Lake County
Board of Developmental Disabilities/Deepwood
Annual Input Survey

November 2 – 25, 2026

1. Please identify your role. I am a(n):
   - ☐ Individual receiving services
   - ☐ Parent / Guardian / Family Member of an individual receiving services
   - ☐ Provider of service
   - ☐ Community Member
   - ☐ LCBDD Employee
   - ☐ Choose not to disclose
   - ☐ Other: _____ _____

Think about the experiences you had with the County Board this year and review our 2026 – 2028 Strategic Plan.

2. What did you like about those experiences or services?

3. Was there anything that did not work well or that you did not like?

4. Is there anything you would like us to improve or do you have thoughts on how we can enhance the services and supports we provide in 2027?

You can submit your responses anonymously, or if you are open to us contacting you regarding your input, please fill out the below information:

Name:

Phone Number: