| Company BRUCE TELECON | Date | | |
|-----------------------|-----------|--|--|
| Consultant's Name | | | |
| Location Turnan | Your Name | | |

Employee Wellness Solutions Network Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | WANTED TO DEVELOP FITNESS LEVEL + IMPROVE PHYSICIALLY. IMPROVE GATING HABITS |
| What did you like most about the consultation? | I ENSOY RECEVENCE IDEAS ON HOW TO BETTER MYSELF AT A PACE I CAN HANDLE WITHOUT PRESSURE |
| What areas of the consultation could use some improvement? | NA |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | SO FAR I HAVE MARE HEAD WAY IN LOSUNG WEIGHT BUILDING MUSCLE MASS |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | THIS WOLLD MAYBENOT HAVE HAPPENED IF I AND NOT HAVE SONGONE TO PUSH ME ON OR TO BE THERE GOR ME. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | NA |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | WEIGHTLOSS |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | POLETINE AS SUCCOESTED |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | MY WELLNESS PERSON KTERS WE ON TRACK + HERS ME TO DEVELOP MY PILYSICAL TRAINING PROGRAM. ALSO GIVE ME IDEAS ON HOW TO TREAT INTURIES |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | ME IDEAS ON HOW TO TRUST INJURIES (YES) NO |
| What products or services has your consultant referred you to, if any? | |

| Ticase face your confidence with your consultant 5 knowledge of. | | |
|--|-----|----------------|
| Topic | 1-5 | Please Explain |
| Fitness | 4 | |
| Nutrition | 5 | |
| Stress management techniques | 4 | |
| Time-management | | NA |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Company | Date |
|-------------------------------|-------------------------|
| Consultant's Name ANGIE MAILH | OT |
| Location WATERRO (LIBRO) | Your Name MARIAN RANKIN |

Employee Wellness Solutions Network Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|------------------------------------|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | |
| What did you like most about the consultation? | very easy to talk to & information |
| What areas of the consultation could use some improvement? | New easy to talk to & information |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Lete us motivated. |
| | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Rolphul |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO For sure |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | · |
| Stress management techniques | 5 | |
| Time-management | 5 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | | |
|--|--|--|
|--|--|--|

| Company LIBRO FINANCIAL GOUT | 2 Date July 5/13 |
|---------------------------------|--------------------------|
| Consultant's Name Angie Mailhot | |
| Location London East | Your Name Kathlen Seaman |

Employee Wellness Solutions Network Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Stress! |
| What did you like most about the consultation? | Suggestions that I hadn't thought of |
| What areas of the consultation could use some improvement? | More dates, Flexible to Volumes of work |
| Do you feel that your consultant is able to help you achieve your goals? | (YES) NO |
| Please explain | All suggestions of how to reduce stress, the reminde to take time for myself, walking, etc - all helpful |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Should continue in our workplace and be a permanent support to staff |

| | Ţ |
|--|--|
| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | More visits |
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Walking, drinking water more water, seeing other health specialists |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | Twice weekly seeing chiropraetic clinic |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Confirmation of health, other suggestions to keep stress levels down |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|--|
| Fitness | 3 | havint really discussed this |
| Nutrition | 4 | Sters very knowledgalla |
| Stress management techniques | 4 | walking, yoga, voutine |
| Time-management | 3 | haven't discussed to much other than making suse |
| | | to take I Do - VSelP |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | More Group Sessions, Lunch + Learn progr Suggestions of websites, reading materials, more meetings | ams |
|--|--|-----|
|--|--|-----|

| Company Libro Financial | Group Date July 9,2013 | |
|------------------------------------|------------------------|--|
| Consultant's Name <u>Agric Mai</u> | That | |
| Location Whatford | Your Name Matt McLean | |

Employee Wellness Solutions Network Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 🐠 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | I felt is was a good opportunity to make some improvements to my health/lifestyle. |
| What did you like most about the consultation? | - no pressure - provides positive Reedback. |
| What areas of the consultation could use some improvement? | rone |
| Do you feel that your consultant is able to help you achieve your goals? | VES NO |
| Please explain | I think she is good at providing positive, manageable suggestions. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Jour performance at work and home. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | | |
| Nutrition | | |
| Stress management techniques | | |
| Time-management | | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Company Libro | Financial Group | Date | 15/2013 |
|-------------------|-------------------|--------------------|----------------|
| Consultant's Name | Angie Mailhot | | |
| Location 1867 | Jundas St. London | <u>⊘</u> Your Name | Brian Aalbers. |

Head Office Consultation Feedback Survey



| How many wellness consultations | 3 4 (5) 6 7 8 9 10 +10 |
|--|--|
| have you had? | 0 4 (0) 0 7 0 0 10 410 |
| How helpful was the consultant? | 1 2 3 4 (5) |
| (1=not, 5=very) | 1 2 3 1 9 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Nutrition for family as our family grows in numbers. |
| What did you like most about the consultation? | Open to all topics |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Very knowledgable on topics + sends relevant information. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| | Providing relevant + timely information to staff helps |
| Please explain | Providing relevant + timely information to staff helps them stay personally motivated. This shows up in |
| | now they are able to excel at work each day. |
| | J |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | New, quick + healthy reciepes that fit into our schedules. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|--------------------------|
| Fitness | 5 | Strekher |
| Nutrition | 5 | Recipies + alternatives. |
| Stress management techniques | 4 | |
| Time-management | 4 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Company Libro | Date July 5/13 |
|---------------------------------|------------------------|
| Consultant's Name Angle Mailhot | |
| Location London East | Your Name Kathy Pelley |

Employee Wellness Solutions Network Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Needed some tips & ideas on a more healthy lifestyle. |
| What did you like most about the consultation? | More healthy lifestyle. Very friendly, down to earth. |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | More exercise |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | better eating tips at work exercises |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 4 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would | |
|---|--|
| help improve our wellness programming? | |

Company <u>Libro Financial Group</u> Date <u>July 5 2013</u>.

Consultant's Name <u>Angie</u>

Location <u>London East Branch</u> Your Name <u>Mereduth Bouckley</u>

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | (3) 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Gives me someone to be accountable to for my goals. |
| What did you like most about the consultation? | Angie is very easy to tack to. |
| What areas of the consultation could use some improvement? | not sure. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | I am accountable to her. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Gives me someone to talk to about handling stress. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | VO · |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Healthy eating/weight loss |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Accountability. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | sent me some hardouts. |

| i icase rate your confidence with | in your consultant o knowledge or. | |
|-----------------------------------|------------------------------------|----------------|
| Topic | 1-5 | Please Explain |
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 5 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Location | 0 | Your N | lame | |
|---------------------|-------------|------------|-----------|---|
| Consultant's Name _ | Angie | `` | 0 / | |
| Company <u>Libo</u> | . Financial | Group Date | July 5/13 | • |

Head Office Consultation Feedback Survey



One-on-One Consultations

| · | |
|--|---|
| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
| How helpful was the consultant? (1=not, 5=very) | 1 2 (3) 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Family: Ilresses, want to get healthy |
| What did you like most about the consultation? | easy to tark to |
| What areas of the consultation could use some improvement? | I would like a dictician to be available. She can send abouments but wout aplan it means making to me |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | I am all about time line + specific instructions line and someone to look @ when I'm pating and Sou what is great + bard Nece |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | more of a direction or program (YES) NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Again a plan for people make more sence then just meeting to chat we have no follow up or action plan |
| | (so have no follow up or action pla |

re have no follow up or action plan
nothing against her (she is

| | | i |
|--|---|-------|
| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | Explained dove. | ı (|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | I have begun running butnot ob to anything to Consultant. | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often | |
| Please explain. | | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO | |
| If yes, which topics are of interest to you? | Actual meal plans (7 day) + writh action plan. | 0 |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 | l |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |) |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO | |
| What products or services has your consultant referred you to, if any? | Just document an nutrition. | |

| i icase rate your confidence with | . you. oo. | your concurrent o knowledge on | | |
|-----------------------------------|------------|--------------------------------|--|--|
| Topic | 1-5 | Please Explain | | |
| Fitness | 2 | All documents no examples or | | |
| Nutrition | 1 | walking metholigh how | | |
| Stress management techniques | NA | to do it or what to cat. | | |
| Time-management | 5 | | | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | See above. |
|--|------------|
|--|------------|

| Company Libro Financial (| Stoup Date July 9, 2013 |
|----------------------------|---------------------------|
| Consultant's Name Angle Ma | ilhot |
| Location Watter | Your Name Jenny Esselment |

Head Office Consultation Feedback Survey



| One-on-One Consultations | · : 1 |
|--|---|
| | not sure - Ithin K |
| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | to have someone to talk too, makes me feel accountable & it's great |
| What did you like most about the consultation? | Angie is so easy to talk too Eshe listens & always sends me emails with recipes or exercise/stretches |
| What areas of the consultation could use some improvement? | NONE |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | The established a new daily walk routine & also really looking at healthy snacks for me & my, |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO family |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | She's inspirtional & motives me to want to do more. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | NIA |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | -strengthening my back (asportedent- snacks that are healthy injur sharing success stories & godding mot |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I trust her & feel the need to want to be the healthight me |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | - having a plan/goal & Keeping accountable for them |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your — consultant referred you to, if any? | many emails, full of information we discussed. |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 5 | |

| Other Programming | No to Improvements |
|--|--|
| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | It's awesome - Keep up the great work!! |

| Company L.blo | had and cial G | Louf | Date | mly 20.3. | |
|-------------------|----------------|-----------|-----------|-----------|---|
| Consultant's Name | ANGIZ | MarlinoT. | | | - |
| Location | Tha Tolot | | Your Name | Nanday | |

Head Office Consultation Feedback Survey



One-on-One Consultations

| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Convenience NOOD/DESILE TO Marke Some Changes. |
| What did you like most about the consultation? | Angie Is VORT SullorT.UE. Not OverWHELMING - RECOMMENDS AND ENCOURAGES SMALL, MANDAGER BLE CHANGES |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | ASTER ADOUTE- SMALL, MONTAGENBLE CHANGES, ABLE TO FOLLOW UP @ NEXT CONSULTATION |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | THE CONVENIENCE OF ON SITE CONSULTATION- HARS MEANS I FIT IT IN. ADDITIONALLY - BETTER GENERAL HEALTH BOTH PHYSICAN + WENTER IMPROVES WOLK |
| | POTAL PHISICAL + NEWTON IMPROVES WOLK |

The end.

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | DRINKING WATER ENTING BREAKFAST PLANNING MORLS + SNACKS |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | United CHANGES IS Important to ME |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Accountability. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|-------------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | N/A | Howart Discusser. |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Company | -1BRO | FNANCIAL | GROUP | Date | JULY | 12,2013 |
|----------------|-------|----------|---------|-----------|------|------------|
| Consultant's N | lame | ANGIE | MAILHOT | | | |
| Location | ARKON | JA | | Your Name | JIU | - VAN LOON |

Head Office Consultation Feedback Survey



One-on-One Consultations

| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | ALWAYS INTERESTED IN HEALTHY OPTIONS |
| What did you like most about the consultation? | IT IS A GOOD REMINDER TO THINK ABOUT GOOD HEARTH. |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | SHE GAVE HE SOME EXERCISES, AND THEN HAVE HELPED. SHE GAVE HE A FOOD OP TON THAT IS GREAT. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | IT IS GREAT TO DO THE DESKERSIBES AS A TEAM. SHOWS OUR COMPANY IS CONCERNED ABOUT OUR |

WELLNESS.

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | STRETCH FOR MY LOWER BACK. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | EXERUSES. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO BUT I THINK THEY ALL ARE PARTICIPATI |
| What products or services has your consultant referred you to, if any? | CHIA+ FLEX SEED GROUND |
| | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 4 | JOB . |
| Nutrition | 4 | A GREAT |
| Stress management techniques | 4 | SHE |
| Time-management | 4 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | ONCE | Every | 2 MONTHS | Would | ВЕ | GREAT. |
|--|------|-------|----------|-------|----|--------|
|--|------|-------|----------|-------|----|--------|

| Company _ | LIBRO | FIN | AN CI | AL | Date _ | JL | WY 11/13 | 5 |
|------------|---------|-----|-------|------|---------|-----|----------|-------|
| Consultant | 's Name | ANE | 31E | MAIL | TOH_ | | | |
| Location | ARKE | AIN | PRAN | 1 CH | Your Na | ame | BRENDA | CLARK |

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | 1+mink its a great benefit to have advant |
| What did you like most about the consultation? | we want in terms of wellness of Dengle is there for support |
| What areas of the consultation could use some improvement? | None that I can think of. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | It keeps me on track & accountable to someone |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | both in the workplace of at home |

| F | |
|--|--|
| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | NOVE |
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Weight Loss + family much planning / levertise |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | most of the time I try to impleme an on pieces of what has been recomm |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | sne's easy to talk to and I want to meet with her to stay on track |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | None at this time except tools I can have at my fungertipo to help keep me |
| Please rate your confidence with | vour consultant's knowledge of: |
| Topic | 1-5 Please Explain |
| Fitness | 5) 1-think angie really knows |
| Nutrition | 5 (har staff in all areas & has |
| Stress management techniques | 5] access to many useful tools |
| Time-management | 5 I that she can share |
| Other Programming | |
| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | 1 think its great! |

| Company Libro Fi | nanga Date | July 11/13 |
|--------------------|--------------|-------------|
| Consultant's NameA | a e | |
| Location Arkona | Your Name | Matt Butter |

Head Office Consultation Feedback Survey



| How many wallness consultations | |
|--|---|
| How many wellness consultations have you had? | 1 3 4 5 6 7 8 9 10 +10 |
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 ② 3 4 5 |
| What motivated you to book a consultation? | I felt like I was forced to. I didn't have much interest but figured I might see what it's all about. |
| What did you like most about the consultation? | |
| What areas of the consultation could use some improvement? | The consultant did a fine job. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | It's just not for me. Nothing against the consultant. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | As mentioned, it's just not for me. I be lieve others do got value fromit. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I have no interest in work out plans or over the top healthy foods. I'm in the minarity though, Many do find value. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | NIA 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO MAYBE, IT DEDENOS |
| What products or services has your consultant referred you to, if any? | |

| i lease rate year commaches with | nountaint o knowledge on | |
|----------------------------------|--------------------------|--------------------------------|
| Topic | 1-5 | Please Explain |
| Fitness | 5 | I've only had I concultation, |
| Nutrition | 5 | 50 I'm not sure, but I believe |
| Stress management techniques | 5 | |
| Time-management | 5 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | | | |
|--|--|--|--|
|--|--|--|--|

| Company Libro Financial Gr | oup Date July 11 13 |
|------------------------------|----------------------|
| Consultant's Name Angle Mail | lhot |
| Location Arkona | Your Name Anne Vanos |

Head Office Consultation Feedback Survey



One-on-One Consultations

| How many wellness consultations have you had? | (3) 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | I want to improve mylifestyle |
| What did you like most about the consultation? | Just talking with Angie about onything. |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | VES NO |
| Please explain | To me, my goals are small for now, baby steps. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Somewhat. I would like to I am eating healthy through |
| | |

the day. As well, maybe 1 go for a walk during my

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Changing what I choose to eat at certain meal times. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | 1 like talking to her about things. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| T: | | | | |
|------------------------------|-----|---------------------------|--|--|
| Topic | 1-5 | Please Explain | | |
| Fitness | 4 | Angie is very fit herself | | |
| Nutrition | 4 | therefore I do trust | | |
| Stress management techniques | 4 | her in her Knowledge stin | | |
| Time-management | Ч | all of these sections. | | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Company <u>Jibo</u> | Date July 11/2013 |
|--|---|
| Consultant's Name Angie | \mathcal{O} \mathcal{O} . \square |
| Location Akona | Your Name MONIQUE |
| | |
| Employee Wellness So | Alutions Network |
| Head Office Consultation F | Solutions Network |
| riead Office Ooffsuitation is | -ail dark |
| One-on-One Consultations | - No hard work |
| How many wellness consultations | |
| have you had? | 3 4 5 6 7 8 9 10 +10 (2) |
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 (5) |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 ③ 4 5 |
| What motivated you to book a consultation? | To see whats new sout there, and to help stay notivated |
| What did you like most about the consultation? | Friendly, Easy to Talk to |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | when we are both awarlable |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | Just not being able to |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | NA |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | recipes, sleeping tips |

| Topic | 1-5 | Please Explain | |
|------------------------------|-----|----------------|--|
| Fitness | 4 | | |
| Nutrition | 4 | | |
| Stress management techniques | 4 | | |
| Time-management | 4 | | |

| Company LIDIO Financia Q. | Date <u>Ju</u> | h.9/13. | |
|---------------------------|----------------|---------|----------|
| Consultant's Name Pogle | | 0 | |
| Location Lordon Cast | Your Name | Shelley | Humphrer |

Head Office Consultation Feedback Survey



| How many wellness consultations | |
|--|---|
| have you had? | $\begin{pmatrix} 3 \end{pmatrix}$ 4 5 6 7 8 9 10 +10 |
| How helpful was the consultant? | 1 2 3 (4) 5 |
| (1=not, 5=very) | |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Health issues in past year. |
| What did you like most about the consultation? | personalized. She keeps track of idens-gots and what we take about. |
| What areas of the consultation could use some improvement? | On was site need basic weeky mad plans for different 90415- lose weight, combining fixed, build muscle. become vegetarian |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Sheques me into. Sanding buarro. GOAL setting. A little extry push. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | STRESS N WOR: CAN talk to someone orget ides almost markly to help. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Walking. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | HAVE NOT HAD ENOUGH time yet to determine YES NO this. |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | . , |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | - We are discooning Hyponotherpy. |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 4 | |
| Nutrition | 4 | |
| Stress management techniques | 4 | |
| Time-management | | NA. |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Company Libro Financial | Date <u>July 11/13</u> |
|-------------------------|--------------------------|
| Consultant's Name Anale | |
| Location Arkona | Your Name Annelle Looper |

Head Office Consultation Feedback Survey



One-on-One Consultations

| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 (3) 4 5 |
| What motivated you to book a consultation? | I was interested to see what it who was all about. |
| What did you like most about the consultation? | I learned some new weight exercises to do at home. |
| What areas of the consultation could use some improvement? | I feel like I meet her blc I have to, but don't have much to talk about I excerse everyday teat really heathly already. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | I already eat extreenly healthy and I find I personally don't have much to learn from Angu. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO N/A |
| Is your wellness consultation something that you feel is important within your work place? | VES NO |
| Please explain | We love the healthy recipies and tips, but just don't require a |

monthy muting. Because Our branch is so small, when she comes out, everyone gots a turn to see her. Personally at think 4 x a year would be perfect.

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | I do drink more water now. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | assaid before-small branch. don't want to losse it for everyone else so I 80. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO Probably |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|---|
| Fitness | 5 | she knows a lot about fithus |
| Nutrition | 5 | she seems to believe in 'Natural' foods |
| Stress management techniques | | -cant Say |
| Time-management | | - can't say |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | fione program & recipes, but just don't neld my one on one as often |
|--|---|
|--|---|

| Company | -IBRO | | Date | , 2 | 113 | 07 | 24 |
|-----------------|----------|-------|------|--------|------|------|-------|
| Consultant's Na | me | ANGLE | MAIL | 18T. | | | |
| Location | TRA7HROY | / | You | r Name | DAVI | O KE | MEWRE |

Employee Wellness Solutions Network Head Office Consultation Feedback Survey



| 3 4 5 6 7 8 9 10 +10 |
|----------------------|
| 1 2 3 4 5 |
| 1 2 3 4 (5) |
| 1 2 3 4 (5) |
| 1 2 3 4 5 |
| GREAT INFORMATION |
| |
| ALC GOOD. |
| YES NO |
| |
| YES NO |
| YES NO |
| |
| |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | (YES) NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 4 | |
| Stress management techniques | 4 | |
| Time-management | 7 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would | |
|---|--|
| help improve our wellness programming? | |

| Company | ibro | Date | July 25 | 13 |
|---------------------|-------|-----------|---------|--------|
| Consultant's Name _ | Anaie | mailhot | | |
| Location | porte | Your Name | JO-An | e Beye |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 🕢 5 |
| What motivated you to book a consultation? | Excitement to be healthier and word of mouth from other staff |
| What did you like most about the consultation? | She is very approachable aunderstanding & has great resource |
| What areas of the consultation could use some improvement? | Seems like 1/2 hr. is too short |
| Do you feel that your consultant is able to help you achieve your goals? | ÝES NO |
| Please explain | She has great resources and asks good questions |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | Very (YES) NO |
| Please explain | Ourstast are healthier all the way around |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Stress Mg mts |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | Road her hardouts take her advice (suggestions |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Angie is a wonderful Eriendly person whose persona makes the day! |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | Books Conselling suggestions Other handows - one page. |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|--------------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | | Have not used this |

| Is there any feedback that you can provide regarding your experience with the wellness program that would | Angie truly walks the walk talks the talk. Ste is a Great Monter and |
|---|--|
| help improve our wellness programming? | Role Model. |

Company LIBRO FINANCIAL SPOUP Date July 16/13

Consultant's Name ANGIE

Location London Downson Your Name To ANN MCKINKAY

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | I need to look after iny health. |
| What did you like most about the consultation? | Very informative, and helpful. |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | yes, we have done some internet research, and this will hopefully help me achieverny goals. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | yes, because I cannot be productive in I am feeling nox well. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Garrering info to pripoint the reason(s) I am not losing weight. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | Changing diet. Adding exercise. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Helpful info and motivation |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | naturoparts |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|--|
| Fitness | 4 | Howingoutant exercise is |
| Nutrition | 5 | Proper diet to love weight |
| Stress management techniques | 5 | 0 |
| Time-management | 5 | Agricultural designation of the state of the |

| help improve our wellness programming? |
|--|
|--|

| Company <u>(IBRO</u> | Date |
|--------------------------------|--------------------|
| Consultant's Name <u>ANGIE</u> | |
| Location LONDON - YORK ST | Your Name ED BOEPE |



| How many wellness consultations have you had? | ③ 4 5 6 7 8 9 10 +10 |
|--|------------------------------|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | increase wellness awareness |
| What did you like most about the consultation? | Simple solutions to treeping |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Heeps me forused onthe |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| . loude rate your community | | your consultant o knowledge on | | | | |
|--|---------------------------|--------------------------------|--|----------------|--|--|
| AND STREET STREET, STR | Topic | 1-5 | | Please Explain | PROPERTY OF THE PROPERTY OF TH | |
| Fitness | ess To the gas and est | 1 | | | | |
| Nutrition | - | | | | | |
| Stress manaç | gement techniques | | | | | |
| Time-manage | ement | | | | | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would | |
|---|--|
| help improve our wellness programming? | |

| Company Libro Financial Group | Date July 16/13 |
|---------------------------------|--------------------------|
| Consultant's Name Angle Mailhot | |
| Location London Downtown | Your Name Calcigh Robson |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 6 |
| What motivated you to book a consultation? | To improve my health littless |
| What did you like most about the consultation? | An the great tips Angre sends me after each consultation |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | She makes suggestions on things to try and enconrages me to along the way |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | To be successful in your work you need to make sure all the other things in your life are in check. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Meal Planning |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I try to work on at least one of the things we discuss in our meetings |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | All the great rips Angle sends me |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | Meal planning Websites Cookbooks |

| i loudo futo your communico mini | | your concurrence knowledge on | | | |
|----------------------------------|-------|-------------------------------|--------------------|--|--|
| | Topic | 1-5 | Please Explain | | |
| Fitness | | 5 | | | |
| Nutrition | | 5 | | | |
| Stress management techniques | | NIA | Haven't discussed | | |
| Time-manage | ement | NIA | Haven't discusseas | | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | Overall a great look forward to Angle. | experience and future meeting | with |
|--|--|-------------------------------|------|
|--|--|-------------------------------|------|

| Company | 0 | Date | JULY 15, | 2013 |
|---------------------|------------|---------|-----------|-------|
| Consultant's Name _ | Ange 1 | Mailhot | , | |
| Location homon | East Brond | Your Na | me Andrew | Brown |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Corporate program |
| What did you like most about the consultation? | Personalized consultation |
| What areas of the consultation could use some improvement? | Perhaps set a plan with definitive steps d progress |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | We just need to do a better gob of setting achievable goals |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | V YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | physical fitness makes us better employees a goes with mental fitness |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | we could have done better mating a personalized plan with specified I done time lines. |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | a personalized plan with specified the directives of the lines. Angle gruc me specific of retching exercises to help with other routines. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | In summer months I am not doing exercise routines as faithfully, |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | _ |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Angle changes things of - last consultation was a 20 min walk |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | None that I am aware of |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | H | |
| Stress management techniques | 4 | |
| Time-management | 4 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | | |
|--|--|--|
| programming. | | |

| Company Libro | Date July 24/13 |
|--|---|
| Consultant's Name | gie J' |
| Location Strattroy | |
| | |
| Employee Wellness So | Calettana Natural |
| Head Office Consultation Fe | eedback Survey |
| One-on-One Consultations | of made, |
| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 (5) |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | interest in personal health |
| What did you like most about the consultation? | relaxed - very informed |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | gathus unto |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | personally I had made a commentment to better health and she helps so help me in track. |
| | To help me in track |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | stretching |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Pleasant servedu & coach |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 5 | |

Other Programming

Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming?

Lus mal day upstad f sick days

allowant.

| Company LIBRO | Date <u>July 2013</u> |
|-----------------------|-----------------------|
| Consultant's Name | <u> </u> |
| Location Admin Office | Your Name |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|------------------------------------|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | -get more active, healthier eating |
| What did you like most about the consultation? | -tips to achieve goals recipes |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | -drinking more water. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| i ioaoo iato | your commoned with | , oa. oo. | iountaint o milouriougo on |
|--|--------------------|-----------|----------------------------|
| ATTENDED TO THE PARTY OF THE PA | Topic | 1-5 | Please Explain |
| Fitness | | 5 | |
| Nutrition | | 5 | |
| Stress mana | gement techniques | 3 | |
| Time-manag | ement | 5 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Company | Date 12 - 13 |
|-------------------|----------------------------|
| Consultant's Name | |
| Location Blankein | _ Your Name _ Cha Debruga_ |



| How many wellness consultations have you had? | 3 (4) 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 (5) |
| How would you rate the professionalism of the consultant? | 1 2 3 4 (5) |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 (4) 5 |
| What motivated you to book a consultation? | boing healthy , eating properly & getting a good right sleep motorated in |
| What did you like most about the consultation? | Knauledgesble, lots of into of her fingertips |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | NO NO |
| Please explain | all the little shell that didn't seem too important, is now more important |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | NO NO |
| Is your wellness consultation something that you feel is important within your work place? | VES NO |
| Please explain | it fells all It of that healthey thring is good for everyone & the |
| | emplage also benefits. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Try to dring more water. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | everything I est & Ds, I wonder "What would Angie say"? |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | greval info. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 4 | |
| Nutrition | 5 | |
| Stress management techniques | 4 | |
| Time-management | 3 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Company Libro | Date June 12/13 |
|--------------------------------|----------------------|
| Consultant's Name Angle Malhot | |
| Location Blenheim | Your Name 10mmy 1011 |



| How many wellness consultations have you had? How helpful was the consultant? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| (1=not, 5=very) | 1 2 3 4 (5) |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | mostly because of influence at work. encouraging us to go. |
| What did you like most about the consultation? | Angre is very easy to talk to, friendly not judgementar. |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | offers tips, exercises, recupes, encouragement |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | don't really use suggestions at work, more personal life |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I am already aware of what I need to do stalking with her doesn't motivate me. (my own truth, not hers) |
| Are there any topics that you wish were covered in your wellness consultations that are not? | (my own trult, not hers) |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Obligation |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | recipes, exercise tips websites. |

| i lease rate your confidence with | Tyour consultant 5 knowledge or. | | |
|-----------------------------------|----------------------------------|---------------------------|--|
| Topic | 1-5 | Please Explain | |
| Fitness | 5 | Very active : fit herself | |
| Nutrition | 5 | gives personal examples | |
| Stress management techniques | | | |
| Time-management | | | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
| | |

Company Libro Financial Group Date June 2013

Consultant's Name Angie Mailhot

Location Blenheim Your Name Suzi French

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations | 3 (4) 5 6 7 8 9 10 +10 |
|--|---|
| have you had? How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Stress -> need help. |
| What did you like most about the consultation? | ideas, suggestions. |
| What areas of the consultation could use some improvement? | Ideas, suggestions. 2 Summary of things we talked about? |
| Do you feel that your consultant is able to help you achieve your goals? | (YES) NO |
| Please explain | as well-if Stuck on a goal. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | I love it and mink it's very beneficial for staff. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | forme wellness = mental health as well - Angie is good at |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | this but feel other areas are her fortait" |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | She is here to help, lam osking for help > no good to me if I don't |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES (NO) |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | goals, suggestions, advice |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | Stress relief -> products-) not so much |
| Please rate your confidence with y | vour consultant's knowledge of: |
| Topic | 1-5 Please Explain |
| Fitness | 5 know she teaches classes |
| Nutrition | 5 Often has recipes or books |
| Stress management techniques | 3 can send me Stuff 39 yes me of |
| Time-management | 3 haven't really nowske doe |
| Other Programming | gone there per say. |

Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming?

that you can ir experience gram that would mess about this > but this seems to work best = 1 Angle Could change days would include the properties of the properties.

| Company Libro Financial Group | Date Ju | e 13/2013 |
|---------------------------------|---------------------------------------|-------------|
| Consultant's Name (Maie Mailhot | · · · · · · · · · · · · · · · · · · · | |
| Location Blenheim | Your Name | Kim Wageras |
| | | |



| How many wellness consultations have you had? | (a) 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | el reed to get back on track with my bealth - life has been very be and il an ready to get back on track |
| What did you like most about the consultation? | She is very below + Supportive. She always follows up with uponation as promised |
| What areas of the consultation could use some improvement? | nore |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | no | |
|--|---|------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | atting back on track for myself- and helping by given we some or her experiences with common experien | nces |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often | |
| Please explain. | this is due to my personal life Schodul | De |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO | |
| If yes, which topics are of interest to you? | | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 | |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Il like her beig org supportet remider of what it read to be dong | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO | |
| What products or services has your consultant referred you to, if any? | The bows sont we Information by energy that would be helpful on convent | |
| | | |

| ricase rate your confidence with | your concurred knowledge on | | |
|----------------------------------|-----------------------------|----------------|--|
| Topic | 1-5 | Please Explain | |
| Fitness | 4 | | |
| Nutrition | 5 | | |
| Stress management techniques | 4 | | |
| Time-management | 4 | | |

| Is there any feedback that you can | | - | |
|--------------------------------------|--|---|--|
| provide regarding your experience | | | |
| with the wellness program that would | | | |
| help improve our wellness | | | |
| programming? | | | |

| Company UBNo | Date Unit 24/13 |
|-------------------|------------------------|
| Consultant's Name | |
| Location Bunkin | Your Name (war kochle |



| 3 4 5 6 7 8 9 10 +10 |
|--------------------------------------|
| 1 2 3 4 5 |
| 1 2 3 4 5 |
| 1 2 3 4 5 |
| 1 2 3 4 5 |
| Why not, it's being offered. |
| It's good to see how to move forward |
| |
| YES NO |
| ste explains the |
| YES NO |
| (YES) NO |
| |
| |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | I have had so few disits I find it hard to say |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | |
| How often do you act on the advice given by the consultant? | ηυά All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES (NO) |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | easy to tell too. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | VES NO |
| What products or services has your consultant referred you to, if any? | |

| lease rate your confidence with your consultant 3 knowleage or. | | |
|---|-----|----------------------------|
| Topic | 1-5 | Please Explain |
| Fitness | | |
| Nutrition | | She seems very knowledgebb |
| Stress management techniques | | all round |
| Time-management | | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness | |
|---|--|
| programming? | |

| Company Lloro Ferancial Gray | Date July 313 |
|------------------------------|---------------------------|
| Consultant's Name Mul Mulhot | |
| Location St Thomas | Your Name Helly Humphrles |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 (5) |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 (5) |
| What motivated you to book a consultation? | the idea of taking better care of |
| What did you like most about the consultation? | that I can say anything d it is |
| What areas of the consultation could use some improvement? | None |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Angue is aurisonne |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | She can help me deal with my stress |

| consultation that you feel is lacking? Please explain. | No |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | more water intake |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 (4) 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | intula, hoalthus cating |
| Please rate your confidence with | your consultant's knowledge of: 1-5 Please Explain |
| Fitness | 5 |
| Nutrition | 5 |
| Stress management techniques | <u> </u> |
| Time-management | 5 |
| Other Programming | |
| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
| the state of the s | the comment of the co |

| Company 400 FIMME | WATON Date July 3/13 |
|---------------------------|-----------------------|
| Consultant's Name Angle U | Alhot |
| Location St. Thomas | Your Name Savon Under |



| | · · · · · · · · · · · · · · · · · · · |
|--|---|
| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 (5) |
| What motivated you to book a consultation? | General interest in Health t Wellness-worked to learn more |
| What did you like most about the consultation? | thy angie listens + Nover judges |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | she is supportive of any goal trab |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | rove in the workplace |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | Love Angels recipes! |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Her knowledge + expertise |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| i loudo fato your dominadilod mitti | | Tour consultant o knowledge on | |
|-------------------------------------|------------------|--------------------------------|--------------------------|
| | Topic | 1-5 | Please Explain |
| Fitness | | 5 | Awas girong menew dorres |
| Nutrition | | 2 | Atuals has even recipe |
| Stress manag | ement techniques | | NA Never asked for this |
| Time-manage | ment | | NA hour exted for this |

| Is there any feedback that you can provide regarding your experience with the wellness program that would | |
|---|--|
| help improve our wellness programming? | |

| Company Likko Fin | IANCIAL GROUP | Date | |
|--------------------|---------------|-------------------------|--|
| Consultant's NameA | | | |
| Location ST Thom | NAS | Your Name Les Pickering | |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



One-on-One Consultations

| How many wellness consultations have you had? | 3 4 (5) 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 (5) |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | I NEEDED A KICK START TO MAKE CHANGES IN MY LIFESTYLE IE POOR NUTRITION, LOW ACTIVITY |
| What did you like most about the consultation? | SHE DIDN'T GIVE UP ON ME - I DIDN'T REALLY START MY CHANGES UNTIL THE 3RD CONSULTATI |
| What areas of the consultation could use some improvement? | I CAN'T THINK OF ANY |
| Do you feel that your consultant is able to help you achieve your goals? | (YES) NO |
| Please explain | THE MONTHY MEET UPS KEEP ME HONEST I WANT HER TO SEE MY RESULTS SHE ALSO SHARES HER REQUIES - TIPS |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | NO RESTRUCTION NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | DEFINEATLY! I NEEDED A HUGE LIFESTYLE CHANCE-SHE SUCCESTED ANOTHER EMPLOYE |

STARTED MY ROAD TO SuccESS!

| <u></u> | |
|--|---|
| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | NO-SOFAR I'M USRY PLEASED WITH HOW THIS WORKS |
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | - WALKING AT LEAST 3X A WEEK - DRINKING WAY MORE WATER - MAKING SURE I HAGE A SNACK (HEALTHY) |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | READ LABELS, AND KNOW WHAT TO AVOID EATING MORE RAM + WHOLE FOODS |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES (NO) |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | ACCOUNTABILITY, AND I USUALLY HAVE GUESTIONS TO ANOMENT MY PLAN |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES) NO |
| What products or services has your consultant referred you to, if any? | RAWY NATURAL + WHOLE FOODS - WEB SITES (FOR RECIPIES) |

| riease rate your confidence with | your cor | isuitant's knowledge or. |
|----------------------------------|----------|---|
| Topic | 1-5 | Please Explain |
| Fitness | 5 | EYTREMELY KNOWLEDGABLE, |
| Nutrition | 5 | Marine II |
| Stress management techniques | 5 | WALKING HAS HELPED MY STRESS LEVEL |
| Time-management | -5 | - HELPED ME TO PLAN AHEAD (MEALPLADING) |

Other Programming

AS FOR MY EXPERIENCE, I WORK AT DEFFERENT DESKS (PROBABLY) ZX AWEER & AS FAR AS ERONOMICALLY CORRECT I OFTEN SUFFER WEEK & BACK PAIN -Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness PERHAPS SOME PROGRAMS IN ADDRESSING THOSE ISSUES programming?

LIBRO FINANCIAL GROUP 11 Talbot Street West, Box 675. Blenheim, ON NOP 1A0

| Company | Date | June 906. |
|-------------------------|---------------|------------|
| Consultant's NameA | | |
| Location <u>Blentin</u> | _ Your Name _ | John Tave. |

Employee Wellness Solutions Network Head Office Consultation Feedback Survey



| | 7 |
|--|--|
| How many wellness consultations have you had? | (3) 6 7 8 9 10 +10 |
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | (t') good for me I |
| What did you like most about the consultation? | Good advice & Bobe Accomentations + som of the "homework" |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Very helph! to key his top of mind. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Willing, Water. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | Swidning Lasids is difficult: |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| i icase rate your confidence with | . your oo | your concurred knowledge or. | | |
|-----------------------------------|-----------|------------------------------|--|--|
| Topic | 1-5 | Please Explain | | |
| Fitness | 5 | | | |
| Nutrition | 5 | | | |
| Stress management techniques | 5 | | | |
| Time-management | 5 | | | |

| Is there any feedback that you can provide regarding your experience | I'm very glad libro has added this program: |
|---|---|
| with the wellness program that would help improve our wellness programming? | Thanks! |

| Company Libro Financial | Date |
|-------------------------|-----------|
| Consultant's Name Angle | |
| Location Blenheim | Your Name |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|-----------------------------|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | new program a work |
| What did you like most about the consultation? | good listerer, very helpful |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |
| | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | routine exercises |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | neurdiscussions |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | | Please Explain: |
|------------------------------|-----|-----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | NIA | |
| Time-management | N/A | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | I feelevery month is excessive so I book eve Other irsit. | ly |
|--|---|----|
|--|---|----|

| Company LiBRO | Date 18/13 | |
|----------------------|--------------------|--------|
| Consultant's NameANG | E MAILHOT. | |
| Location FONDO | Your Name MIKE MAC | (NTYPE |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | (3) 4 5 6 7 8 9 10 +10 | | | | |
|--|-----------------------------------|--|--|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 (4) 5 | | | | |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 | | | | |
| How would you rate the communication skills of the consultant? | 1 2 3 (4) 5 | | | | |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 | | | | |
| What motivated you to book a consultation? | GET HEALTHIER. | | | | |
| What did you like most about the consultation? | IDEAS, INFORMATION | | | | |
| What areas of the consultation could use some improvement? | DEAS, INFORMATION SPECIFIC PLANS | | | | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO | | | | |
| Please explain | DEAS TO BELOME BETTER. | | | | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | NO NO | | | | |
| Is your wellness consultation something that you feel is important within your work place? | YES NO | | | | |
| Please explain | | | | | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | LIFESTYLE CHANGES. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | HOLD SELF ACCOUNTABLE. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES (NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | APPROACHABLE LMDBACK. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | VES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|-----------------------|
| Fitness | 5 | |
| Nutrition | 5 | LACKE HAS GREAT DEAS. |
| Stress management techniques | 4 | A GREAT MELP 1 |
| Time-management | 4 | |

| Is there any feedback that you can provide regarding your experience | IND. | O. GOAL/PLAN | | |
|---|------|--------------|----|--------------|
| with the wellness program that would help improve our wellness programming? | AND | HOLD | ME | ACCOUNTABLE. |

| Company Libro | Date June 19/13 |
|--|---|
| Consultant's Name Angis |) |
| . 1 | Down tow Your Name Marlenf |
| Employee Wellness So Head Office Consultation F One-on-One Consultations | Solutions Rich vork |
| | or 3 |
| How many wellness consultations have you had? | 3 (4) 5 6 7 8 9 10 +10 |
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Weight loss, Having someone who can coach us is great () |
| What did you like most about the consultation? | No pressure, Angie is very understanding |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | I am meeting my personal goals |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES. NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Angie Keeps me on track a. provides good. suggestions. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Set a soal to lose 10 pounds + have almost reached mygoe |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | Angie suggesting joining a gym but I believe that it wouldn't benefit based on past experience YES (NO) |
| Are there any topics that you wish were covered in your wellness consultations that are not? | based on past intervence YES NO |
| If yes, which topics are of interest to you? | or ought |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Angie is very cary to talk to doesn't is understanding |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | -sym mombership |
| | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 5. | |

Other Programming Team challenges were fund « gets everyone unvolved Walking Challenge is good Stoff here are very competitions Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming?

| Company <u>Libro financial Ga</u> | Dup Date June 19, 2013 |
|-----------------------------------|---------------------------|
| Consultant's Name Angle Maillox | |
| Location 167 Central Ave | Your Name Michelle Carely |

| One-on-One Consultations | |
|--|--|
| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | I am trying to line a healthier life and deal with a very fussy 4-years Different perspective on would, someone else to be accountable to. |
| What did you like most about the consultation? | Différent perspective en voues, somment else to be accountable to. |
| What areas of the consultation could use some improvement? | N/A |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | The has great resources available and checks in on topics previously discusse |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | the shaft, and we really encourage |
| | one another. Tood is always around |
| | the office, but since this program has been implemented there has been a significant decrease in junk food. |
| | significant decrease in junk food. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | No |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | some we got a blender and started smoother her is only taken a few sips, be |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I, like most extress need more docupline and self-motivation. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Accountability check in |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |
| Please rate your confidence with | vour consultant's knowledge of: |
| Topic | 1-5 Please Explain |
| Fitness | 5 She has all of |
| Nutrition | 5 the resources available. |
| Stress management techniques | 5 and 1 ever the doesn't how |
| Time-management | 5 an immediate anount, Sho |
| Other Programming | gets V. |
| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |

| Company Libro Financial Group | Date Line 6,2013. |
|-------------------------------|-------------------------|
| Consultant's Name Ange Maihot | |
| Location Administration | Your Name Janet Taylor. |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|-------------------------|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | |
| What did you like most about the consultation? | The open communication. |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Ansie helped me to frame some difficult family conversations that went well. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | I am easer to see what there is that Ansie can offer me. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| r lease rate your confidence with | your cor | isuituit s kilowicage oi. |
|-----------------------------------|----------|---------------------------|
| Topic | 1-5 | Please Explain |
| Fitness | 4 | I've only had 3 visits |
| Nutrition | 4 | So I'm learning what |
| Stress management techniques | 4 | Angie knows and how it |
| Time-management | 4 | can holp me. |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

Company Libro Financial Group Date June 4,2013

Consultant's Name Angle Mailhot

Location Libro Financial Group Admin Your Name Sherr. Fordyce

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | thought it can't hurt any information can help with over all the health |
| What did you like most about the consultation? | Angie makes it very easy to talk to her. She always has some great ideas |
| What areas of the consultation could use some improvement? | ± think She does a great job. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | the goal are realistic and she says just do what you feel like doing and then you'll want to do more |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | they are only there to help, never a negative word |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | 100 |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | I told Angie I get upset with myself with a don't get don't exercise doily. She said don't get down on what your doing, it is you miss a day just do something the next do |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | Angie said by Stinging Nettle tea, now I drint a glass daily. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Always a new Suggestion. Last appointmentalked about lack of sleep she suggested to read before & bed. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | stinging nettle tea |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|-------------------------|
| Fitness | 5 | ways to fit in exercise |
| Nutrition | 5 | sending recipes |
| Stress management techniques | 5 | ways to relax |
| Time-management | 5 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would | |
|---|---|
| help improve our wellness programming? | 3 |

| Company <u>Libro Financial</u> Consultant's Name <u>Anaie</u> Mailhot | Date |
|---|------------------------|
| Location Contact Centre | Your Name Lindsey Seco |
| Employee Wellness Solutions New Head Office Consultation Feedback Sur | |

| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | learning new things |
| What did you like most about the consultation? | Everything |
| What areas of the consultation could use some improvement? | Sometimes appointments go post the time frame so its sometimes the time frame so its sometimes |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO and |
| Please explain | very helpful to heliping me to Stretches that strengthen my back |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | - back/neck stretches - new snack ideas (heattry) |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Allofit |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 34 | |
| Time-management | NA | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | | |
|--|--|--|
|--|--|--|

| Company Libro Financial | Date July 24/13 |
|---------------------------------|------------------------|
| Consultant's Name Angie Mailhot | |
| Location Strastog | Your Name Jerry Jarsen |
| | |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 2 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | To live a even healthier. If e Style - to get some motivation |
| What did you like most about the consultation? | Very informative—great ideas. Very personable—easy to discuss issue with her. I feel very comfortab |
| What areas of the consultation could use some improvement? | with there. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Very important |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | No. |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Exercises for my knee - diet + heartly eating tips. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | the pleasant demeaner! |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 5 | |

| Is there any feedback that you can | |
|--|--|
| provide regarding your experience with the wellness program that would | |
| help improve our wellness | |
| programming? | |

| Company Libro Fingnoial | Date |
|---------------------------------|-------------------------|
| Consultant's Name Angle Mailhot | <u> </u> |
| Location Strathroy | Your Name Cathy Foster. |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Curiosity + want of to become more healthy |
| What did you like most about the consultation? | Very pleasant & professional & Knowledgeable |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Has good advice à is encouraging. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | I sit alot In my job & her suggestions help me to remember to be active. |

| <u></u> | |
|--|--|
| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | No |
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Helping with my diet a being more balanced. Different ways 40 get protein. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Her Knowledge on health & wellness. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | protein powder |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 5 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | | |
|--|--|--|
|--|--|--|

| Company _ | Libro | Financial | LGroup | Date _ | June 14.2013 | <u> </u> |
|------------|------------|-----------|--------|--------|----------------|----------|
| Consultant | t's Name _ | Angie | | | | |
| Location | Blenhe | im Branc | h. | Your N | ame Jenniferso | COTT |



| How many wellness consultations have you had? | n't have time for 2 nd apt She comes in by other job. She fistered well & had son suggestion |
|--|--|
| (1=not, 5=very) on My day at N | ry other job. She fistered well & had sop |
| How would you rate the professionalism of the consultant? | 1 2 3 4 (5) |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 (5) |
| What motivated you to book a consultation? | Lambaving some health issues that I have been working on fixing - Needed another Opinion. |
| What did you like most about the consultation? | time for me! |
| What areas of the consultation could use some improvement? | ? |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO NOTYCT |
| Please explain | just got to explain my life Story. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | 7 |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | ? |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | I only work part time @ Libro - 1 work at other job when welleress coach is here. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | | |
| Nutrition | | |
| Stress management techniques | | |
| Time-management | | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | sorry luasn't |
|--|---------------|
|--|---------------|

| Company <u>Lakaside</u> | Date 11 12013 |
|--------------------------|------------------------|
| Consultant's Name Ashley | \ |
| Location Oakulle | Your Name Cathy BERMON |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 🕭 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 💍 |
| What motivated you to book a consultation? | I'm always looking for ways of Improving my health. |
| What did you like most about the consultation? | Ashley is very friedly & very lasy to open up to |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | In Cremsory the frequery of exercise |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Booking ahead of the. Someone to be accountable to |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|-----------------|
| Fitness | 4 | |
| Nutrition | 4 | |
| Stress management techniques | | not covered yet |
| Time-management | | not cauch yet. |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| company <u>Lakeside</u> . | Date 7/11/2013. |
|---------------------------------|-----------------|
| Consultant's Name Ashley De Fra | inco. |
| Location Oakville, ON . Lakesid | |
| 0 | Hice. |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 (5) 6 7 8 9 10 +10 | |
|--|--|---------------|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 (5) | |
| How would you rate the professionalism of the consultant? | 1 2 3 4 (5) | |
| How would you rate the communication skills of the consultant? | 1 2 3 4 (5) | |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 | |
| What motivated you to book a consultation? | The introduction meeting he had motivated mo. Everyone seemed friend and I figured if my company offers it who | ly I no |
| What did you like most about the consultation? | to and I don't feel like she is judge | gi hey |
| What areas of the consultation could use some improvement? All like it the way it is | me. H's also really casual and I convered to the meetings. I feel like a nice break from work once a month | · i+ <u>r</u> |
| Do you feel that your consultant is able to help you achieve your goals? | (YES) NO | |
| Please explain | Ashley is amazing. She listens & is great of conversation. I feel like she truly wants me to do well. | 2_ |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | WES NO | |
| Is your wellness consultation something that you feel is important within your work place? | (YES) NO | |
| Please explain | She keeps me accountable. I love had goals & achieving them. Ashley helps me without a lasso tell my boyting | ing |
| | about my new goal each month and helps me with them. I feel like I have lot be suggested in that is a | he |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | 14'5 all Good! | The state of the s |
|--|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | I set a goal to run stimes a neck and I actually did it! | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often | |
| Please explain. | She never gives me advice that is imported me. Sometimes I may not do everything about | 08° |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES (NO) I feel like She be open to an | wo J.k |
| If yes, which topics are of interest to you? | | <i>]</i> |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 | |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Ashley is so nice and I feel like I have a lot in common with her. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO | The second secon |
| What products or services has your consultant referred you to, if any? | None. | |

| i icuse fate your confidence with | your oo | insultant 5 knowledge of: |
|-----------------------------------|---------|---|
| Topic | 1-5 | Please Explain |
| Fitness | 5 | She knows a lot more than me- |
| Nutrition | 5 | I'm a vegan and she seems to support |
| Stress management techniques | 4 | only bk she's younge, we're pretty equal in age, our experiences are similar. |
| Time-management | 5. | seems oxay to me. |

| Is there any feedback that you can | maybe have a 115+ of suggestions to |
|--|--------------------------------------|
| provide regarding your experience | talk about. Sometimes I feel nervous |
| with the wellness program that would help improve our wellness | that what I'm talking about is not |
| programming? | what eventone else is doing. |
| | |

| | Lakesia | | | | Date _ | July | 11/13 | ,) | |
|-----------|-----------|--------|--------|------|----------|-------|-------|--------|-------|
| Consultan | ıt's Name | Ashley | De Fru | 100 | | | | | |
| | 1185A | | | | Your Na | me Me | luan | Cemi | shell |
| | | | | East | - | | J., | | |
| | | | | | | | | | No. |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 (5) |
| How would you rate the communication skills of the consultant? | 1 2 3 4 (5) |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 (5) |
| What motivated you to book a consultation? | Ashley is a fontastic listener and makes you feel very comfortable. She gives great tips and I heard booking a session was worthwhile |
| What did you like most about the consultation? | How involved Ashley got with really wanting to get to know your health needs and giving more than one solution to any problem. |
| What areas of the consultation could use some improvement? | I feel very scatisfied with my consultations |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Every goal I have Set I have either reached, or continue to reach. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | I believe everyone needs a little push to help them achieve their goals and get them thinking positive. |

| | T |
|--|---|
| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | An accomplishment of mine was eating healthier meals, which I have greatly improved with Ashkey's help! |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | more often than not. I'm human, I make mistedes sometimes! |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES (NO) |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 (4) 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Ashley is a very good listener and her positive feedback teeps me coming back. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES |
| What products or services has your consultant referred you to, if any? | Foods I was unaware of |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|---|
| Fitness | | We have not talked about fitness. |
| Nutrition | 4 | I have not had enough consultations to |
| Stress management techniques | 3 | we haven't really talked too much about this yet. |
| Time-management | | |

Other Programming

Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming?

Keep up the fantastic Service!!

| Company <u>hakesidl</u> | Date <u>6/10/2013</u> |
|------------------------------------|------------------------|
| Consultant's Name Ashley De Franco | · |
| Location Oakille | Your Name Dava Belaner |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 (5) |
| How would you rate the communication skills of the consultant? | 1 2 3 4 (5) |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 (5) |
| What motivated you to book a consultation? | improve health |
| What did you like most about the consultation? | personalized |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | good advice / suggestions that are showing improvements |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | seress management / improved health will improve our lives |
| | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | increasing exercise + toning |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | she was provided options and I choose the one that best fits me. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Seeing results and getting encouragement from Ashley |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | websites |
| | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | na | |
| Time-management | 4. | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Company Lake side | Date <u>July 6, 2003</u> |
|---------------------------------|--------------------------|
| Consultant's Name <u>ครกโยน</u> | |
| Location Oakville | Your Name |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 (3) 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Excited to see what the program is all about o |
| What did you like most about the consultation? | She is easy to talk to. |
| What areas of the consultation could use some improvement? | The sessions are short and Ashley tends to show Youtube videos which can be watched on our own time and not during the consultation. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | She does offer some good suggestions but I need more energy from her. I would like to see her more upbeat and high energy. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | I would like her to after more suggestions or new things to try. I'm struggling to get more ideas out of her. |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | Meal plans and planning. |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | She is easy to talk to Friendly. Non-judgemental. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | Nothing really. |

| | Topic | 1-5 | Please Explain |
|---------------|------------------|-----|---|
| Fitness | | 4 | |
| Nutrition | : | 5 | |
| Stress manage | ement techniques | | We haven't discussed this topic so I can't comment. |
| Time-manager | nent | | we have not discussed this topic. |

Other Programming

Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming?

I think that I weeks is a long time between consultations. Weekly check in s with an email or even a phone call would help to keep us motivated. It would be easier to recover from a bad week if we could touch base more often.

| Company <u>La la s</u> | Side | | Date _ | chene 6 | 2013 |
|------------------------|------|----------|--------|------------|-----------|
| Consultant's Name | | DeFranco | | | |
| Location | | - | Your N | ame Cecill | le Godina |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | To lose weight better meal Choices |
| What did you like most about the consultation? | Ashley, s Frenchy and she listens |
| What areas of the consultation could use some improvement? | Fine theway she is |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | I have 10st 2 inches in 2 months & Jan eather beeker |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES |
| Please explain | streeps up to realize you can be healthy on a busy schedule |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | $N \circ$ |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | weight loss |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I eat breakfast more often, I added fruits i vessies Druyd |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | her ideas |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | WIA |

| i lease rate your confidence with | your concurred knowledge on | | | |
|-----------------------------------|-----------------------------|----------------|--|--|
| Topic | 1-5 | Please Explain | | |
| Fitness | 5 | | | |
| Nutrition | 5 | | | |
| Stress management techniques | 5 | | | |
| Time-management | 5 | | | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | Glad a program was impremented |
|--|-----------------------------------|
|--|-----------------------------------|

| Company | Lakeside | Date | June 7.13 |
|--------------|-------------|-----------|---------------------|
| Consultant's | Name Ashley | De Franco | |
| | akville | | Name Tracey Fischer |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| | - |
|--|--|
| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | -wanted to support the program - lots to work on so it seemed like a good place to start. |
| What did you like most about the consultation? | -always have positive suggestions and ideas |
| What areas of the consultation could use some improvement? | -maybe a five minute buffer between appts so she can have a breather! |
| Do you feel that your consultant is able to help you achieve your goals? | B YES NO |
| Please explain | But mainly it is up to me to do the work. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | When you are super busy, taking care of yourself slides to the bottom of the list. The upllness programs helps keep 'me' |
| | The wellness programs helps keep 'me' in the list of priorities. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | No Ashley does a great job. |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Drinking more water, doing some lxercise - small steps but they we a step in the right direction. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I love her ideas-just have to make thema habit. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | I feel like she has solutions and I wonit get scolded if I havenit been on track. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | Youtube videos, massage |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|---|
| Fitness | 5 | |
| Nutrition | 5 | -7 |
| Stress management techniques | 5 | we did 5 mins. deep breathing meditation and it really helped |
| Time-management | 5 | suggestions on now to fit exercise into my routine |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
| programming: | |

| Company | OMG | | _ Date | Ju | <i>م. ا</i> | 9 2013 | |
|-------------------|--------|----------|--------|------|-------------|--------|--|
| Consultant's Name | DAWN | DUNFIELD | | | | | |
| Location | SAINT. | JOHN | Your N | lame | P. | ELKIN | |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Offered though work. Frowided a supplement to enforce what I was already doing correctly. |
| What did you like most about the consultation? | conficientalit. |
| What areas of the consultation could use some improvement? | 7 |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | understands the challings / difficultin of achieving goods of self-worth. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | convenient to have someone or professionel or Down available at work. Every to meet, not so much alpendent on me to |
| · · | initiate muse. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | N/A |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Eating hobits. Eigonomies. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | As mentioned, it is a suffliment to what I have already been doing. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO DON'T really know. |
| If yes, which topics are of interest to you? | · · |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | professional. Knowledgeable. Shows interest/caring. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | (YES) NO definitely |
| What products or services has your consultant referred you to, if any? | exercire refe |

| our commaches min | you. | your consultant 5 knowledge on | | | |
|-------------------|--|--|--|--|--|
| Topic | 1-5 | Please Explain | | | |
| | 5 | | | | |
| | 5 |) extremely knowledgeable to boom I creditation to back it up. | | | |
| ement techniques | 4 | · mostly although odd time not seve of demands of this particle job. | | | |
| ement | 4 | - work-in proper. | | | |
| | and the state of t | Topic 1-5 5 gement techniques 4 | | | |

| Is there any feedback that you can provide regarding your experience | |
|--|--|
| with the wellness program that would help improve our wellness | |
| programming? | |

| Company OMG | Date June 19 7013 |
|---------------------------------|---------------------------|
| Consultant's Name DANN Dun fiel | d |
| Location SAINT JOHN NB | Your Name Ellan de KruyFF |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| | Notsure |
|--|--|
| How many wellness consultations have you had? | 4 5 6 7 8 9 10 +10 |
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Helped with setting goals, & good fillow-up. |
| What did you like most about the consultation? | Smart, good Advise, realistic, Kind, Motawating, Multi-Skilled approace |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Helped to make goals achievalle by making small changes. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Provides an impartial listener |
| | |

| | , | |
|--|---|--|
| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | | |
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | EATIING hubits. | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often | |
| Please explain. | Health set Busk prevented full follow-through altered goals to work around. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO | |
| If yes, which topics are of interest to you? | | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 | |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Enjoy topics, & smort advise. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | Some - YES NO | |
| What products or services has your consultant referred you to, if any? | Food Benefitz | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|--------------------------------------|
| Fitness | 5 | Great knowledge technique |
| Nutrition | 4 | - V. helpful - Good Sevies |
| Stress management techniques | 4 | - good Servies / help with Breathing |
| Time-management | NA | Uisualization - |

| Is there any feedback that you can provide regarding your experience | |
|---|--|
| with the wellness program that would help improve our wellness programming? | |

| Company Owens Mactad | yen Group. | Date <u>Fel</u> | ruary 19/13 | |
|------------------------|------------|-----------------|-------------|------|
| Consultant's Name Down | 1 | .d | 0 | |
| Location Sount John | NB | _ Your Name | Ellen Doy | LE . |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 (5) |
| How would you rate the communication skills of the consultant? | 1 2 3 4 (5) |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 (5) |
| What motivated you to book a consultation? | After initial meeting in Dawn, Felt very comfortable - |
| What did you like most about the consultation? | Down let me decide what areas of concern/direction of concern/direction of capproach to take for best results. |
| What areas of the consultation could use some improvement? | N/A. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO Very partient. |
| Please explain | Dawn understands my need to get my "ducks in arow" to best achieve some positive results. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | NO NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | N/A. |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Water/15+ thing in Am + throughout the day - HUSE change to hunger/more tiredness. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I try to act on things in such a way as to achieve positive results and not feel disappointed in myself - Dawn is a g |
| Are there any topics that you wish were covered in your wellness consultations that are not? | Y Support to this. YES NO |
| If yes, which topics are of interest to you? | NA. |
| How many weeks is it between your consultations on average? | 2 - 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | up beat-encourage is. NO-judgements. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | Exercise Tulking- measurable water (rubber hose as I) juig to (ceep at my |
| Please rate your confidence with y | |
| Topic | 1-5 Please Explain |
| Fitness | |
| Nutrition | .5 |
| Stress management techniques | 5 |
| Time-management | 5.1. |
| Other Programming | |
| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |

| Company | Dwens | Macka | dyen | <u></u> | ate _ | Feb. | 19,2013 | |
|-----------|-------------|-------|---------|---------|--------|--------|-------------|--|
| Consultan | it's Name _ | Dawn | Dunfie. | ld | | | | |
| Location | Saint J | John, | NB | Υ | our Na | me K | Mc Laughlin | |



| How many wellness consultations have you had? | 3 4 (5) 6 7 8 9 10 +10 |
|--|------------------------------------|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | need tips and motivation |
| What did you like most about the consultation? | easy to communicate. confidentials |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | keeps me "on track" |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | less sick days, more productivé. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | journal plood log |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | I would like an "in house" |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | accountability |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|-----------------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | | not one of our topics |
| Time-management | | not one of our topics |

| Is there any feedback that you can provide regarding your experience with the wellness program that would | |
|---|--|
| help improve our wellness programming? | |

| Company TRW OSS CANADA | Date Sunc |
|----------------------------------|-----------------------|
| Consultant's Name DENISE _ECCLES | |
| Location MINLANN ONT | Your Name Tam CORBETT |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5+ |
| How would you rate the communication skills of the consultant? | 1 2 3 4 (5) |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | POOR HEALTHE |
| What did you like most about the consultation? | VERY UP FRONT TELLS YOU WHAT YOU NEED TO KNOW. |
| What areas of the consultation could use some improvement? | NOTTING AT THIS TIME |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | SHE PUSHES YOU TO GO FARTHER. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES) NO |
| Please explain | WE ALL SEAM TO DO THE CAME |
| | THING EVERY DAY, |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | ~ C |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | EATING MORE VEGGES |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | SHE KNOW'S WHAT SHE'S TALKING ABOUT |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|---|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | | HAVE NOT BEEN IN ANY |
| Time-management | | CONSULTATIONS FOR THESE, SO I CAN NOT COMMENT! |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness | | | | |
|---|------|------|-------|--|
| programming? | TIME | WELL | SPEND | |

| Company TRU | Date JUNE 4, 2013 |
|---------------------------------|------------------------|
| Consultant's Name DENISE ECCLES | |
| Location MIDLAND | Your Name Malk Rammons |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 🕤 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 (5) |
| How would you rate the communication skills of the consultant? | 1 2 3 4 (5) |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 (5) |
| What motivated you to book a consultation? | DESIRE TO LOSE WEIGHT + START & WALL ROSEAM |
| What did you like most about the consultation? | VELT RELAYED, CONFORTABLE, DOES NOT FEEL LIKE ALITHING IS BEING "PUSHED". |
| What areas of the consultation could use some improvement? | NOTE |
| Do you feel that your consultant is able to help you achieve your goals? | VES NO |
| Please explain | ONLEWARDY LIMES. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | NO NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | VELT HELFUL TO HAVE ALL BUTSIDE RELECT ROUDE. INFOLMATION & GUILBACE. ALSO CLEATES A BREAK IN THE WOLL DAY |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | MO. |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | PORCHABEO A TREADMILL, AM EXERCISING ON A REGULAL SCHEDULE. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | FOLLOWING THE WALL SCHOOLE |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | EASH TO COMMUNICATE WITH, FLENDLY ATMOSPHERE |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | TREADMILL WITH INCLINE + FAN |

| r lease rate your confidence with your consultant's knowledge of. | | |
|---|------|--|
| Topic | 1-5 | Please Explain |
| Fitness | 5 | \$ |
| Nutrition | 5 | |
| Stress management techniques | 4 | ALTHOUGH THIS IS NOT A TO FIC & HAVE FORDALLY DISCUSSED + NEEDED INFO ON. |
| Time-management | TED. | PLANE NOT WAS ANY BISCUSCIONS IN THIS AREA. |

| | the keel of 742 6000 work! | |
|--|----------------------------|--|
| Is there any feedback that you can provide regarding your experience | LA CEEL OF 102 BOOK WILL. | |
| with the wellness program that would | | |
| help improve our wellness | | |
| programming? | | |

| Company TRW CANABA | Date |
|---------------------------------|----------------------|
| Consultant's Name benise tacles | <u> </u> |
| Location Midland Ont. | Your Name JANE EVANS |

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | I was concerned about eating holists + proper exercises. |
| What did you like most about the consultation? | Denke was very easy to talk to and she was always a good listener. |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Yes, with lower back problems she was able to give me exercises that I could still do without injuring myself. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Jes, the better you feel, the more energy you have + get more accomplished at work. I consultation sessions at work give you are apportunity to seek help that you would not necessarily seek out on your own. |
| | appentishing to seek help that you would not necessarily seek out on your own. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | No |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | proper eating habits. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I check labels at grocery store, I have been exercising - |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | follow up an eating habits + exercise program. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | Vitamin E empirmed for bolance of hormones (hot flashes) |

| Flease rate | your connuence with | your cor | isuitant's knowledge or. |
|--|---------------------|----------|--|
| The Sent of All Designation of the Sent of | Topic | 1-5 | Please Explain |
| Fitness | | 5 | Explained proper exercises for back problems |
| Nutrition | , | 5 | Walked me through tealthy eating habits |
| Stress manaç | gement techniques | - | Nat covered. |
| Time-manage | ement | - | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Company TRW | Date <u>07/11/13</u> | |
|---------------------------------|----------------------|-------|
| Consultant's Name Denise Eccles | | |
| Location MIDLAND ONT | Your Name DARLENE | MASON |

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 (5) |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Curious Health |
| What did you like most about the consultation? | Friendliness Easy to talk to Knowledge |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Knee Exercises Diet |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Health and wellness of Employees is important. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | NO |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Knee exercizes Diet. Sugar levels |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Cheerfulness Helpful Tracking progress |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | Low GI foods, Low sugar foods, Teas |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 5 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | | | | | | | |
|--|--|--|--|--|--|--|--|
|--|--|--|--|--|--|--|--|

| Company TRW AUTOMOTIVE | Date JUNE 18/2013 |
|--------------------------|----------------------------|
| Consultant's Name DENISE | |
| Location MIDLAND ONT | Your Name KICHARD (MRNEW). |



One-on-One Consultations

| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) いたいいん | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5+ |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 🕏 |
| What motivated you to book a consultation? | HEALTH -> PHYSICAL + MENTAL. |
| What did you like most about the consultation? | DENISE IS A WONDERFUL PERSON WHO NOT ONLY GIVES EXECLENT ADVICE - BUT WHO LIVE'S HER LIFE IN THE SAME MANNER AS SHE ADVISES US SHE'S AWESOME - TRULY! |
| What areas of the consultation could use some improvement? | Appointment's Could BE MORE FREQUENT FOR THOSE WHO REQUIRE MORE ASSISTANCE - IT COULD BE DONE - DUE TO THE LACK OF SOME EMPLOYES. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | FOR STRESS SKE'S GIVEN ME TOOLS TO TRY AND BETTER DEAL WITH IT. FOR DIET - SKE'S GREAT AND MAS A VAST KNOWLEAGE OF FOODS & EXERCISE METHODS |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | WE , AS MOST COMPANY'S HAVE UNDERGONE SO. MANY CHANGE'S OVER THE LAST FEW YEARS THAT THE PEOPLE ARE GETTING STRESSED - THEREFORE |

NOT EATING RIGHT - TAKING PROBLEMS DOME ETC. SO HAVING DENISE HERE IS ABSOLUTELY NEEDED.

| Is there any aspect of your wellness consultation that you feel is lacking? | NO-NOT AT ALL - SHE'S INCREDIBLE HER HUSBAND MUST BE PERFECT WITH |
|--|--|
| Please explain. | HER HROUND - RIDS 700 - GUST KIRDING! MAN |
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | REDUCING SUGARS + PROCESSED FOODS ETC. LOWER MY HIGH BLOOD PRESSURE WITH BIET + EXCERCISE HOW TO DEAL WITH DIFFICULT SITUATIONS IN A RELAXED CALM WAY. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I'M FINDING THAT THE ADVICE I'S BEZN GIVEN 18 GREAT AND IM GETTING BETTER DAILY, WITH MY ZMOTIONALISSUES |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | SEXUAL ADUICE FOR PEOPLE OVER 40154 - LOW LIBIDO, DIFFICULTIES (NOT HAST I HAVE ANY LOW) DIVORCE - INFIDELITY ETC. |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | HER WONDERFUL, KNOWLEDGEABLE APPROACH TO ALMOST ANY FORICOF "LIVING WELL" - HER INTEREST IN SPIRITUALTY AND KEEP FATH WHEN THING ARE BAD - BUT NOT IN A RELIGOUS WAY - JUST GENERAL/AMAZING KNOWLEDGE |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | MOST NEED THAT & SOME (KOL HA 200 MG) |
| What products or services has your consultant referred you to, if any? | TOO MANY TO LIST - ON WAY TO MANY - VITAMINS FOOD TUPES AND WHATTINEY DO ETC BUT ILST AMAZING / |

| i lease late your confidence with | i your co | isultant 3 knowledge or. |
|-----------------------------------|-----------|---|
| Topic | 1-5 | Please Explain |
| Fitness | 5 | SHE'S EXTREMELY HEALTHY! |
| Nutrition | 5 | 11 11/2 21 |
| Stress management techniques | 5 | SHE'S ONE OF THE SUEETEST PEOPLE THAT I'VE HAD THE PLEASURE OF THIKMS WITH HE |
| Time-management | 5 | OUR TIME SEEMS TO JUST WORK ITSELF BUT PNO I ALWAYS COME AWAY WITH |
| | | SOME MORE TOOLS FOR THE OLD MENTAL I |

Other Programming

Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming?

I THINK THE MEETINGS SHOULD BE LONGER

O DUCE A MONTH - I FEEL LIKE THERE'S ALWAYS

SOME ISSUE I'D WANT TO DISCUSS - BUT THEN YOU DON'T HAVE TIME TO DEAL WITH EVERTHING - OR HAVE 2 - SESSIONS/MOTH.

| Company TRW | Date |
|---------------------------------|------------------------|
| Consultant's Name DENISE ECCLES | |
| Location MIDLAND | Your Name DAVID STACEY |
| | |

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 (5) 6 7 8 9 10 +10 |
|--|------------------------------|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | WEIGHT LOSS & GENERAL HEALTH |
| What did you like most about the consultation? | NUTRITIONAL INFORMATION |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | KEEPS ME MOTIVATED |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | (YES) NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness | |
|--|---------------------------------------|
| consultation that you feel is lacking? Please explain. | |
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | INCREASED WATER INTAKE |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | WEIGHT LOSS SUGGESTIONS |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 4 | |
| Stress management techniques | N/A | |
| Time-management | N/A | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | | |
|--|--|--|
| | | |

| Company $\mathcal{I}.\mathcal{R}.\mathcal{W}.$ | Date |
|--|-----------------------|
| Consultant's Name <u>DENISE ECCLES</u> | |
| Location Miliaul ONT | Your Name MOE BREAUCT |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|------------------------------------|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 (5) |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 👍 5 |
| What motivated you to book a consultation? | HEALTH CONCERNS |
| What did you like most about the consultation? | HELPFUL |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | (YES) NO |
| Please explain | GOOD INFORMATION |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | MONY EMPLOYEES COULD YSE THE NEEP. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | No |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | ENTING HABITS, EXCERSISET |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | T&L BUSY |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | GOED COMUNICATION |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 4 | |
| Stress management techniques | 4 | |
| Time-management | 4 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would | | |
|---|--|--|
| help improve our wellness programming? | | |

| Company | Date June 12/1 3 |
|------------------------------|----------------------|
| Consultant's Name Vo a S 5 P | |
| Location planty | Your Name Dow During |

Head Office Consultation Feedback Survey



| How many wellness consultations | (3) 4 5 6 7 8 9 10 +10 |
|--|------------------------|
| have you had? | 0) 4 5 6 7 6 9 10 +10 |
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 🕏 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 👂 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 6 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 6 |
| What motivated you to book a consultation? | thought I trad to |
| What did you like most about the consultation? | atto tude |
| What areas of the consultation could use some improvement? | timing |
| Do you feel that your consultant is able to help you achieve your goals? | NO NO |
| Please explain | 9 Hitule |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | NO |
| Please explain | helps Employee |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | notzet |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Kree problem |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Info |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | VES NO |
| What products or services has your consultant referred you to, if any? | |

| i icase rate your connaction with | y 04, 00. | isaliani s knowledge or. |
|-----------------------------------|------------------|--------------------------|
| Topic | 1-5 | Please Explain |
| Fitness | 4 | |
| Nutrition | | NII |
| Stress management techniques | 18 | NA |
| Time-management | | N/A |

| provide regarding your experience with the wellness program that would help improve our wellness programming? | with the wellness program that would help improve our wellness | | | |
|---|--|--|--|--|
|---|--|--|--|--|

| Company KW Hydro | Date July 7th 13 |
|---------------------------------------|--------------------------|
| Consultant's Name | CON |
| Location 301 Uictoria St. S | Your Name Mallan Cray |
| Kitchener, on. | |
| Employee Wellness Solutions Ne | etwork Employee Wellness |
| Head Office Consultation Feedback Sur | Cal Hana Nich wast |

Head Office Consultation Feedback Survey

| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--------------------------------|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Having good health |
| What did you like most about the consultation? | Glaria is very personable |
| What areas of the consultation could use some improvement? | No Suggestions |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Lots of exercise programs: |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | It helps keep me motivated! |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | I just feel they could be a little bit longer. |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | I was having traible steeping and succestions were given that have helped greatly |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I try and use healthy lyabit |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Gloria is happy to help with anything. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | Lega One smoothies Melatonin |
| | |

| i icase rate your community with | , , , , , , , , , , , , , , , , , , , | ilouituit o kilowicuge oi: |
|----------------------------------|---|----------------------------------|
| Topic | 1-5 | Please Explain |
| Fitness | 5 | knows lots of different workarts |
| Nutrition | 5 | Lots of recipes suggested |
| Stress management techniques | 5 | Yaga & deep breathing techniques |
| Time-management | 5 | Explains how to prioratize |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness | |
|--|--|
| programming? | |

| Company <u>LZF</u> | Date NIOV8, 2012 |
|-------------------------|------------------|
| Consultant's Name | |
| Location St. Mudrew Ccc | Your Name |



| I I a company and a second sections | |
|--|--|
| How many wellness consultations have you had? | 3 (4) 5 6 7 8 9 10 +10 |
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | She 28 informations and Clare many have more informations. |
| What did you like most about the consultation? | to tell to her. |
| What areas of the consultation could use some improvement? | not lesène our lunch time, because me need to lest time to exposer lunch |
| Do you feel that your consultant is able to help you achieve your goals? | (ES) NO not sure |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO Notesure |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Druking more green ter es good |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | for the excerce, I am chreedy active str my werkplace, se, I couldn't de, she asked to do. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES (NO) |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | She may have more information |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | VEST NOT Sure |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 3 | |
| Nutrition | 2 | |
| Stress management techniques | 1 | |
| Time-management | 2 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | drink more I stay active, but me seroms not after to lather than the seroms not after to lather than the is here. So, seems me hang to later at. |
|--|--|

| Company | Hobar | & Owen | Son Date | fek | 14/13 | |
|------------|----------|-----------------------|----------|----------------|-------------|--|
| Consultan | t's Name | | Jen | | 0/0 | |
| Location _ | Owen So | end Oat | Your N | lame <u>15</u> | rengl Sleet | |
| | | and the second second | | | | |

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 (10) |
|--|-----------------------|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 🐠 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 🕢 5 |
| What motivated you to book a consultation? | |
| What did you like most about the consultation? | good to talk to |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 4 | |
| Nutrition | # | |
| Stress management techniques | 4 | |
| Time-management | 4 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | | |
|--|--|--|
|--|--|--|

| Company Chentil Canada | Date <u>Dec. 17, 20/2</u> |
|-----------------------------------|---------------------------|
| Consultant's Name Jennifer Oliver | |
| Location 3258 Marentette | Your Name MIKE DAWN |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 (10) |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 (5) |
| How would you rate the professionalism of the consultant? | 1 2 3 4 🕏 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Overall health & well being |
| What did you like most about the consultation? | Personal one on one |
| What areas of the consultation could use some improvement? | I think the program is great the way |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | She's on top of everything that have concerns with land always thoughtering Suggestions that I haven't even of |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | NO NO |
| Is your wellness consultation something that you feel is important within your work place? | NO NO |
| Please explain | Deals with many aspects of health, diet and stress so its convenient having it there of the workplace rather than make an |
| | appointment somewhere and may not have time to do. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | No the program is beneficial just the way it is. | |
|--|--|------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | I lost weight, improved diet and even with the approval of my tamily physician I reduced my blood pressure medication by hot | 1 |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often | I |
| Please explain. | Diet is ongoing everyday fast as well as the exercise | <u>.</u> |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES | |
| If yes, which topics are of interest to you? | | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 | ! |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | She's always coming up with new innovative ways to achieve my | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO | (, |
| What products or services has your consultant referred you to, if any? | she's always recommending healthy recipes and products as well as different | |
| Please rate your confidence with | vour consultant's knowledge of: | |
| Topic | 1-5 Please Explain | |
| Fitness | 5 shes always coming up with new for the | len . |
| Nutrition | 5 She's always suggesting new recipes and | |
| Stress management techniques | 4 Always open and concerned with any stress in my life and always suggesting tech | l Migue |
| Time-management | 4 Always villing to keep set up time | |
| Other Programming | Schedules for work outsportness reduction t | hedra/ |
| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | Not at this time, keep doing what you are doing. I'm enjoying the counselling and most of all the results. | |

| Company CHEMFIL CANADA LTD. | Date <u>Nov. 23/12</u> |
|-----------------------------------|------------------------|
| Consultant's Name JENNIFER OLIVER | |
| Location WINDSOR | Your Name DEBRA LEMMON |

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | I KNOW I NEEDED IT. |
| What did you like most about the consultation? | JEN IS UNDERSTANDING, NOT CONFRONTATIONAL. VERY SUPPORTIVE. |
| What areas of the consultation could use some improvement? | NONE WHATSOEVER. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | SHE IS ABLE TO DIREST THE INFORMATION I GIVE HER AND TO GIVE ME SUGGESTIONS TO MEET MY GOALS. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | WITH IT BEING AT WORK, ALL OF US SHARE IDEAS, UPS + DOWN. OUR OWN LITTLE SUPPORT GROUP. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | CERTAINLY NOT. |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | EATING BREAKFAST. DRINKING WATER. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | SOMETIMES I DO WHAT I WANT IFEEL, NOT NECESSARILY WHAT IS BEST FOR ME. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES WO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | SUPPORT + ACCOUNTABILITY |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | HEALTHY FOODS, GYM. |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|--|
| Fitness | 5 | HAS GOOD SUGGESTIONS. MY QUESTIONS ARE ANSWERED. |
| Nutrition | 5 | ч |
| Stress management techniques | 5 | .(|
| Time-management | 5 | u (|

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | CAN'T | Improve | QN | GREAT. | | |
|--|-------|---------|----|--------|--|--|
|--|-------|---------|----|--------|--|--|

| Company Chemfil Canada | Date |
|--|-----------------------|
| Consultant's Name <u>Jennier Diver</u> | · |
| Location wmdsv | Your Name Lisa Ovants |

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 (+10) |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Learn new things and take different approach on health, weight maintenance. |
| What did you like most about the consultation? | Personable |
| What areas of the consultation could use some improvement? | Seems repetitive sometimes. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | she suggests tools I could use up to me to use them. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | I find it helps at home, therefore will spread through life at work at well |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | v/A |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Snacking more, organizing more at right for less hassle in the Morning. Using different ingredients in some recipes. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | HI ask how to do something like specific way to properly lift weight, I use technique at home etc. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | Not sure, but new information is always useful |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | aavice is helfpul-non judgmental |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | books, recipes, websites & exercise and recipe |

| | isaltant's knowledge or. |
|-----|--|
| 1-5 | Please Explain |
| 4 | (aifférent types of exercises) has given many suggestions to active se common grad |
| 4 | has given suggestion that I have read in books. |
| 4 | meditation and aug breathing with a great firm |
| 4 | ry ganization suggestion are great |
| | 1-5 4 4 4 |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | Not really, I enjoy the consults. |
|--|-----------------------------------|
|--|-----------------------------------|

| Company JMP | Date _ | _ |
|-----------------------------------|------------------------|---|
| Consultant's Name <u>Jennifer</u> | Cooper | |
| Location Phila | Your Name Lally Frakes | |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|----------------------|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | |
| What did you like most about the consultation? | |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 4 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 4 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would | |
|---|--|
| help improve our wellness programming? | |

| Company JMP | Date | 16/13 |
|----------------------------|-----------|-------------|
| Consultant's Name Fennifer | Cooper | |
| Location Phila | Your Name | Qustin Gunn |



| How many wellness consultations have you had? | 3) 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Seemed like a good idea to get an outside View on my diet/wellness |
| What did you like most about the consultation? | She has ideas I have never thought of so I can try them out. |
| What areas of the consultation could use some improvement? | m/A |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | She has given good information to motivation so I feel like I should achieve my goals as a repayment for her help. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | dict/exercise/wellness is not a common topic at work, and sometimes it is good to have an expert come in. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | X |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Stress management + lunch nutrition |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I kept forgetting to prectice breathry, but the next meeting the reminded, me and now I remember |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | An Experienced eye on what I am enting on how I many a stress It is a good check or how I am sory |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | Indoor Soccer tenjue |

| i icase rate | your communico min | you. oo | ioditant o knowledge or. | | | |
|-------------------------|--------------------|---------|--|--|--|--|
| TO SEE HERE THE SECTION | Topic | 1-5 | Please Explain | | | |
| Fitness | | S | She is very fit + docs treathertons | | | |
| Nutrition | 4. | S | Sets an Example by howing water + healthy froms with her. Ment Planny strategics | | | |
| Stress mana | gement techniques | 5 | Tubat she to 10 me to 00 literally | | | |
| Time-manage | ement | 5 | shows up on time, fills up all the time, | | | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | Lorder phone on our conference enil each month, and more funfacts about food. |
|--|---|
|--|---|

| Company | JMP | Engineering | | Date _ | June | 25 | 2013 | |
|--------------|--------|-------------|-----|---------|-------|------|------|--|
| Consultant's | s Name | Jen myker | 2/1 | | | | | |
| Location | Mea | dowbreok | ٥ | Your Na | ame 🤻 | as 1 | erny | |

Head Office Consultation Feedback Survey



One-on-One Consultations

| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 (5) |
| How would you rate the professionalism of the consultant? | 1 2 3 4 (5) |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Opportunity to team techniques for improving health without having to go to gym! |
| What did you like most about the consultation? | Personal to me. |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Encouragement à ideas |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | We work long hours + don't always have true to go to the gym or think about what we eat. Fent heeps me |

focussid,

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | NA |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Eating breakfast! |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I get so busy I have to keep remembering to stop , think what Jen |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Routine - I know in advance when it is going to happen so can plan for it |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | Quinoq. Whole grain Products |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 4 | |
| Time-management | 4 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | | | |
|--|--|--|--|
|--|--|--|--|

| Company JMP Engineering | Date June 13/13 |
|----------------------------------|--------------------------|
| Consultant's Name JPM MC (In 77) | |
| Location Landon | Your Name Charmaine HOFF |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations | |
|--|---|
| have you had? | 3 (4) 5 6 7 8 9 10 +10 |
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 (5) |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | I needed to make some changes in order to lose weight, active. |
| What did you like most about the consultation? | Ten is very knowledgable. She gives realistic, easy to follow advice. |
| What areas of the consultation could use some improvement? | I would be interested to know my body fact 1. Is this an option? |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | As mentioned above, Jen gives realistic advice to fit my lifestyle. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | (YES) NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | to our benefits plan. |

| | 1 |
|--|--|
| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | no-addresses nutrition, exercise, lifestyle needs. |
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Frething active again! I feel like I ha to have something positive to report each consultations so it helps to sething |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | motivation levels. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | on stress reductions NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | fiething advice to help sort through all of the overwhelming nutritional information. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | Substituting healthier options (il greek yogust reducing sugar increasing |
| Please rate your confidence with | Y) Y PHY IN 1 |
| Topic | 1-5 Please Explain |
| Fitness | 5 7 Very |
| Nutrition | 5) Knowledgable |
| Stress management techniques | 3 maybe some more into lon this top, |
| Time-management | 5 understands my time is limited. |
| Other Programming | |
| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | Jen is great! She does a fantastic job. |

| Company JMP Engineering Inc. | Date | 5 |
|--------------------------------|---------------------|-----|
| Consultant's Name Jen Mackenzi | Te . | |
| Location London Ontario | Your Name Karen Pla | ntt |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | At first I was skeptical, but thought 16d give it a try. I was interested in new ways to spire up my workents + eating habits. |
| What did you like most about the consultation? | Everything - Jen really 113tons + allows you to focus on your own prodrities and goods. She motivates you, but not in a condescending way |
| What areas of the consultation could use some improvement? | None-I'm extremely happy with what I've learned and what Jen provides. |
| Do you feel that your consultant is able to help you achieve your goals? | YES , NO |
| Please explain | She's fantastic. She takes what I say I'd like, and comes back with an awesomor plan to get me there. She's a great encourager as well. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | People need to take advantage of all that Jen has to offer. It's a shame more people aven't lined up to see her: team I can't say ehough good things about her! |
| | I can't say enough good things about her! |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | Nope. Nothing. |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | My morning Boot Camp Norkauts-it's completely changed my body and is just what I needed. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | She is very knowledgeable, + I feel she winderstands my priorities, so I always take her dance seriously. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | -Progress hodate, discuss current challenges, new workout routine. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| i icaco iato | your commonico mini | , ou. oo. | iountaint o kilowiougo oii |
|--------------|---------------------|-----------|------------------------------------|
| | Topic | 1-5 | Please Explain |
| Fitness | | 5 | |
| Nutrition | | 5 | |
| Stress mana | gement techniques | 5 | |
| Time-manage | ement | NA | Haven't really discussed with her. |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? Someone needs to tell my coowerkers to stop with the excuses and get maring! It saddens me that more people aren't taking advantage of this apportunity. | <u> </u> |
|---|----------|
|---|----------|

| Company Libro | Date _ guae 14/13 |
|--------------------------------|-------------------|
| Consultant's Name <u>Saura</u> | |
| Location admin | Your Name Maria |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



One-on-One Consultations

| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Crew I readed to do sithg. E the. Wellness Profile Quotient; wenter confirment of thought |
| What did you like most about the consultation? | Inderestive. Laura listered to what I was saying gwen me wools that are specific to me. |
| What areas of the consultation could use some improvement? | Gorbeig. I'm very Rappy! |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | What she's saying is making sense to me. I feel I am do it |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | That's all we doer about during our breaks, herekes Love the games |
| | (We are a anount to be ach) |

We are a competitive becali

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | Rope. |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Increased walking Vines & ant of water. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I pelieve u what she say |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | ohe's open to discussing any items to pers I brung you'le toble. Then to accompandate & does an accessone clour then |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | The's unpowering me by taking walks,, |
| | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 5. | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | Leenthung is Sheat! |
|--|---------------------|
|--|---------------------|

| Company | Date |
|-------------------|--------------------|
| Consultant's Name | |
| Location Science | Your Name Man Anno |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 (5) |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Overall Nealth. Stress Famy |
| What did you like most about the consultation? | Farnly understanding: easy to talk to |
| What areas of the consultation could use some improvement? | nothing @ His point |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Cours me ideas + sets goals understands I-fo is busy |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | I think everyone can ase help with health of thess |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | How to deal with a family member |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | So for she hus giver good advice - and realistic |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | I think the 12 open to any topics I mylt ask about |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | She's a great 1-stener. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | different Soods / Vitamins |

| Topic | 1-5 | Please Explain | | | |
|------------------------------|-----|-------------------------|--|--|--|
| Fitness | 5 | Exercises that work for | | | |
| Nutrition | 5 | Corect Lips | | | |
| Stress management techniques | 5 | 6000 ideas | | | |
| Time-management | | NC | | | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | | |
|--|--|--|
|--|--|--|

| Company Libro Financial Group | Date June 19/13 |
|--------------------------------|-----------------------|
| Consultant's Name Laura Botter | |
| Location Libro - Sauria | Your Name Stay worden |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | -need to change my health |
| What did you like most about the consultation? | - very easy to talk to - lauro is very helpful temportive |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | -great ideas by laws a aways |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | - by everyor at work being involved in the program - we communicate well + offer suggest to one another |
| | well + offer support to one another |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | nex with consultant aball. |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | ealing more protein |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | - Sometimes hard to manage time to doing the activities I want to do. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | -great active by Laura -great support |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain | | | | |
|------------------------------|-----|---|--|--|--|--|
| Fitness | 4 | Laura has given me exercises to do at the gum which are helifu | | | | |
| Nutrition | 4 | cours has given me exercises to do at the gymunich are helpful easing more protein than before program started | | | | |
| Stress management techniques | | 5) 50 | | | | |
| Time-management | | | | | | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Company _ | LIBLO | FINANCIAL | Date | Jun | E 10 | (13 | |
|------------|---------|--------------|--------|------|------|-------------|--|
| Consultant | 's Name | LAURA BONTER | | | | | |
| Location | ADMIA | ISTRATION | Your N | Jame | PAT | - DEVELLAND | |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 (5) |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | |
| What did you like most about the consultation? | NO PRESSURE & TAILORED TO ME (LIFESTYLE & NEEDS) |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | VES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | BETTER SLEEP - EXERCISE ROUTINE -AWARENESS OF MY OWN NEEDS FOR HEALTH |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | BUSY WORK LIFE INTERFERED WITH ALL MY GOALS/TAKGETS |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | PROGRESS |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | HERBAL TEA |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 7 | |
| Time-management | 7 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Company Libro | Date <u>\vac 10/13</u> |
|-------------------------------|-------------------------|
| Consultant's Name Lava Bonton | |
| Location Admin | Your Name Enka Wiendels |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 (5) |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | maintaining a nealthy lifestyle |
| What did you like most about the consultation? | she is expenenced and has great tips that are easy to follow |
| What areas of the consultation could use some improvement? | N/a. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | N/a. |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | -running a 10km |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Knowledgeble, friendly & non judgemental. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | NIA |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|--------------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | AIN | have not discussed |
| Time-management | Ma | to to |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness | |
|---|--|
| programming? | |

Company Libro Financial Group Date June 17, 2013

Consultant's Name Laura Bonter

Location Libro Admin Office Your Name Michelle Rigato

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| Che on one concentatione | ~ |
|--|---|
| How many wellness consultations | 3 (4)(5) 6 7 8 9 10 +10 |
| have you had? How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | wanted to see what the program had to offer and how it fit with my goals. |
| What did you like most about the consultation? | Laura is so easy to talk to + she really takes an interest. |
| What areas of the consultation could use some improvement? | None. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | was given workout program, food ideas, and other useful tips. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Yes! Everyone deserves to be "well" and this is a great way to begin. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | None. |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Changing up my workout routine definitely more challenging! |
| How often do you act on the advice given by the consultant? | All the time sometimes Not very often |
| Please explain. | Definitely try & follow most Laura says but sometimes other "stuff" gets in the way |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | The re-connection + re-affirmation of what I'm working on. Keeps me accountable! |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | Water bottle for protein power workout program |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|------------------------|
| Fitness | 5 | Very knowledgeable |
| Nutrition | 5 | (1, 1, |
| Stress management techniques | NA | Bon't alisass this |
| Time-management | NA | We don't discuss this. |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness | | |
|---|--|--|
| programming? | | |

| Company Scholpath | Date 5et 20/13. |
|--------------------------------|-------------------------|
| Consultant's Name <u>Laura</u> | |
| Location London | Your Name Lawie Mckelop |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 6 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 (5) |
| What motivated you to book a consultation? | I am committed to a healthy lifestyle |
| What did you like most about the consultation? | "down to earth" - very personable. |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | She helps to keep me an the right track - positive motivator |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Keeps it "top of mind" |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | She just tells me to get to the gym! |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|------------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | | never disaussed. |

| Is there any feedback that you can provide regarding your experience with the wellness program that would | Hanks for every thing - |
|---|-------------------------|
| help improve our wellness programming? | wonderglud program! |

| Company <u>Libro</u> | Date fine 18/2013 |
|---------------------------|----------------------|
| Consultant's Name Laura B | U |
| Location ddam | Your Name Sais Unger |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | -have sommente des cusa health/exercise concerns with -someone to be accountable to |
| What did you like most about the consultation? | -lyercine tips -nutritional advice |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | - Innall step approach - makes it Manageable |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | to be able to have a "2 ha/ noth to speak with someone face to face at work (where most the stress is) is helpfull |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | brechfast meals So never ate breakfast |
| How often do you act on the advice given by the consultant? | Mod *All the time Sometimes Not very often |
| Please explain. | I sabotage nyself + my efforts w/chocolate indulgences I'm working on it |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | accountability to someone |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|---------------------|
| Fitness | 5 | she walks the talk |
| Nutrition | 5 | - great suggestions |
| Stress management techniques | Na | |
| Time-management | Na | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | | |
|--|--|--|
|--|--|--|

| Company Was financial | Date _ Jure 19/2013 |
|--------------------------------|-----------------------|
| Consultant's Name Laura Botman | |
| Location Sacrica | Your Name Bonnic Cocu |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 (5) |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Needed to lose weight Battling depression! |
| What did you like most about the consultation? | Tasy to talk to, very knowledgable Ste practices what she preades Sewalks the Balk. |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Since my initial Consultation I take but 21 pourds |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | NO NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Stellerps us motivated, and ste gives great suggestion-si |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | I'm excited to tell her my accomplishments |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 5 | |

| with the wellness program that would help improve our wellness programming? |
|---|
|---|

| Company | Date 5412 |
|-------------------------------|-----------------------|
| Consultant's Name Lawa Bonter | |
| Location Sarnia | Your Name Susan Roddy |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Wanting to maintain a healthy lifestyle. |
| What did you like most about the consultation? | Laura created a very comfortable environment. |
| What areas of the consultation could use some improvement? | Laura provided solutions that were leasn to understand a act on |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| la than a survey and at a five we will be a con- | |
|--|--|
| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | Incorporated the diet changes, But not |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|-----------------------------------|
| Fitness | 5 | She created an exercise routive |
| Nutrition | 5 | recommendations on changes to die |
| Stress management techniques | HIA | |
| Time-management | AIN | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | | |
|--|--|--|
|--|--|--|

| Company | iro, | Date | June 19/13 |
|-------------------|------|----------|-------------|
| Consultant's Name | Lama | Bokenter | |
| Location | Samo | Your N | Name Halmer |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|------------------------|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | help me stan motivated |
| What did you like most about the consultation? | accountability |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |
| | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | el want to reduce maintain |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 4 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | THANK YOU - |
|--|-------------|
|--|-------------|

| Company <u>Libro</u> | _ Date <u>Jul 1913.</u> |
|--------------------------------|-------------------------|
| Consultant's Name Laura Bontan | <u></u> |
| Location Samia. | Your Name |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | -available through work during optice hours |
| What did you like most about the consultation? | -gets no thinking about getting healthier. |
| What areas of the consultation could use some improvement? | - maybe a demo of exercises deride the meeting! (with me as the forming) |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | - only I can achieve my goals. I some one could do it for me I would just tray them. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | It keeps it top of mind. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | -530 am walks. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I try but get distracted and contini |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | - Hs available - Keeps me modificated. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | N/A. |

| i icase rate | your commucined with | , | iountain o knowlougo ori |
|--------------|----------------------|--|--------------------------|
| | Topic | 1-5 | Please Explain |
| Fitness | | 5 | Sho's very lit herself. |
| Nutrition | | 5. | Very Knowledgable. |
| Stress manag | gement techniques | 414 | have not disceused |
| Time-manage | ement | NA | howen't discussed. |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Company Libro Financial Group | Date Jone 19,2013 |
|--------------------------------|------------------------|
| Consultant's Name Laura Bonter | |
| Location Sarnia Branch | Your Name Samie Carson |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 ⑤ |
| How would you rate the communication skills of the consultant? | 1 2 3 4 🕏 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | To get houthier. |
| What did you like most about the consultation? | - Somebody to chat to +Bound ideas off of - Somebody to after suggestions - Somebody to Keep you Accountable |
| What areas of the consultation could use some improvement? | Online area to track goals + Acheinands to track progress. |
| Do you feel that your consultant is able to help you achieve your goals? | NO NO |
| Please explain | - Kept me accountable for my goals - Kept me interested |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | It is a positive + interactive way for people in a sedentary life style to become heathir + more Active. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | Online area to track result regoals |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | -cating healthier -Ran a lok race |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | - most of the time. Don't always make it to ther gym as often as I should. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | - Keeping me accountable + also somebod to share successes with |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | NO NO |
| What products or services has your consultant referred you to, if any? | |

| i icase rate your communities with | , ou. oo. | iountaint o knowledge on |
|------------------------------------|----------------------|--------------------------|
| Topic | 1-5 | Please Explain |
| Fitness | 4 | Great Seb |
| Nutrition | 4 | Great Jub |
| Stress management techniques | NA | didnt use this |
| Time-management | N/A | didnt use this |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | Very much enjoyed the Consultations. Laura was positive, encouraging and very easy/comfortable to talk to. |
|--|--|
|--|--|

| Company FAMILY & MILMONI SANGE | Date SMULLY WILLIS |
|--------------------------------|---------------------------|
| Consultant's Name | |
| Location SVAAA | Your Name KANA HITMINGOM. |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 (10) W |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 (5) |
| How would you rate the communication skills of the consultant? | 1 2 3 4 (5) . |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 (5) |
| What motivated you to book a consultation? | I want it to start running again and get back on track with eating well. |
| What did you like most about the consultation? | Michille is very easy to talk to and has a non-industry. |
| What areas of the consultation could use some improvement? | I can't think of any. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Muhelle has provided me with lot of whoking hon and guldanic. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | It's muy to take a break from work " |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | Can't think of anything. |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Michaile a creliped a program to me to help ease me to help ease me to help |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | simewhere indetineen worthwes and without time. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | NIA |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | She is very easy to tick to any gives me |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | TIMENIA CO IT BALL DASKINDEMANAJ. |
| What products or services has your consultant referred you to, if any? | Protein supplement of multivitamins. |

| ricase rate your communice with your consultant a knowledge on | | iountain o knowlougo on |
|--|-----|--|
| Topic | 1-5 | Please Explain |
| Fitness | 5 | She knows her stiff. |
| Nutrition | 5 | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ |
| Stress management techniques | - | we've never taked about this. |
| Time-management | - | 11 |
| Other Programming | | (husn't been a tows to me). |

Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming?

| Company FLCS of Guelph | Date Jan. 10 13 |
|-------------------------------|------------------------|
| Consultant's Name MIChe'll P. | A |
| Location ELORA | Your Name Amanda Bayer |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 (+10) |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | the discussion i learning opportunities. |
| What did you like most about the consultation? | See above |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | VES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | ·nutrition education. ·stress awareness |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | not be consistent long tern |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Discussion & follow up |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | · Clanger · nutrition · books · vitumins/ supplements |
| Places rate your confidence with | vour consultant's knowledge of: |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 4 | |
| Nutrition | 4 | |
| Stress management techniques | 3 | |
| Time-management | 3 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
| programmig. | |

| Company Gulph FCS Consultant's Name Michelle | Date Jan 23/13. |
|--|---|
| Location Eramosa | Your Name Debbie Zen |
| Location <u>Erimosu</u> | rour Name while Leg |
| Employee Wellness So Head Office Consultation F | Solutions Notwork |
| One-on-One Consultations | low=1 high=5 |
| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | friendly, respectful, knowledgable, approachable |
| What did you like most about the consultation? | she applies relevant research, give lots of example, handouts, provides visual demonstrations of exercises. |
| What areas of the consultation could use some improvement? | - nothing, really. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | motivating, respectful, consistent, obtainable goals |

NO

NO

Please explain

Does your consultant give

are achievable to you? Is your wellness consultation

within your work place?

suggestions for lifestyle change that

something that you feel is important

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | -20 |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | - vitamins - regular healthysnacks etc - exercise routines |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | - she has changed the way I think about food (eg protein, fat, carb) |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | -d always seen to walk away with something new. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| i icaco iato | your communico min | with your concurtant o knowledge on | |
|----------------|--------------------|-------------------------------------|----------------|
| ENDORFE STREET | Topic | 1-5 | Please Explain |
| Fitness | | 5 | |
| Nutrition | | 5 | |
| Stress mana | gement techniques | 5 | |
| Time-manag | ement | 5 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness | d've really appréciated Michelle's help! | all of |
|---|---|--------|
| programming? | | |

| Company FXCS bulph | Date January 3//13 |
|-------------------------------|---------------------------|
| Consultant's Name Michelle 1. | |
| Location <u>Framosa</u> | Your Name Colleen Reardon |



| How many wellness consultations | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| have you had? How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Wanting to make lifestyle chaldges |
| What did you like most about the consultation? | Positive atmosphere, encouraging, good advice with no judgement |
| What areas of the consultation could use some improvement? | Consultant having time before meetings to review past neetings so info not repeated |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Having scheduled meetings with specific goals |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Feels like employer cares. Helps with stress, health |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Improvement in eating habits for whole family |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | Nutrition advice has been great. I haven't done well with exercis |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Keeps me notivated knowing I have a neeting keeps my had at top of mind |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | Specific foods, supplements |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|-------------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 3 | |
| Time-management | | Hoven't discussed |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness | |
|---|--|
| programming? | |

| Company LONDON HYDRO | Date |
|-------------------------------|--------------------------|
| Consultant's Name ROSE KOLDEN | HOF |
| Location III HORTON SF. | Your Name CRASTINA TEREK |



| How many wellness consultations have you had? | 3 4 (5) 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | EMPLOYER PROVISED THE OPPORTUNITY BURING WORKING HIB. |
| What did you like most about the consultation? | TAILORED TO ME & MY CIRCUMSTANCES |
| What areas of the consultation could use some improvement? | MORE INTERACTION (TALKING US. CISTENING) |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | THERE ARE ALWAYS OPTIONS TO THINGS HARDER TO ACHIEVE |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | EMPLOYER VALUEING WELLBEIN OF EMPLOYEES |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | HEALTHIER LUNGHES/ SNACKS |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | WHEN CONVENTENT |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | OPEN ESS |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| i lease rate your confidence with | your consultant a knowledge or. | | |
|-----------------------------------|---------------------------------|-------------------------------------|--|
| Topic | 1-5 | Please Explain | |
| Fitness | 5 | WETHKED BOUT SPORTS | |
| Nutrition | 5 | WE TALKED ABOUT FOOD | |
| Stress management techniques | 5 | WE TALKED ABOUT SLEEPING PAYERNS | |
| Time-management | WA | PATERNS | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | GREAT! |
|--|--------|
|--|--------|

| Company | London | Mydro | Inc. | Date Jar | 14/13 | |
|--------------|--------|---------|----------|-----------|--------|------------|
| Consultant's | s Name | Rose Ke | oldenhof | | , | |
| Location | London | Mydro | Office' | Your Name | Toyala | BORDYICKIC |

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 ⑤ |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 ⑤ |
| What motivated you to book a consultation? | -in busy life we offen forget about maintaining our own wellness. We need to be remainded everyones in a while to put about own wellness of on the first place |
| What did you like most about the consultation? | - privat and confidental-one on one basi's - covers various aspects of well being - the consultant is knowledgable with the various areas Wellness solutions |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | -when we set a goal, she blows-up on the goal, to easure and also on the previously set goals. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | - covers very good topics and tips of xell 6 - good remainder to stick with good and maintain belanced lifethile |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | - diink more (enough) weter |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I wich I act on them all the time, however I for forgot about them. I act/for when our app, is approach |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 to 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | meeting her and discussions my goals and other aspects of reell before makes to me |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 4 | |
| Time-management | 4 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | | |
|--|--|--|
|--|--|--|

| Company | LONDON | Hydro | Date Loc 12, | 2012 |
|--------------|------------------|-----------|------------------|-------------|
| Consultant's | Name <u>Rose</u> | Koldenhor | | , , |
| Location 🙏 | 4 | | _ Your Name Lynn | Nowoselsky. |

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 (5) |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | the need to be more active in an inactive job + eat better. |
| What did you like most about the consultation? | very caring, personalized, realistic |
| What areas of the consultation could use some improvement? | Customer service is the most immobble group because of the job - morning or after work sessions like |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | She never gave up |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | The whole department is making better eating chauses. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | NO |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Noon hour (1/2 hr.) workouts. I some workout time is better than non |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I find I do work outs better in a group situation |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | her knowledge + her gumone sence of any, |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------------------|
| Fitness | 5 | can define workouts |
| Nutrition | 5 | receipies included. |
| Stress management techniques | 4 | fitness. |
| Time-management | \$ | she tries @ I don't glwang |

Other Programming

Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming?

| Company Guelph F | -d CS Date June 6/13 |
|--|--|
| Consultant's Name Rose | Parr |
| | Your Name Susun Capper |
| Employee Wellness So Head Office Consultation F | California |
| One-on-One Consultations | since last summer?? |
| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 (5) |
| How would you rate the professionalism of the consultant? | 1 2 3 4 (5) |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | weight gain |
| What did you like most about the consultation? | many helpful tipos well prepared remembers ou |
| What areas of the consultation could use some improvement? | longer meetings |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Unowledgeable about nutrition, exercise, motivation |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | 1+ Keeps me motivated in my work environment to Meet my 'health' goals |
| | meet my 'health' goals |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | No. |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Lost 1016s over past year walks at lunch time |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | She gives me a variety of options I choose one at a time |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | funy "knows her stuff" engaging knows about things la interested in |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | None specifically talk about naturopaths/massage etc. talk gener |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------------------------|
| Fitness | 5 | provides tips & plans |
| Nutrition | 5 | provides tips & Suggestions |
| Stress management techniques | 5 | talk about alternate strategies. |
| Time-management | N/A | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | - different times offered (hard to schedule with specific times provided - longer appointments. | |
|--|---|--|
|--|---|--|

| Company Familya Children's Service | Date May 9 |
|------------------------------------|------------------------------|
| Consultant's Name Rose | |
| Location <u>Guelph</u> | Your Name Connic Mo ntgomery |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | |
| What did you like most about the consultation? | Jlike the 1:1. |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | She offers a lot of encouragement a suggestions |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | (YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Since it is available, I use it! |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Weight loss, |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | alternates to use, and vitamins to take |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| ricase rate your confidence with | <u>you. oo.</u> | your consumer of knowledge on | | |
|----------------------------------|-----------------|---|--|--|
| Topic | 1-5 | Please Explain | | |
| Fitness | 5 | I belong to Carves -> Very positive. | | |
| Nutrition | 5 | lots of recipes / Suggestions. | | |
| Stress management techniques | 5 | helped me through a MULTITUDE of stuff! | | |
| Time-management | | | | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Consultant's Name Rose Par | · |
|----------------------------|----------------------------|
| Location Guelph | Your Name Corie-Lynn Smith |

Head Office Consultation Feedback Survey



One-on-One Consultations

| <u> </u> | |
|--|--|
| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 (5) |
| How would you rate the professionalism of the consultant? | 1 2 3 4 (5) |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | I was very interested in Seeing what tools I could gain to help improve my life style. |
| What did you like most about the consultation? | I like that we can talk openly and that Rose provides me with so much information on a variety of topics. |
| What areas of the consultation could use some improvement? | I don't know as I am always impressed. |
| Do you feel that your consultant is able to help you achieve your goals? | (YES) NO |
| Please explain | She provides me with reasonable tools + time lines to achieve my goods. She always offers me Support + encouragement. She asks how it is going eve |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | Support + encouragement. She asks how it is going ever when I don't have an appt |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | our work place can be stressful many days and being able to get tools to help me from eating well at my desk to exercises I |

can do at my desic really help me relife daily stress.

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | 100 |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | I suffer from panic attacks and she has helped me find alternative ways too releas & culm myself durning an attack in public. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I find sometimes I put things off so I need to be more on top of things. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | I really enjoy how Friendly Rose is and how well knowledge she is. I find that she provide: me the modification to keep working at my goals. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES |
| What products or services has your consultant referred you to, if any? | She has found some contact information for Support groups for panic attacks. This was great for me. |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 5 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness | |
|---|--|
| programming? | |

| Company Family Children service of | Date <u>May 2 2013</u> | |
|------------------------------------|---------------------------|----------------|
| Consultant's Name Rose Parr | <u>'</u> | e ² |
| Location Eramosa Office | Your Name Christing Wolfe | · |



| How many wellness consultations have you had? | 3 4 5 | 6 7 | 8 | 9 10 | (+10) | 6. |
|--|-------------------------|-------------------|----------------|---------------|------------------|-------|
| How helpful was the consultant? (1=not, 5=very) | | 1 2 3 | 4 | 5 | | |
| How would you rate the professionalism of the consultant? | | 1 2 3 | 4 | (5) | | |
| How would you rate the communication skills of the consultant? | | 1 2 3 | 4 | ⑤ | | |
| How involved did you feel in deciding next steps for your health? | | 1 2 3 | 4 | (5) | | |
| What motivated you to book a consultation? | how stress wanting to r | ful the nake m | Job IY II F | ldo e bett | er. | |
| What did you like most about the consultation? | Rose's per | | | | | \ \ I |
| What areas of the consultation could use some improvement? | None | | | | | • |
| Do you feel that your consultant is able to help you achieve your goals? | | YES | ١ | 10 | | |
| Discos comisio | | | | | | |
| Please explain | | | | | | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | (| YES) | N | NO | | |
| Does your consultant give suggestions for lifestyle change that | (| YES) | | 10 | | |

| is there any aspect of your wellness consultation that you feel is lacking? Please explain. | None. |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | stress, lack of sleep nutrition |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | - sometimes due to lack of Motivation or time; has nothing to do with consultant |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES (NO) |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 ③ 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Rose's understanding and empathy. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | (YES) NO |
| What products or services has your consultant referred you to, if any? | stress relief massage. |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | l | |
| Nutrition | 1 | |
| Stress management techniques | 1 | |
| Time-management | 1 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness | | | |
|---|--|--|--|
| programming? | | | |

| Company / | | Date | July 5 2013 |
|---------------------|------------------|--------|-------------|
| Consultant's Name _ | Sharon Singleton | | |
| Location | | Your N | Name Nanay. |

Head Office Consultation Feedback Survey



One-on-One Consultations

| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Needed to implement a life style change |
| What did you like most about the consultation? | Sharon is very supportive à informative. |
| What areas of the consultation could use some improvement? | None. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Very helpful with tips & new ideas to aid in overcoming roadblocks. Always offering New ideas, he expenses to all in |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Every norkplace should have such a program. Whether you embrace it or not. The program has a postive impact on all of my co-vorkers & aid us in |
| | |

mating better choices for a healthin life style.

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | No |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Stay the course. Try new activities to stay active. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I have been on too many diets where I have lost the weight Coal a then put it on again. This have is about changing my eating habits a slowly working up to more activity. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | Mere activity YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | review where l're been & where I am- goins. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 5 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
| programming. | |

| Company KI - Krueger International | Date June 25, 2013 |
|------------------------------------|-------------------------|
| Consultant's Name Sharon Singleton | |
| Location Pembroke Ontario | Your Name Lorrie Layman |

Head Office Consultation Feedback Survey



| How many wellness consultations | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| have you had? | 0 4 0 0 7 0 0 10 110 |
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| | |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Wanted to improve health, get fit, eat better learn how to deal with stress |
| What did you like most about the consultation? | Very easy to talk to, great at showing me new exercises, she is always trying to find better ways to help me show me better tood options etc. |
| What areas of the consultation could use some improvement? | nothing all is perfect in my eyes. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | I wanted to lose weight offeel better, I also struggle with depression and with showing me to ect better exercise + helps me feel better all round, |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Yes it shows someone cores about each of us makes us happier, healthier and with different stretches also makes work environment more easier can deal with stres better. |
| | Can deal with stres better. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | Nope |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | loss 3 LBS + Kept it off, Feel better donot ache all the time |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I know I should do more exercises and I am trying to improve on this i |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | Dealing with a death of husband |
| How many weeks is it between your consultations on average? | Dealing with a death of husband 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | exercise, more stretches, good talk |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | better food choices, less salt, less sugar, etc. |

| i icascitate your confidence with | the your confidence with your consultant's knowledge or. | | |
|-----------------------------------|--|--|--|
| Topic | 1-5 | Please Explain | |
| Fitness | 5 | She explains all exercises + stretchs that work with | |
| Nutrition | 5 | explains what should a should not be eater | |
| Stress management techniques | 5 | Yoga + stretches + breathing | |
| Time-management | 5 | never goes over the time alotted forappt. | |

| provide regarding your experience | I was very skepital at the start but once working with Sharon I believe in the better health & wellness and want to keep learning. |
|-----------------------------------|--|
|-----------------------------------|--|

| Company KI PEMBROKE | Date JUNE 25/ | /3 |
|--------------------------------------|-------------------------|-------|
| Consultant's Name SHARON SINGLE 10 N | | |
| Location PEMBROKE | Your Name <u>DEBBIG</u> | JUNOP |

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 (5) |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | I WANTED TO CHANGE MY WELLNESS LIFESTYLE |
| What did you like most about the consultation? | I FELT VERY COMFORTABLE WITH SHARON (FEEL) |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | SHE HELPS ME GET BACK ON TRACK WHEN) NEGO 17 - OHERS SUGGESTIONS. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | KEEPS ME ON TRACK (MOST OF THE TIME!) |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | EXERCISE PROGRAM. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I DON'T HAVE THE DRIVE SOMETIMES TO MAKE MYSELF FOLLOW HER ADVICE. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | HER UP-BEAT PERONALITY! |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 4 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | I REALLY ENJOY OUR YOLA SESSIONS. I, MOST LIKELY, WOULDN'T GO IF IT WASN'T OFFERED AT WORK. |
|--|---|
|--|---|

| Company KI Canada | Date June 26th. 2013 |
|------------------------------------|------------------------------|
| Consultant's Name Smiles Singleton | |
| Location Penulsolu Outens | Your Name Lesley-ann Leclaix |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 (5) |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 (5) |
| What motivated you to book a consultation? | To gain overale health into on everything (nutrition, weight loss, exercises, etc). |
| What did you like most about the consultation? | The variety of distenent (creative) uxeleises. |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | The breaks thing does into smaller a chievable souls. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | defel that I have become more aware of my health because I |
| | offins that are being onone active. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Fighed up you my 1 ST Newmony Class even + 10 wks later, I Pan a 5 km maratho |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | Iranon gives great adviced, of just don't have the time to jollow through waren |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 (4) 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | gle sups me Respirated of get me back on trach. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | the running class @ active CARO. |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|---|
| Fitness | 5 | great variety of excepcises Quahh, Chame. |
| Nutrition | 2 | not to change all my habits cance, smalled |
| Stress management techniques | 5 | she teachs us yozahere & Delieves in reman |
| Time-management | 5 | teceches us to break it draws to gourselves |
| Other Programming | | get 5-10-18 mins in but do semething |

Other Programming

Il think that she touches on all Is there any feedback that you can ten different aspects of well being.
and can't teninks of any turns more provide regarding your experience with the wellness program that would help improve our wellness programming?

2 Thanh You!

| Company KI Pembroke | Date | June 7th, 2013 |
|------------------------------------|----------|----------------|
| Consultant's Name Sharon Singleton | | |
| Location Pembroke ON | Your Nan | ne BING LE |

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 (+10) |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a | To look for professional instructions to |
| consultation? | improve my health condition. |
| What did you like most about the | the step by step approach to increase |
| consultation? | the strength of exactises based on physical come |
| What areas of the consultation could use some improvement? | not sure. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | My consultant explain the detail of the exercise and control the screngeh. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Sitting for long time on Job may cause backpain or neckpain, it is important to do something to resulve |
| | or neckpain, it is important to do something to resulve |

| | 4 |
|--|---|
| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | Need more instruction about how to improve sleep quality of daily night. |
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | the proper exercises instructed by Sharon has cured my backpain, which bothered me li |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | Action I take has to be coordinate used my regular daily activities. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | Improve sleep quality. |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | professional advice on how to relove my back pain by proper exercises. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | No. |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 3 | |
| Nutrition | 3 | |
| Stress management techniques | 3 | |
| Time-management | 3 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Company Kl Pembroke | Date | June | 13/13 |
|--------------------------|-----------|------------|-------------|
| Consultant's Name Sharon | Singleton | | · |
| Location Pembroke | Your N | lame Charn | naine Marka |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 (+10) |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | healthy living lout of shape. |
| What did you like most about the consultation? | friendly/helpful Knowledgable/motivational. |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | She always listens to my needs and always has a solution that when I tril it really works. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | If I would have to do this on my own first I would not make the time and second I would not be able to affor |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | N_0 |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | muscle stretching ¿ toning. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | find that instructions are really effective |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | helpful information toot hulps to effectively reduce pown in my muscles/body. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------------------|
| Fitness | 5 | any questions that we ask |
| Nutrition | 5 | individually or as a group |
| Stress management techniques | 5 | have been answered and |
| Time-management | 5 | in a timely manner. |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Company | KI | Kombroke | Date | | and the state of t | |
|--------------|------|----------|-----------|---|--|--|
| Consultant's | Name | Sparen | | 4 | | |
| Location | _KI | _ | Your Name | | | |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 DOH SUI |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | i |
| What did you like most about the consultation? | She doesn't judge or make you feel bad |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | (YES) NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | 16 |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

Please Explain

<u>2</u>

1-5

5

D

5

5

Topic

Stress management techniques

Other Programming

help improve our wellness

programming?

Is there any feedback that you can provide regarding your experience with the wellness program that would

Time-management

Fitness

Nutrition

Company KI Pembroke Date June 24/2013

Consultant's Name Sharon

Location Pembroke Your Name Kowin Kung

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|------------------------|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 🐴 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | over weight |
| What did you like most about the consultation? | her hints on exercíses |
| What areas of the consultation could use some improvement? | None |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | losing weight |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | No |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Lost 4 lbs |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | Joined the K.J. gym |
| Are there any topics that you wish were covered in your wellness consultations that are not? | Joined the K.J., gym |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Her knowledge of exercises and nutrition |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | gym food guide |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 4 | |
| Stress management techniques | | |
| Time-management | | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | h) v | |
|--|------|--|
|--|------|--|

| Company | Pembroke. | Da | te June 4/2013 |
|-------------------|-----------|----------|-----------------------|
| Consultant's Name | Sharon Si | ingleton | (|
| Location lembrok | . Ont | Yo | ur Name Shenyl Jessup |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | to get healther lost 26 poures since ster Feb 15/2013. |
| What did you like most about the consultation? | new ideas to try, exercises, different moved to tone, just tarking to her about my goals for healther habits for future |
| What areas of the consultation could use some improvement? | Don't see any improvement think it's great just way it to |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | helps to get you motivated a stay on track. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | No |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | eating healther, exercise. deal with stress |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | Should do more exercise, but fined after working lohrshifts. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | the gives me different restions exercises to tone my body, |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 5 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | MD- |
|--|-----|
|--|-----|

Company <u>LIBRO FINANCIALGR</u>OUPDate <u>July 25/13</u>

Consultant's Name <u>Stacy Lancastel</u>

Location <u>Williams budg</u> Your Name <u>Yogita Jiwaw</u>

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | She wants me to achieve my desided results. |
| What did you like most about the consultation? | Everything. |
| What areas of the consultation could use some improvement? | NIA |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | I need motivation to do something and she helps me motivate |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | Haybe N/A |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | weight 1000 |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | with time permitting |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Motivation |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | High protein, HTTC enerch |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 4 | |
| Nutrition | 3 | |
| Stress management techniques | 3 | |
| Time-management | 3 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Company Libro Financial Group | Date Jine X/13 |
|----------------------------------|--------------------------|
| Consultant's Name Stocy Lancaste | |
| Location Windham | Your Name Laura Strugger |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 (5) |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | it's free interested in improving my hearth inways other than just going to a gym. |
| What did you like most about the consultation? | the brught her scale, calculated weight, measurements, budy fot, etc. = we can reach it |
| What areas of the consultation could use some improvement? | lunger sessions, sometimes they don't seem lung-enough. |
| Do you feel that your consultant is able to help you achieve your goals? | VES NO |
| Please explain | She works to set goods that fill my lifestyle + selecture. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | (ES) NO |
| Is your wellness consultation something that you feel is important within your work place? | VES NO |
| Please explain | healthy co-workers - means happier at work, less sick abus, more energetie. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | storting on exercise ball workout that's easy to do! |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I'm not always willing to my new tood! |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | oble to track my progress, I gives me motivation to stay on track. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain | |
|------------------------------|-----|---|---------|
| Fitness | 5 | Knows lots of work out ratines. | |
| Nutrition | 5 | lots of suggestions on health foods, purion etc | |
| Stress management techniques | WIA | haven't discussed control ete |) —- |
| Time-management | NA | hoven't discussed | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Company <u>Libro</u> - Stratford | Date |
|-----------------------------------|-----------|
| Consultant's Name Stacy Lancaster | |
| Location Stratford | Your Name |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | I have never had one so? Thought would try. |
| What did you like most about the consultation? | She was very frundly |
| What areas of the consultation could use some improvement? | I sometimes feel she doesn't offer anything new or tools for me to less achieves my goals |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | its nich to have temograte to us during our workstyte focus or health |
| | focus or health |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | Twish I could hail some take home. To lesp. |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | improved my packed leuch |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | muschedeile is Letie So et |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | trying to reach my |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | None, |
| | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|-----------------------------|
| Fitness | 4 | verygood |
| Nutrition | 4 | very good in central day to |
| Stress management techniques | ? | never talled with her about |
| Time-management | 3 | had issues schedules apt |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | | | | | |
|--|--|--|--|--|--|
|--|--|--|--|--|--|

| Company hiprofinancial Group Consultant's Name Stacy Lawaster | Date <u>June</u> 28, 2013 |
|--|---------------------------|
| Location Wington Branch | Your Name Jennie |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Curiosity of service |
| What did you like most about the consultation? | Stacy |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Has great suggestations suggestions + mon-judgemental. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Stress management techniques. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Stacy's affitual |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES |
| What products or services has your consultant referred you to, if any? | |
| Please rate your confidence with | your consultant's knowledge of: |
| Topic | 1-5 Please Explain |
| Fitness | 5 |
| Nutrition | 6 |
| Stress management techniques | 5 |
| Time-management | 5 |
| Other Programming | |
| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |

| Company Libro Firancial Group | Date <u>July Z/13.</u> |
|------------------------------------|-------------------------|
| Consultant's Name Stacey LancaSter | |
| Location Wingham | Your Name Katie Pringle |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | was looking for personal training. |
| What did you like most about the consultation? | very motivating, takes an interest in me personally. |
| What areas of the consultation could use some improvement? | mal email communication between sessions - respond to emails |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Gave me a specific workout program. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Helps me to achieve my health goals and helps me to be healthier and feel better |

more communication between sessions. Once a month is not Is there any aspect of your wellness consultation that you feel is lacking? ten enough to meet. Please explain. What is an example of an accomplishment, big or small, that you have worked on with your consultant? How often do you act on the advice All the time Sometimes Not very often given by the consultant? Implemented the workout routine in my Please explain. anged some eating habi Are there any topics that you wish were covered in your wellness YES NO consultations that are not? sport psychol If yes, which topics are of interest to you? How many weeks is it between your 9 10 +10 consultations on average? someone to talk to about my goals What aspect of your wellness progress. Someone toadvise 'me on' consultant keeps you coming each month? Please explain. Would you recommend the consultant and the one-on-one NO wellness consultations to your colleagues? Naturopath What products or services has your consultant referred you to, if any?

Please rate your confidence with your consultant's knowledge of:

| riease rate your confidence with your consultant's knowledge or. | | |
|--|-----|---|
| Topic | 1-5 | Please Explain |
| Fitness | 5 | Good knowledge of exercises and is able to explain them well. |
| Nutrition | 5 | Good recipe ideas and able to help me implement them in my daily routing |
| Stress management techniques | A | some ideas to change lifestyle |
| Time-management | 3 | nash't suggested ideas to me about whe |
| | | workouts. |

| provide regarding your experience - | Great program - would like to see my consultant more often. |
|-------------------------------------|---|
|-------------------------------------|---|

| Company Libro | Date June 142013 |
|-----------------------------------|----------------------|
| Consultant's Name Stacy Lancaster | |
| Location <u>Stratford</u> | Your Name Lancy Mais |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| | > |
|--|--|
| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | getting older 3° want to be healthier want to keep weight down |
| What did you like most about the consultation? | she listensand qu'es advice that is doable - does not jugge |
| What areas of the consultation could use some improvement? | age approprate information ur are different |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | because I have to be accountable to |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Keeps us all molivated |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | mere visits | |
|--|---|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Marged small eating habits losing weight | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often | |
| Please explain. | I try everything she suggests | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO | |
| If yes, which topics are of interest to you? | menopause - agi issues | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 | |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | being accountable | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO | |
| What products or services has your consultant referred you to, if any? | books reaspartini greek yogur | |

| ricase rate your confidence with your consultant s knowledge or. | | |
|--|-----|--|
| Topic | 1-5 | Please Explain |
| Fitness | 5 | she is in shape - suggests things that |
| Nutrition | 5 | she is in stope - suggests things that are double. Suggests easy changes |
| Stress management techniques | 5 | unlking breathery. |
| Time-management | NIA | have not talked about this |

| with the wellness program that would | the reed to remember to take care of occiselves. |
|--------------------------------------|--|
|--------------------------------------|--|

| Company Libro Finance | cial Group Date | JUN 19/13 |
|-------------------------|-----------------|-----------|
| Consultant's Name Shory | concester. | |
| Location Waterloo | Your Nar | me Rouhel |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | weight loss + health questions are welled. |
| What did you like most about the consultation? | Hoving my measurements taken to see my progress. |
| What areas of the consultation could use some improvement? | scheduling seemed to be hard to set in dael. Know now to |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Hoving my questions areward motivates me. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES · NO |
| Please explain | when ppl one hearthy they one happier? coulin sick less. The unfortunate thing is that the unrealthy ppl in our branch |
| | do not tell advanted of this service. |

| | <u> </u> |
|--|---|
| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | νο. |
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | ive lost inches in waist + lost 4165. |
| How often do you act on the advice given by the consultant? | All the time Sometimes , Not very often |
| Please explain. | Stacy suggested I eat cottens cheese |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES . NO |
| If yes, which topics are of interest to you? | Hoothy easy recipes Calorie countries |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | my questions + curious of |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES · NO |
| What products or services has your consultant referred you to, if any? | CONTRACTOR OF THE PROPERTY OF |

| i icaco iato | your communico min | your concurred knowledge on | | | | |
|-------------------|--------------------|-----------------------------|----------------|--|--|--|
| BURNES CONTRACTOR | Topic | 1-5 | Please Explain | | | |
| Fitness | | 5 | | | | |
| Nutrition | | 5 | | | | |
| Stress mana | gement techniques | | unsure. | | | |
| Time-manage | ement | | unsure. | | | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would | |
|---|--|
| help improve our wellness programming? | |

| Company Libro | Date19/13 |
|-------------------|----------------------|
| Consultant's Name | |
| Location Wasela | Your Name 43 Sahadat |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 🕏 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 🕏 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 (5) |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 6 |
| What motivated you to book a consultation? | rexcellent bleas about meals, tarning program and knowledge bare |
| What did you like most about the consultation? | - meracture - meracture de my language level. |
| What areas of the consultation could use some improvement? | - Hoppy with Street and De Dervice 20 Sor. |
| Do you feel that your consultant is able to help you achieve your goals? | VES NO |
| Please explain | - Errest dess for a worker vontré |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | XES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | -solvey read a work like boloner |

| | T |
|--|--|
| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | -vens hoppy with the |
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | -health is break fors -good advise when it comes to mining technique |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | - healthy choices - earns helois |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| i icase rate y | our communico with | your concurrent o knowledge on | | | |
|----------------------------|--------------------|--------------------------------|--------------------|--|--|
| THE SHIP IS SHIPPING STATE | Topic | 1-5 | Please Explain | | |
| Fitness | | 4 | very loss we deget | | |
| Nutrition | | 4 | 11 | | |
| Stress manag | ement techniques | W (A | did not and | | |
| Time-manage | ment | MA | did not sole | | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| company Libro Financial Group | Date June 21, 2013. |
|--------------------------------|------------------------|
| Consultant's Name Stacy Lancas | ster 0 |
| Location Water 60. | Your Name Laura Salive |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | To see what the appointments had to offer as far as new concepts a tips. |
| What did you like most about the consultation? | She had great suggestions a provides helpful info. |
| What areas of the consultation could use some improvement? | have her lead some Froup Session outdoors othis summer ; + approved |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | the is realistic of creative, in helping me Stay notivated! |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES 'NO |
| Please explain | Especially in our job (where we sit all day) I find it importa |
| | to receive this type of benefit. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | portions! |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Incorporating more fruits, veggies thealthy alternatives into my HORRIBLE diet! |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | The doesn't give me unrealistic thing to do 50 Denjoy it. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | teep working on my previous |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES . NO |
| What products or services has your consultant referred you to, if any? | |
| Please rate your confidence with | your consultant's knowledge of: |
| Topic | 1-5 Please Explain |
| Fitness | 5 |
| Nutrition | 5 |
| Stress management techniques | 5 |
| Time-management | 5, |
| Other Programming | |
| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |

| Company | FAR | UEZL | ACKAGIA | <u>೨</u> ၆ Date | Se | CP5716 | //3 | |
|--------------|------|-------|---------|-----------------|------|--------|-------|------|
| Consultant's | Name | TRISE | 1 PUR | DY | | | | |
| Location | DART | MOUTH | | Your N | lame | STUAR | , MeI | MACD |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | WANTING TO GET IN BETTER SHAPE AND LOSE WETCHT. |
| What did you like most about the consultation? | VORY OPEN & FRIENDLY - FOLLOWS A PROGRESSIVE FORMAT |
| What areas of the consultation could use some improvement? | -NOTHING MORE AT THIS POINT. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | BERAUSE TRISH IS SELF MOTIVATORS. AND IT IS SORT OF MILECTIVESVERY ENCOURACING |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | IT PROVIDES MOTIVATION AND A STRUCTURED PATH TO GOAL. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | NOT AT THIS TIME! |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | CHANCENG CATING MABIES |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I HAVE TO WOCK THENDS OUT MY WAY OR IT NEVER WORKS - BUT TRISH PROVIDES HILV THOTWATE |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | JUST KEEPING IN TOUCH AND THE CONSTANT ENCOURAGEMENT. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 4 | |
| Stress management techniques | -3 | |
| Time-management | 1.3 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
| programming: | |

| Company Colonial Handa | _ DateAug 16, 2013 |
|-------------------------------|----------------------|
| Consultant's Name Trish Purdy | 0 |
| Location Halifax NS | Your Name Cathy Alle |



| How many wellness consultations | 3 (4) 5 6 7 8 9 10 +10 |
|--|---|
| have you had? How helpful was the consultant? | |
| (1=not, 5=very) | 1 2 3 (4) 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 (5) |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a | Interested in taken advantage of |
| consultation? | on-site consulting. |
| What did you like most about the consultation? | Ideas and ouggestions on topics discussed. |
| What areas of the consultation could use some improvement? | NIA |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Interested in at home "exercises", Trish is very Knowledgable. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | It is very beneficial to book on-site appointments. Really enjoyed the "walking club" |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | N/A |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | At home exercises |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Trish is very easy to talk to & has good ide |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| ricase rate your confidence with | ate your confidence with your consultant's knowledge or. | | |
|----------------------------------|--|--|--|
| Topic | 1-5 | Please Explain | |
| Fitness | 4 | good suggestions for attainable goals. | |
| Nutrition | H | good into - recommended vitamins already | |
| Stress management techniques | | haven't discussed dector recommende | |
| Time-management | | haven't discussed | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | | | |
|--|--|--|--|
|--|--|--|--|

| Company | COLONIAL | HONDF | <u> Date</u> | Sept. 17'13 |
|-------------------|----------|-------|--------------|---------------------|
| Consultant's Name | TRISH | PURDY | | |
| Location | NLFX | 175 | Your Name | <u>Lesley</u> Hole. |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|-------------------------------|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | want to change lifestyle |
| What did you like most about the consultation? | confidentiality |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | willing to help in all areas. |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | motivation/encouragement |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | NO |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | better eating |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | easy to work with |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 3 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Company OMG | Date <u>SeP+S</u> |
|-------------------|-------------------|
| Consultant's Name | |
| Location Halifox | Your Name 😾 🧶 |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations | 3 (4) 5 6 7 8 9 10 +10 |
|--|---|
| have you had? How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 (5) |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Trish has a positive attitude and is easy to talk to. Very motivating!. The "next steps" provided |
| What did you like most about the consultation? | The "next steps" provided |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 4 | |
| Time-management | 4 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | | |
|--|--|--|
|--|--|--|

| Company | Colonial | Horda | Date | Aug 2 | |
|------------------|-----------|-------|----------|-------------------|--|
| Consultant's Nan | ne This H | Purd | 7 | | |
| Location | | | _ Your N | lame Ken Cakelle. | |



| How many wellness consultations have you had? | | (3 | 3) | 4 | 5 | 6 | 7 | 8 | 9 | 10 | +1 | 0 | |
|--|----------|------|-----|-----------|-----|----------|-----|-----------|-----|------------|-------------|---|------------|
| How helpful was the consultant? (1=not, 5=very) | | | | | 1 | 2 | 3 | 4 | (5) | | | | |
| How would you rate the professionalism of the consultant? | | | | | 1 | 2 | 3 | 4 | (3 | | | | |
| How would you rate the communication skills of the consultant? | | | | | 1 | 2 | 3 | 4 | (5) | | | | |
| How involved did you feel in deciding next steps for your health? | | | | | 1 | 2 | 3 | 4 | (5) | | | | |
| What motivated you to book a consultation? | | | | | | | | 4. | | - | | | |
| What did you like most about the consultation? | | | | | | | | | | | | | |
| What areas of the consultation could use some improvement? | | | | | | | | | | | | | |
| Do you feel that your consultant is able to help you achieve your goals? | | | -: | | (% | (ES) | 7 | | NO | | | | |
| Please explain | | | | | | | | | | | | | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | | | | | · • | /ES | | | NO | | | | |
| Is your wellness consultation something that you feel is important within your work place? | | | | | - | (ES) | | | NO | | | | |
| Please explain | Ar Be | eurs | 714 | 175 Bu | 7 | hat T | hi, | 071 33 | AT: | s p 1e7 | re i Les | 5 | 900 001 |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | that contained post Notherts Iwas Lacking |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | She plivays HAN IMAS 70 |
| Please rate your confidence with y | your consultant's knowledge of: 1-5 Please Explain |
| Fitness | 5 |
| Nutrition | 5 |
| Stress management techniques | I'm USALLY NOT STUOSSEL |
| Time-management | |
| Other Programming | |
| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |

| Company Colonial HONDA | Date July 25, 2013 |
|-------------------------------|---------------------------|
| Consultant's Name Trish Pordy | |
| Location Halifax, NS | Your Name Brian Machellan |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



One-on-One Consultations

| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 (5) |
| What motivated you to book a consultation? | Desire to be more fit / healty. |
| What did you like most about the consultation? | The one on one is effective for getting into. |
| What areas of the consultation could use some improvement? | I like the setup as is, the following idea |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Small changes are being made in habits with food dad |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | It helps to made health a more "importad" goal which |

becomes part of dee work experience. It validates the attempt to have time during the work day to 1 address heath goals.

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | I'm happy with the process as is. |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Diet modification - eat regular broakfast / healthy snack during the day. Exercise - wellting on a more regular basis at moonthing it of tenhans |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | Very smole adurke that can be tollared. a Couple of succestions each west, not major lifestyle change being advocated in a single shot. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Vary upbet and positive. always concerned to help you along the process. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | and exercise level adjustments. These are good to take home and degest. |

| Please fate your confidence with your consultant's knowledge of. | | | |
|--|-----|--|----------|
| Topic | 1-5 | Please Explain | |
| Fitness | 5 | Did a walking program with englayees in July. | |
| Nutrition | S | HAS a lot of moterial a nutrition to gue | ent. |
| Stress management techniques | | Haven't gotton to this but an area of interior | |
| Time-management | | · the contraction of the contrac | ' |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | I think the program is working well. It provides lots of information & ancouragent to make lefe style changes that point to a healthan 14.t life. |
|--|---|
|--|---|

| Company COLONIAL HONDA | Date |
|-------------------------------|---------------------------------------|
| Consultant's Name TRISH PORUY | , , , , , , , , , , , , , , , , , , , |
| Location HALFFAX, IV-S- | Your Name BOB EMTON |



| How many wellness consultations | 3 4 5 6 7 8 9 10 +10 |
|--|---|
| have you had? How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | To continue to learn about good health practices |
| What did you like most about the consultation? | How she resited to plopple, her sorted human o hranledge of the sulfeit. |
| What areas of the consultation could use some improvement? | while we can all improve on what we do, bused on my experience Trish dresall thing well & is a jay to deal with |
| Do you feel that your consultant is able to help you achieve your goals? | (YES) NO |
| Please explain | Written routeral o for delicey inspire one to improve their performance in |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | I believe this pregram will herefet the employees their families plus releve sechness o sech leave |
| | redece sechness o sech leave |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | nil in my lave | |
|--|---|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Consume mere water, eat piger foods o get aregular exercise program | |
| How often do you act on the advice given by the consultant? | All the time 2) Sometimes 3/ Not very often F strue (a () lut santimes sup (2) | |
| Please explain. | Thy to fellow for adding as hest from | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | Fore that I can thenk of at the mount | |
| If yes, which topics are of interest to you? | | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 | |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | To continue to learn about healthy lie stelo styles | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO | |
| What products or services has your consultant referred you to, if any? | Pupu foods, auter consumption, exercise | |
| Please rate your confidence with your consultant's knowledge of: | | |

| i icase rate your confidence with | your com | isultuit s knowledge of. |
|-----------------------------------|----------|-----------------------------------|
| Topic | 1-5 | ? Please Explain |
| Fitness | 5 | Trish is well ressed in all |
| Nutrition | 5 | ospects of healthy living + |
| Stress management techniques | 5 | bealthy le styles. Her severality |
| Time-management | 5 | really serves through in dealing |
| OH D | Ě | with her on a contrar having |

Other Programming

Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming?

| Company Owens Wardyen Group | Date July 25/13 |
|-------------------------------|----------------------------|
| Consultant's Name Trish Purdy | |
| Location Halifax | Your Name Junifer Bonnerie |

Employee Wellness Solutions Network

Head Office Consultation Feedback Survey



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | To be healthier. |
| What did you like most about the consultation? | Trish presents ideas I may not have thought of on my own. |
| What areas of the consultation could use some improvement? | No. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | Trish gives me guidelines to follow towards a healthier me. Having apols & being accountable to a coach is very motivating |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | Beingable to talk about achieving a healthier lifestyle with a professional once a month at work is very convenient rewarding. |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | No. |
|--|---|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Scheduling time to study for 2 uxams during very hectic work schedule. |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | I at least try to follow all of Trish's suggestions. If I do "fall off the wagon;" I let her know i we work it out. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2-4 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Trish has a great personality! So positive She truly wants to help you. She's also a wealth of knowledge. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | None. mostly general good & exercise |
| | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|---|
| Fitness | 5 | We have discussed running & weights |
| Nutrition | 5 | We always talk food! Lots of handouts. |
| Stress management techniques | 5 | We often talk about different ways to manage stress & they are great! |
| Time-management | 5 | In 30 seconds she mapped out a realistic Study schedule for me that |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | Keep doing what you're doing ; keep Trish! |
|--|---|
|--|---|

| Company (olonial Hondy Consultant's Name 1 1/3 h 2 1/4 | Date July 3/2013 |
|---|----------------------|
| Location Halifax N.S. | Your Name Aley Up of |



| One-on-one Consultations | |
|--|---|
| How many wellness consultations have you had? | 2 3 4 5 6 7 8 9 10 +10 |
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | Jone health icknes that I felt I could use some assistance/second ppinion regardly. |
| What did you like most about the consultation? | Finding ways to help me with my youls. |
| What areas of the consultation could use some improvement? | None. She is doing erenthing possible and beyond. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | As I nentioned I do have a few health issues which require adaptations and Trish has researched and is researched |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | while I have always been very active and healthy idue to the hours of work and changing shifts it is difficult to |
| | place to help with these issues & will |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | N D |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | Better Cordi with my linited time |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | The advises, I attempt. |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Her continued efforts on my behalf. Creat resources. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | None, other than a few recipes. I have all my own workout egypter t |

| reace rate year community | - your consumant of the or long con- | |
|------------------------------|--------------------------------------|----------------|
| Topic | 1-5 | Please Explain |
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 15 | |

| other regramming | |
|--|---|
| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | recommend changing rending machines Find way to have healthy "On site" meals (Fast food ix a |
| | constant in the inductory) |

| Company COLONIAL HONDA | Date | |
|--------------------------------|-----------------------|--|
| Consultant's Name <u>TRISH</u> | | |
| Location | Your Name DAVW PROSSA | |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | |
| What did you like most about the consultation? | Vera FRIENOLY, NOT PYSHY OR JUOCEMENTA |
| What areas of the consultation could use some improvement? | |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|---------------------------------------|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 5 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness programming? | |
|--|--|
|--|--|

| Company _ | Fibernetics | Corp. | Date | Jan 24, 12 |
|-------------|-------------------|---------|-----------|---------------|
| Consultant' | s Name <u>Val</u> | Tomkins | | |
| Location | Cambridge | ON | Your Name | Joan Lazarski |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 (10) |
|--|---|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | I was not motwested! I am healthy and knowledgeable I was approached by Glovia and someone else in the kitchen, and fest obliged to make an appt. |
| What did you like most about the consultation? | I am very very glad I have been able to have these appointments because i) I have spent time in the gym learning new exercises 2) I attended lunch in learn sessions and 3) I'm working on goal setting now |
| What areas of the consultation could use some improvement? | Since we run out of time. I think having tasks assigned to provide structure would help. |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO doing this |
| Please explain | Smy exercising has increased in duration t variety my food choices have become even better (quinon, kale) |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | I find myself using some of the things I learned as a conversation starter. Others tell methey like that there is no 'judgement' from Val and Gloria. |

| | 1 |
|--|--|
| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | Not really. At the start I wasn't certain what sessions would entail & am pleased I feltable to suggest gym meetings, which have been great! |
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | I understand circuit training. I now realize it's . Impuative I daily do resistance training to maintain and increase muscle mass and bone density |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | · do gym exercises 'take to my family · rat the Good · buy/read the books i down/oad the running app |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | Touching base and now in, 2013, I am softing short term and long term goals. |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO and I have done so repeatedly! |
| What products or services has your consultant referred you to, if any? | |

| | Topic | 1-5 | Please Explain |
|----------|------------------------------|-----|---|
| ② | Fitness | 5 | · able to discuss, demonstrate repeatedly and cvaluate if I completed movements correctly |
| 3 | Nutrition | 5 | provided samples + fact sheets provided recipos. —generaled synergistic group discussion |
| 3 | Stress management techniques | 4 | less focused on than 1 +(2) |
| 4 | Time-management | 3 | we did not particularly discuss this |

Other Programming

I am thrilled that management provides this service to start Is there any feedback that you can I didn't anticipate learning anything hew because lam provide regarding your experience very well read, but the qualify + currency of information has impressed me a lot. The references for books which I get + which with the wellness program that would help improve our wellness led me down new parties is appreciated very much. For other programming? employees, I suggest pointed examples of the types of consulting available : many people may not know what you do, and are too shy to ask.

| Company _ | FIBERNATICS | Date JAN 28/13 |
|--------------|---------------|--------------------------|
| Consultant's | s Name Vakrie | Tonken |
| Location | CAMBRID COS | Your Name & LEARNIR ROSS |



| How many wellness consultations have you had? | 3 4 5 6 7 8 9 10 +10 |
|--|--------------------------------------|
| How helpful was the consultant? (1=not, 5=very) | 1 2 3 4 5 |
| How would you rate the professionalism of the consultant? | 1 2 3 4 5 |
| How would you rate the communication skills of the consultant? | 1 2 3 4 5 |
| How involved did you feel in deciding next steps for your health? | 1 2 3 4 5 |
| What motivated you to book a consultation? | COWYANY OFFERED |
| What did you like most about the consultation? | Voly DOWTO GARTH & PIRET |
| What areas of the consultation could use some improvement? | NOT SURE. SEOMS GOOD TO ME |
| Do you feel that your consultant is able to help you achieve your goals? | YES NO |
| Please explain | SLOWS VORY KNOWLODGABLE |
| Does your consultant give suggestions for lifestyle change that are achievable to you? | YES NO |
| Is your wellness consultation something that you feel is important within your work place? | YES NO |
| Please explain | TAKES TIME TO THINK ABOUT WELL BEING |

| Is there any aspect of your wellness consultation that you feel is lacking? Please explain. | |
|--|--|
| What is an example of an accomplishment, big or small, that you have worked on with your consultant? | LOSANG WERGHT AND GOTTING MORE ACTIVE |
| How often do you act on the advice given by the consultant? | All the time Sometimes Not very often |
| Please explain. | |
| Are there any topics that you wish were covered in your wellness consultations that are not? | YES NO |
| If yes, which topics are of interest to you? | |
| How many weeks is it between your consultations on average? | 2 3 4 5 6 7 8 9 10 +10 |
| What aspect of your wellness consultant keeps you coming each month? Please explain. | LINTOY SPEAKING TO CONSULTANT. FIND HERLERY PERSONABLE |
| Would you recommend the consultant and the one-on-one wellness consultations to your colleagues? | YES NO |
| What products or services has your consultant referred you to, if any? | |

| Topic | 1-5 | Please Explain |
|------------------------------|-----|----------------|
| Fitness | 5 | |
| Nutrition | 5 | |
| Stress management techniques | 5 | |
| Time-management | 5 | |

| Is there any feedback that you can provide regarding your experience with the wellness program that would help improve our wellness | |
|---|--|
| programming? | |