How to Create a Robust Volunteer Program in Yo Skilled Nursing Facility: Handbook Feedback Form	
Name:	CALIFORNIA ASSOCIATION OF HEALTH FACILITIES VOLUNTEER ENGAGEMENT PROJECT
Date:	
Facility Name:	
1. What did you like most about the handbook?	
2. What did you like least about the handbook?	
3. Will you refer back to the handbook in the future? Why or why not	?
4. Would you recommend the handbook to a facility wanting to start a not?	a volunteer program? Why or why
5. How can the handbook be improved?	

Thank You! Your feedback will help us to improve our handbook! Scan and email this form to <u>thand@cahf.org</u> or fax to 916-441-6441