

# WINDA-MARA ABORIGINAL CORPORATION

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## Q9

## WMAC ORGANISATIONAL FEEDBACK

V2.1, 18 January 2024

Winda-Mara needs your help to review and improve our processes  
and how we provide services for you and your family.

Name: *(optional)* \_\_\_\_\_ Date: \_\_\_\_\_

Age Group:  <14  14-30  31-44  45-54  55-64  65-74  75+

Gender:  Male  Female  Non-specified  Other

Do you know how to access Winda-Mara Services?

Yes  No

Do you believe you have a good understanding of the services Winda-Mara provides?

Yes  No

Has someone in your family made use of Winda-Mara services in the past 12 months?

Yes  No

Specify services: *(optional)*

How was the experience?

Was the service provided in a professional, confidential and respectful manner?

Yes  No

Can you identify where we can make improvement?

Are there any services that you would like to see Winda-Mara offer/provide?

**In your dealings with Winda-Mara, what do you think it does well?**

**What areas/services do you think Winda-Mara can improve in?**

**Can you provide suggestions on how Winda-Mara might achieve the suggested improvements?**

**Which community do you see yourself as best associated with?**

Heywood  Hamilton  Portland

**What do you see the communities biggest needs are?**

**Do you believe Winda-Mara is meeting these needs?**

Yes  No

**If no, how do you think this could be achieved?**

**Your voice is important in the review and improvement of WMAC services and processes**

**Do you have suggestions on how we might improve community engagement or obtaining feedback?**