Office Use Only

Member #:_____Admit Date:_____

Tour Guide: _____Time/Date of Tour:_____

Wellness Center Central Membership Application

The purpose of Wellness Center Central is to provide a safe and nurturing environment for each individual to achieve their vision of recovery while promoting acceptance, dignity and social inclusion.

Members must be at least 18 years old, have an Orange County address, and currently or in the past have received mental health services.

Full Name: _____

Address:_____

City:_____**State:**_____**Zip:**_____

Phone #:_____**Email:**_____

Date of Birth:_____**Age:**_____**Gender:**_____

Ethnicity:_____**Language(s) Spoken:** _____

Are you a Veteran? ***(Please mark one)*** **Yes / No**

Emergency Contact Name: _____

Emergency Contact #:_____**Relationship to you:** _____

Are you currently under court-ordered conservatorship or guardianship? **Yes / No**

How did you hear about Wellness Center Central? ***(Please circle one)***

Friend ☐ **Current Member** ☐ **Family Member** ☐ **Another Wellness Center** ☐

Community Clinic/Hospital (which one)_____**Other**_____

Are you currently a member of another Wellness Center? ***(Please mark all that apply)***

Wellness Center South **ID:** **Wellness Center West** **ID:** **Currently Not a Member** ☐

What is your interest in joining Wellness Center Central? _____

_____

What is important to you in your personal journey of recovery? _____

_____

Which of the following areas of recovery are you most interested in?

Emotional ☐ **Spiritual** ☐ **Physical** ☐ **Social** ☐

Are you interested in any of the following?

Volunteering at Wellness Center Central Yes / No

Volunteering in the Community Yes / No

Finding Employment in the Community Yes / No

Facilitating Groups/Activities Yes / No

What social activities are you interested in? (*Please mark all that apply*)

Nature Walks ☐ **Field Trips** ☐ **Dance** ☐ **Socializing** ☐

Drama ☐ **Other** _____

Are you interested in pursuing education? If yes, which education activities are you interested in?

GED/Diploma ☐ **Certificate Program** ☐ **Two Year Degree Program** ☐

Four Year Degree Program ☐ **Self Improvement** ☐ **Other** _____

Which life skills would you like to enhance in your life? (Example: cooking, budgeting, organizing, coping skills, computer skills, etc.) _____

_____

Which sports are you interested in? (*Please mark all that apply*)

Volleyball ☐ **Basketball** ☐ **Bowling** ☐

Horse Shoes ☐ **Frisbee Golf** ☐ **Badminton** ☐

Other_____

Do you have any hobbies or interests you would like to pursue at Wellness Center Central?

_____

Do you have a medical condition that you want us to be aware of? Yes / No

If yes, what should we do in case of an emergency?_____

_____

By signing this form, I agree that I am at least 18 years of age, I live in Orange County and I have been or am currently receiving mental health services.

*Membership will be renewed annually in May.

Signature:_____**Date:** _____

Conservator/Guardian Signature:_____**Date:**_____

MEMBER QUALITY OF LIFE SURVEY

Please circle the response that best describes how you feel about each statement:

This is to gather a baseline for your participation in the Wellness Center. How do you rate yourself currently?

1 = Strongly Disagree 2 = Disagree 3 = Neither Agree nor Disagree 4 = Agree 5 = Strongly Agree

Example: I like to read books at the library.		1	2	3	(4)	5	Not Applicable
Well-Being							
		Strongly Disagree	Disagree	Neither Agree nor Disagree	Agree	Strongly Agree	Not Applicable
1	**I participate more in social activities**	1	2	3	4	5	Not Applicable
2	**I am better able to cope with crisis**	1	2	3	4	5	Not Applicable
3	**I am better able to manage relationships**	1	2	3	4	5	Not Applicable
4	**I do better in social situations**	1	2	3	4	5	Not Applicable
5	**I can better manage my mental health symptoms**	1	2	3	4	5	Not Applicable
6	**I do things that are more meaningful to me**	1	2	3	4	5	Not Applicable
7	**I am more capable of meeting my needs**	1	2	3	4	5	Not Applicable
8	**I have people with whom I can do enjoyable things**	1	2	3	4	5	Not Applicable
9	**I am more able to develop healthy relationships**	1	2	3	4	5	Not Applicable
10	**I am better able to handle things when they go wrong**	1	2	3	4	5	Not Applicable
11	**I feel I belong in the community**	1	2	3	4	5	Not Applicable
12	**Please explain how or what groups/services at the Wellness Center affected your responses to Questions #1 - #11.**						
Employment, Education, and Volunteering							
		1 = Strongly Disagree	*2 = Disagree*	*3 = Neither Agree nor Disagree*	*4 = Agree*	*5 = Strongly Agree*	
13	**I am more interested in finding employment**	1	2	3	4	5	Not Applicable
14	**I am more confident in my employment skills**	1	2	3	4	5	Not Applicable
15	**I am more certain about my employment goals**	1	2	3	4	5	Not Applicable
16	**I have gained employment**	Yes	No	Not Applicable			
17	**I am more interested in furthering my education**	1	2	3	4	5	Not Applicable

18	**I have learned a new skill or hobby (i.e. cooking, computer, leadership)**	Yes	No	Not Applicable			
19	**I have participated in learning activities (i.e. workshop, online course)**	Yes	No	Not Applicable			
20	**I have enrolled in an educational program (i.e. adult learning program or college)**	Yes	No	Not Applicable			
21	**If you answered "Yes" to Question #20, what are you pursuing?**	Degree Program	Certificate	Non-Degree	Other _____		Not Applicable
22	**I am more interested in volunteering**	1	2	3	4	5	Not Applicable
23	**I am more capable of finding school, work and/or volunteer opportunities**	1	2	3	4	5	Not Applicable
24	**I am now volunteering in the community**	Yes	No	Not Applicable			
25	**Please explain how or what services/groups at the Wellness Center affected your responses to Questions #13 - #24.**						

Please use the space below for any additional comments, suggestions, or details.

Wellness Center Central
Guidelines to Exiting Members

Members may be asked to exit the center and/or placed on a suspension when they violate any one of the signed and agreed Wellness Center's Social Agreement upon their membership. Upon a violation, a Wellness Center manager/leader will sit down with a member to counsel and explain about the violation and the social agreement. Wellness Center manager/leader will also provide other resources as needed.

Course of Action for Minor Offenses

- **1st Violation -** members may be asked to exit the center for one business day
- **2nd Violation -** members may be asked to exit the center for three business days
- **3rd Violation -** members may be asked to exit the center for one week

In the event of a repeated offense or various offenses committed by the same member, we may ask the member to exit for longer than one week. It may be increased by two-week increments.

Course of Action for Serious Offenses

- **1st Violation** - members may be asked to exit the center for one month
- **2nd Violation -** members may be asked to exit the center for two months
- **3rd Violation** - members may be asked to exit the center for three months

Members may be asked to exit the center for a longer period of time based on the discretion of the Wellness Center staff. Factors such as personal history as well as the severity of the offense will be considered. Each situation will be assessed on a case by case basis.

EXIT

Upon being exited, the member must leave immediately leave the Tustin campus and may not return until arranging a meeting with the Program Director after the end of the exit period. An exited Member shall not be considered a Member in good standing during the period of exiting, and shall take no part in any program activities, events, outings, games, groups, hobby classes, and interests belonging to any of the Wellness Centers (Central, South, or West) until such time that the Member complies with the requirements for reinstatement.

Reinstatement

1. For reinstatement after an exit, the Member must meet with the Program Director and other designated staff at Wellness Center Central.

2. Wellness Center Central staff will review the Social Agreement with the Member and ask the Member to sign and date the social agreement acknowledging their commitment to follow the social agreements.

3. Wellness Center Central staff will discuss any further requirements for reentry, such as specific classes or groups to help the member avoid further infractions.

4. The other Wellness Centers will be informed when a member has been reinstated.

5. The returning Member's attendance will be monitored to assure that member is complying with reentry requirements.

Categories of Offenses

Minor Offenses
Being disrespectful to others ➢ Invading personal space ➢ Verbally being disrespectful
Being disrespectful to the environment ➢ Continuously smoking in the wrong area ➢ Spitting on floors/carpets inside of building ➢ Causing minor property damages. Member will be asked to pay for damages.
Foul language
Being disruptive in class
Yelling and screaming
Provoking others
Not participating in groups or activities
Photograph, video, or audio recording without prior authorization

Serious Offenses
Physical or sexual abuse, assault and/or aggressive behavior. Police will be notified.
Possession of a firearm or concealed weapon. Police will be notified immediately.
Theft* *With evidence/staff witness. Police will be notified.
Serious verbal and serious physical threats such as a Tarasoff situation. Police will be notified as well as the potential victim.
Indecent exposure
Spitting at someone
Intentional Breach of Security ➢ Server ➢ Infecting computers with malicious software ➢ Accessing confidential PHI
Serious property damage. Member will be asked to pay for damages and police will be notified.
Performing consensual sex acts on Campus
Sale and/or possession of an illegal substance or paraphernalia. Police will be notified.
Consistently and persistently bullying someone
Engaging in harassing behaviors including sexual harassment

WELLNESS CENTER CENTRAL

SOCIAL AGREEMENTS

Member Rights

- You have the right to protection from harm.
- You have the right to accept or deny our services.
- You have the right to be treated with dignity and respect.
- You have the right to participate in designing a plan to meet your needs.
- You have the right that your information will be kept confidential.

Social Agreements

- While at the Wellness Center, I will participate in a group or activity.
    - Members who request to have the support of a guest/professional while attending the Wellness Center recognize that guests/professionals are also subject to the Wellness Center social agreements.
    - Priority space for participating in group activities and outings will be given to members. Accommodations can be made to include guests/professionals if space is available.

- No photography, video, or audio recording is permitted on the premises without prior authorization from Wellness Center management.

- I will respect the environment by keeping the Wellness Center clean and useable for all by consuming food and/or beverages in designated areas only.

- I understand that person-to-person solicitation for personal financial gain is not allowed at the center unless it's previously approved by MAB and the management at the Wellness Center.

- I will smoke in the designated smoking area only.

- Drugs, alcohol and paraphernalia are NOT permitted on the Wellness Center premises.

- I will not be under the influence while on Wellness Center premises.

- I will take full responsibility for my belongings.
    - Personal belongings should be left at home whenever possible. Members may be asked to leave personal belongings in their vehicle.
    - Wallets and/or purses containing personal identification should remain with the member at all times.

- I will be respectful of those who share my community, which includes:
    - Not engaging in verbal aggression, physically aggressive behavior, or property damage.
    - Not bullying members and/or staff verbally, physically, or electronically.
    - Not engaging in any sort of harassment including sexual harassment, inappropriate and/or unsolicited touching, for example: kissing, cuddling, etc.
    - Maintaining healthy boundaries.

- I will not bring items onto the Wellness Center premises that may compromise my safety or the safety of others.
    - Weapons of any kind (knives, guns, pepper spray, tasers, etc.) are not permitted on the Wellness Center premises.

- I will be aware of my surroundings when discussing topics associated with my protected health information.

- I will follow Wellness Center's policies and procedures to reduce the spread of illnesses.
    - I will regularly practice handwashing and/or using hand sanitizer.
    - I will stay home if I am not feeling well.
    - I will wear appropriate attire and maintain proper hygiene at all times while at the center.

- While at the Wellness Center I will respect and follow all group rules.
    - I will be respectful of others wanted to use the **Computer Room**. I will not stay on the computer for more than 30 minutes at a time.
    - I will be respectful of others while using games in the **Game Room.**
    - I will respect the condition of the room and its contents.
    - I will communicate with a peer mentor any need or concerns.
    - I will be mindful of others who are want to participate.
    - I will ask a peer mentor to set up all electronic games.
    - I will be respectful of the serenity of others.
    - I will help keep noise and distractions to a minimum while in the **Meditation Room.**

- I will follow all rules while on outings with the Wellness Center.
    - Before being transported in any vehicle, all personal belongings will be placed in the trunk of the vehicle.
    - No distraction of the driver will be permitted while the car is in motion.
    - Smoking is not permitted in any vehicle.
    - Drugs, alcohol, and paraphernalia are not permitted in any part of the vehicle.
    - Weapons of any kind (knives, guns, pepper spray, tasers, etc.) are not permitted in any vehicle.
      If the van driver suspects a member has been using alcohol or drugs, he/she reserves the right to refuse transportation.

- In compliance with the Good Neighbor Policy, I will conduct myself in a manner that is not disruptive or be disturbing to the neighborhood.

- Appropriate attire to be worn at all times at the Wellness Center, including community integration activities organized by any of the Wellness Centers.

- Wellness Center aims to foster a community of diversity and inclusion; where members can feel safe, valued and respected. All Wellness Center members and guest are expected to demonstrate mutual respect for the beliefs and opinions of others; and agree to conduct themselves in a manner that acknowledges the dignity and humanity of others. The Wellness Center will not tolerate discrimination based on but not limited to: race, religion, political beliefs, national origin and gender identity.

Member Compliance

By signing this agreement, I agree to abide by the rules of the program as determined by the Member Advisory Board (MAB). I understand that my information may be shared with Wellness Center West and Wellness Center South. If I am suspected of breaking one or more of the Wellness Center rules, the Center will convene a group led by the Program Director and any staff involved in the incident to discuss the incident and determine the appropriate course of action. I am aware that I may be suspended for a length of time as determined by the management team. The duration of the suspension will depend on the severity of the incident. Please refer to the attached *Guidelines for Exiting Members.*

I understand that when I get exited from one location, I am also being exited from the entire Tustin campus and all three Wellness Center locations. My exit information will be shared with the other sites.

NAME: _____
(Please print clearly)

SIGNATURE: _____ DATE: _____

CONSERVATOR/GUARDIAN SIGNATURE:_____DATE:_____