

# Wellness Center (2018-2019)

## Meeting Agenda

|   |   |                      |
|---|---|----------------------|
| <b>NAME OF COUNCIL/TEAM:</b> Wellness Center (2018-2019)  |   |                      |
| <b>OBJECTIVE OF MEETING:</b> Review DO workgroup determination of baseline services.                  |   |                      |
| <b>DATE:</b> 10/18/2018<br><b>TIME:</b> 8:30am  | <b>LOCATION/ROOM #:</b> Fine & Applied Arts Conference Room<br><b>CALL-IN NUMBER:</b><br><b>CALL-IN CODE:</b> |                      |
| <b>FACILITATOR(S):</b> Parrish Geary, Breanne Holland   |   |                      |
| <b>TIMEKEEPER:</b>  |   |                      |
| <b>ASSISTANT:</b> Breanne Holland   |   |                      |
| <b>ATTENDEES:</b>   |   |                      |
| <b>SUPPORTING RESOURCES (ITEMS READ IN PREPARATION FOR AND/OR BROUGHT TO MEETING):</b>                |   |                      |
|   |   |                      |
| <b>UPDATES AND BRIEF REPORTS</b>  |   |                      |
| <b>Topic</b>  | <b>Person(s) Responsible</b>  | <b>Time Alloted</b>  |
| ARC Allocation  | Parrish Geary   | 10 min.              |
| DO Workgroup Baseline Services: Review general services requested for all four colleges               |   | 10 min.              |
| <b>ACTION ITEMS:</b>  |   |                      |
| <b>Question</b>   | <b>Person(s) Responsible</b>  | <b>Time Allotted</b> |
| What are the current services offered as compared to the projected baseline services for spring 2019? | Breanne Holland   | 25 min.              |
| What other contract services can we explore to support baseline services?                             |   | 20 min.              |
| <b>DISCUSSION ITEMS:</b>  |   |                      |
| <b>Question</b>   | <b>Person(s) Responsible</b>  | <b>Time Allotted</b> |
| How do we use our allocation effectively by June 30, 2019 to implement expanded services?             | Breanne Holland   | 25 min.              |
|   |   |                      |
| <b>ITEMS FOR FUTURE CONSIDERATION:</b>  |   |                      |
| <b>Topic</b>  | <b>Contact Person</b>   |                      |
|   |   |                      |
|   |   |                      |
| <b>OTHER INFORMATION:</b>   |   |                      |