

## Client Feedback Form – CYC Health Trainers/ Stop Smoking

Client's Name.....Ollie.....

Thank you for offering to share your experiences of our service in more detail. Below are a few additional questions which we'd like to use as part of shared experiences and case studies via CYC Health Trainer communications channels.

1. What made you join the Health Trainer- stop smoking service?

I have tried to get help before but got was only offered patches, which did not work, and no other support. This was my last hope and if I had known about it earlier I would have quit sooner

2. What is the biggest achievement of your journey with the Health Trainer- stop smoking service that are you most proud of?

Getting past the first 4 weeks

3. What did you find most challenging and how did you overcome that?

The first 4 weeks It would have been very difficult had the support not been there The problem is what to do with your hands and it was the suggestion of use a vape that solved it

4. Has being part of the Health Trainer- stop smoking service benefitted you? Or your family? If so, how?

I do feel better and hope It will improve as time passes and my wife is pleased as she does not smoke

5. Did you learn anything you didn't know before joining the service? If so, what?

The suggestion of using vapes. Patches and other types of nicotine replacement never worked but these have and I am in control of the amount of nicotine, which will be reduce to zero, and the excellent support

6. Is there anything else you'd like to add?

This has been a very positive experience and with the excellent staff needs to be made more available to people who are having difficulty giving up smoking

Thank you