

Evolution of Wellness

HEALTH PROGRAM EVALUATION — SAMPLE

Meridian Manufacturing: Employee Wellness Program Evaluation (Executive Summary)

ILLUSTRATIVE EXAMPLE — Fictional client and details, for demonstration purposes only.

This is an abbreviated executive summary of a full 9-section evaluation report. The complete version includes detailed stakeholder interviews, a full process map, and a section-by-section gap analysis.

1. Program Overview

Meridian Manufacturing launched an employee wellness program 18 months ago, offering a subsidized gym membership, an annual biometric screening, and a quarterly wellness newsletter.

2. Current State of Measurement

The program tracks gym membership sign-ups and screening attendance. It does not currently track any downstream outcome: absenteeism, healthcare cost trends, or employee-reported wellbeing. This absence of outcome measurement is itself a primary finding, not a minor gap.

3. Stakeholder Mapping

- Leadership: wants to demonstrate ROI on program spend to justify renewal
- HR staff: administers signups and screenings, has no visibility into whether the program changes anything
- Employees: report mixed awareness of what the program offers beyond the gym discount
- Health plan administrator: has cost data that has never been cross-referenced with program participation

4. Waste Identification (DOWNTIME Framework)

- Waiting: biometric screening results take up to 6 weeks to reach employees, well past the point of behavioral relevance
- Non-utilized talent: an HR staff member with a public health background currently only handles signup logistics
- Extra-processing: the quarterly newsletter is written from scratch each quarter with no reuse of evergreen content

5. Gap Analysis and Recommendations

Gap: No outcome data tracked

Recommendation: Add a simple quarterly pulse survey (3 questions) and cross-reference participation data with the health plan administrator's aggregate cost trends. Affects: leadership (enables the ROI case they need), employees (creates a feedback loop that current program lacks).

Gap: Screening results arrive too late to act on

Recommendation: Negotiate a 2-week turnaround with the screening vendor, or switch vendors at renewal. Affects: employees directly (actionable health data), HR staff (fewer complaints about delays).

6. Summary

The program has real infrastructure in place. Its central weakness is that nothing downstream of participation is currently measured, so leadership cannot demonstrate value, and employees receive no feedback loop that would increase engagement. Both recommendations above are scoped to be implemented within the current program budget.