy with my LWB support workers</b>			
<b>LWB staff supported me to reach my goals</b>			
<b>Staff were able to do all the things which they said they could do</b>			
<b>I enjoyed the activities provided by LWB</b>			
<b>I knew who to talk to if I had a question or complaint</b>			
<b>Staff would help when I had a question or complaint</b>			
<b>I received useful information about my rights and what I could do</b>			

**What worked well for you at LWB?**

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**What didn't work well for you at LWB?**

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**Why are you leaving LWB?**

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**Which provider are you moving to for your support?**

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## Advice to Client – Collection of Information

Personal information collected on this form will be retained and used for planning and quality improvement by LWB. If you want to access your personal information or to obtain a copy of the LWB Privacy Policy, please go to our website [www.lwb.org.au](http://www.lwb.org.au)

### Return this form to:

Life Without Barriers - DSSC  
352 Hunter Street  
Newcastle NSW 2300

or email to [yourlwb@lwb.org.au](mailto:yourlwb@lwb.org.au)