

**AUTISM**  
**RESOURCE**  
**CENTRE**

...finding colour in the **spectrum**



## **Autism Resource Centre** **Membership Welcome Package**

Dear Future Member,

Thank you for reaching out to learn more about the programs and services offered through the Autism Resource Centre (ARC).

The following information is required prior to scheduling your membership meeting. Please complete the attached forms and return them to ARC by email or you can drop off in-person at our office. Once all the required information is received, a membership meeting will be scheduled.

- Contact information
- Proof of legal guardianship (only if applicable)
- Medical information and medication list
- Full autism diagnosis from a medical professional or psychologist
- Program interests

During the membership meeting we will ask questions in the areas of medical history, current living situation, skills you'd like to learn, your ARC program interests, and any relevant physical and mental health information. There will also be opportunities to ask us any questions you may have.

All program participants must be ARC members, so following your intake meeting an annual membership fee of \$30 will be required to become a member. We take payment by cash, debit, credit card, or e-transfer. At the end of this document is a copy of our Code of Conduct & Information Sharing policy. Please review it at your leisure before your membership meeting as we will have a copy for your to sign.

If you have any questions in the meantime, please feel free to contact us at 306-569-0858 or by email: [stacey@autismsk.com](mailto:stacey@autismsk.com).

Thank you, we look forward to meeting you!

Sincerely,  
The Autism Resource Centre Staff

# Autism Resource Centre Member Information

Date: \_\_\_\_\_

How did you learn about us? \_\_\_\_\_

## Contact Information:

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ (DD-MON-YYYY) Age: \_\_\_\_\_

Gender: \_\_\_\_\_ Pronouns: \_\_\_\_\_ Social Insurance # \_\_\_\_\_

Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

City: \_\_\_\_\_ PC: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Preferred method of contact: Phone/Email/Mail/Caregiver: \_\_\_\_\_

**Ethnic Background:** (Used for statistical purposes only) \_\_\_\_\_

**Is there an appointed Guardian or Co-Decision Maker for the adult?** Yes / No

If yes, please name the guardians or co-decision makers: \_\_\_\_\_

*\*Documentation for Guardian or Co-Decision Maker must be provided\**

*Note: This is a legal process that takes place once someone turns 18 years and cannot make decisions for themselves. It does not mean legal custody as parents or guardians for children under 18 years.*

## Education:

Highest Level of Education Received: \_\_\_\_\_

Highschool Stream: Mainstream / FIAP / DC / Other: \_\_\_\_\_

Reading level: Strong / Basic / Requires Visuals

## Caregiver Contact Information:

**1. Name:** \_\_\_\_\_

Relationship: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Preferred method of contact: Phone/Email/Mail

Consent to contact if needed: Yes or No

**2. Name:** \_\_\_\_\_

Relationship: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Home Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Preferred method of contact: Phone/Email/Mail

Consent to contact if needed: Yes or No

# Autism Resource Centre

## Medical Information

At the Autism Resource Centre, we strive to support individuals with autism using a person-centered approach. This means that we require personal information to help us provide meaningful support to our members. All personal information will remain private and confidential within the Autism Resource Centre and its staff.

### **Emergency Information**

Hospitalization #: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Relationship: \_\_\_\_\_

### **Medications** (Please attach a list from the pharmacy)

<u>Name</u>	<u>Dosage</u>	<u>Prescribed for</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

### **Medical Information:**

Diagnoses: \_\_\_\_\_

Allergies: \_\_\_\_\_

Please list any other medical information we should know about:

# Autism Resource Centre

## Medical Information

### Family Physician:

Name: \_\_\_\_\_

Clinic: \_\_\_\_\_

Phone: \_\_\_\_\_

Consent to contact if needed: Yes or No

### Mental Health Worker:

Name: \_\_\_\_\_

Clinic: \_\_\_\_\_

Phone: \_\_\_\_\_

Consent to contact if needed: Yes or No

### Other:

Name: \_\_\_\_\_

Clinic: \_\_\_\_\_

Phone: \_\_\_\_\_

Type of Provider: \_\_\_\_\_

Consent to contact if needed: Yes or No

### Psychiatrist:

Name: \_\_\_\_\_

Clinic: \_\_\_\_\_

Phone: \_\_\_\_\_

Consent to contact if needed: Yes or No

### Community Living Service Delivery Worker:

Name: \_\_\_\_\_

Clinic: \_\_\_\_\_

Phone: \_\_\_\_\_

Consent to contact if needed: Yes or No

### Other:

Name: \_\_\_\_\_

Clinic: \_\_\_\_\_

Phone: \_\_\_\_\_

Type of Provider: \_\_\_\_\_

Consent to contact if needed: Yes or No

### Hospitalizations in past 8 years:

Date: \_\_\_\_\_

Reason: \_\_\_\_\_

Length of Stay: \_\_\_\_\_

Date: \_\_\_\_\_

Reason: \_\_\_\_\_

Length of Stay: \_\_\_\_\_

Date: \_\_\_\_\_

Reason: \_\_\_\_\_

Length of Stay: \_\_\_\_\_

Date: \_\_\_\_\_

Reason: \_\_\_\_\_

Length of Stay: \_\_\_\_\_

# Autism Resource Centre

## Program Information

The following information for your reference is a list of programs offered by the Autism Resource Centre. These programs are offered at various times throughout the year and many are provided at no additional cost. All members must have a valid membership to the Autism Resource Centre and must complete the intake process before attending any programs.

### [Life Skills Programming](#)

#### **Independent Living Program (ILP)**

Independent Living Program is a person-centered, goal-based program developed to help individuals obtain greater independence at home or in the community. Skill areas that can be addressed include, but are not limited to social skills, budgeting, time management, personal hygiene, relationships and intimacy, meal planning, cooking, and healthy lifestyles. Members meet 1:1 with a Program Coordinator for one hour weekly for up to 8 weeks.

#### **The Program for Education and Enrichment of Relational Skills (PEERS®)**

PEERS® is a 16-week evidence-based social skills intervention program developed at the UCLA Semel Institute for Neuroscience and Human Development. It targets specific skills to assist people in learning how to start conversations, make and keep friends, and how to navigate difficult situations. PEERS® also includes a social coach component, which teaches the same skills to a mentor in the individual's life who can offer social support after the program ends.

#### **Improv**

Offered in partnership with the Globe Theatre, Improv for Autism provides a safe environment to try out acting and improvisation skills. The instructors emphasize spontaneity and social skills throughout. Attendance is by registration in a 10-week session and there is a small fee to participate. It takes place on an afternoon on the weekend.

#### **Social Drop-In Program**

Social Drop-In Program encourages social skills development in a natural, fun, and engaging environment. Participants meet at various locations every Wednesday evening to share interests, participate in social activities, and spend time with peers. Social Drop-In does a wide variety of activities that encourage engagement with our local community and each other. A small program fee of \$5 is collected weekly from those in attendance to help offset costs and takes place year-round.

#### **Cooking Program**

Cooking Program focuses on increasing independence and life skills. This program teaches participants a variety of different skills such as food planning, food preparation, cooking, following recipes, and time-management skills. There are two program streams offered based on prior cooking skills and experience. Attendance is by registration in a 10-week session and there is a small program fee to cover some of the costs of groceries. It takes place on a week-day evening.

# Autism Resource Centre

## Program Information

### **Chill & Connect**

Chill & Connect is scheduled year-round every Tuesday afternoon and provides a welcoming and comfortable environment for members to enjoy snacks, socialize, play games, and make new friends.

### **Active with ARC**

Active with ARC is scheduled year-round every Thursday afternoon. When the weather is warm, the group meets in the park to go for a walk and, when it gets colder, the group meets at the City of Regina Fieldhouse to utilize the equipment, play badminton, and/or walk the indoor track. The program focuses on developing healthy habits in a safe and supportive environment while having the opportunity to socialize with others.

### **Healthy Futures**

Healthy Futures is a group program offered for those wanting to learn more about relationships and sexual wellness. It covers a variety of topics including relationships, gender identity, personal hygiene, and safer sex practices. The goal is to provide accurate education in these areas and a safe space for members to ask questions or express concerns. Attendance is by registration in a 10-week session. It takes place on a week-day evening.

### **Women's Group**

With autism being diagnosed more frequently in males, Women's Group provides a great opportunity to connect with other young women and try new activities in a welcoming environment. All ARC members who identify with womanhood, in anyway, are welcome to attend. This group meets monthly, and dates and activities rotate.

### **Grow with ARC**

Grow with ARC is gardening program that gives our members the chance to learn about the gardening process, connect with nature, and socialize with other members. During the outdoor growing season, we meet weekly to plant and care for vegetables, flowers, and herbs in both an inground garden and raised beds.

### **Vocational Programming**

#### **Employment Readiness Program**

The Employment Readiness Program is an 8-week program that utilizes the Practical Assessment Exploration System (PAES®) to help individuals discover what fulfilling employment means to them. Participants practice realistic, entry-level job tasks they may never have attempted before, promoting the development of hands-on skills and self-confidence. Each day participants also work on a pre-employment skill or activity to help prepare them for future employment.

# Autism Resource Centre

## Program Information

### Supported Employment

Our Supported Employment Coordinators work with members who are ready to find competitive employment. They work one on one with each member to ensure their job search matches their values, interests, and skills/abilities when applying for jobs available in the local community.

### Vocational Volunteers

Each month our Employment Coordinators set up a variety of different volunteering opportunities for our Vocational Volunteers group. While volunteering our members have a chance to build work skills, make community connections, and meet other members with common interests. This group can often be found at special events, and local businesses or organizations helping behind the scenes.

### Workshops

Throughout the year ARC runs interactive and educational workshops on a variety of different employment skills. Topics include but are not limited to: job searching, resume building, interview skills, and workers' rights.

### Drop-in Employment Support

Drop-in employment support is offered every week for members who are ready to work independently in the community and are looking for short term help finding a job. Our employment coordinators will be available to help with job searching, resumes, and interview skills.

### Mental Health Programming

#### Individual Counselling

Free individual counselling is available to members and, on occasion, their families. Some examples of areas covered in counselling include life transitions, communication skills, anxiety, depression, anger management, abuse, bullying and sexuality. Our counselling is person centered, strength based, and trauma informed.

#### Group Counselling

Group counselling sessions are designed to encourage wellness by bringing together ARC members and providing a platform to participate, connect and support each other through shared and lived experiences in an inclusive setting where members will be encouraged to be themselves and share in a way that works for them.

#### Parent Support Group

The Parent Support Group is offered to parents and guardians on the third Wednesday evening of each month at the Autism Resource Centre or through a confidential video platform. The group offers support as well as education on topics of importance to families.



# Autism Resource Centre

## Program Information

Please check off all your current program interest below. We will discuss these interests during our membership meeting and provide more details on the time, location and registration process for each program. (You are not obligated to register for any programs by checking them off here)

### Life Skills:

- |  |   |
|--|---|
| <input type="checkbox"/> Chill & Connect                   | <input type="checkbox"/> Independent Living Program |
| <input type="checkbox"/> Social Drop In                    | <input type="checkbox"/> Cooking Program            |
| <input type="checkbox"/> ARC in the Park / Active with ARC | <input type="checkbox"/> PEERS®                     |
| <input type="checkbox"/> Grow With ARC                     | <input type="checkbox"/> Improv                     |
| <input type="checkbox"/> Women's Group                     | <input type="checkbox"/> Healthy Futures            |

### Vocational:

- Employment Readiness Program
- Supported Employment
- Volunteer group

### Mental Wellness:

- 1:1 Counselling
- Group Counselling
- Parent Support Group

If you are interested in our 1:1 counselling please check if either of the below applies:

- Have you had a recent death in your family?
- Are you experiencing family breakdown?

**If you are feeling suicidal, please call: Mobile Crisis Services at [306-757-0127](tel:306-757-0127)**

If you have any further questions or comments, or if there is anything we didn't ask about that you feel we should know please feel free to leave them in this space below / the back of this page.

Thank you for taking the time to fill out this form and returning it to the Autism Resource Centre. You will be contacted to complete the intake process when we have an opening in our programming from new members.

# **Autism Resource Centre**

## **Code of Conduct & Information Sharing**

The Autism Resource Centre (ARC) seeks to continually provide a welcoming and comfortable environment that ensures trust and respect for all members, visitors and volunteers. To achieve this, ARC uses a collaborative staff approach, which means those employed by ARC may share information amongst each other for the purpose of best supporting members. Your confidential information will not be shared with anyone outside of ARC staff persons without written consent, unless a situation invokes a duty to report, which may include the following:

1. Concern of; or actual harm to yourself or others
2. Concern of; or actual harm to a child (Child Protection)
3. Court order; Provincial or Federal Court

Staff will continually assess the above risks and will inform appropriate professionals as required. By signing this form, I provide consent for staff to share information regarding my involvement at ARC internally.

The Autism Resource Centre also expects members to conduct themselves in a way that demonstrates respect to others while at ARC or when involved in off-site activities. ARC strictly forbids discrimination or harassment of any kind, whether based on race, colour, national original, religion, creed, sex, gender, physical, mental or developmental disability, marital status, sexual orientation, political ideology or any other reason.

The following is a list of behaviours that will not be tolerated:

- Physical violence;
- Verbal abuse;
- Profanity
- Any form of harassment;
- Intimation tactics and/or making threats;
- Malicious or harmful statements about others;
- Display or circulation of inappropriate or derogatory written materials or pictures through electronic communication;
- Public disclosures of another's private information;
- Possession of dangerous or unauthorized material; and
- Solicitation, purchase or selling of illegal substances.

Members and/or visitors who appear to be under the influence of alcohol, illegal drugs, or other intoxicating substances may be asked to leave the premises.