

BUILDING BRIDGES



*****DATES/LOCATIONS TBD
DUE TO COVID-19. ONCE
REGISTERED, YOU WILL BE
CONTACTED WITH MORE
DETAILS.**

FACT SHEET– SPRING 2021

- WHO:** Children grades K-12th
- WHAT:** Building Bridges – A program for grieving children and their families
- WHEN:** 6 Tuesday Nights: **February 2 – March 9, 2021**
- WHERE:** TBD
- TIME:** TBD
- FEE:** There is no charge to attend

The purpose of the Building Bridges program is to provide a unique support group for children who have experienced loss through the death of someone significant in their lives. During this program, children in grades K-12 will be given the opportunity to (1) recognize and express their feelings, (2) build self-esteem through validation, (3) receive guidance as they adapt to the changes in their families, and (4) develop skills in dealing with loss that they may utilize throughout life.

Running concurrently with each children's session is an adult group created uniquely for parents and caregivers. This group is designed to help parents and caregivers have a better understanding of the changes going on with their children.

Referrals can be made by calling Melissa at 658-6524 or emailing msalvato@wtrc.com.

THE PARENT CONSENT FORM SHOULD BE SIGNED AND RETURNED TO THE HOSPICE OF SAN ANGELO OFFICE PRIOR TO FEBRUARY 1, 2021 FOR THE SPRING 2021 SESSION.

There are a limited number of spaces available, so we recommend you sign up as soon as possible. You may list more than one child on the same consent form.

Questions/Additional Information contact: Melissa Salvato, Director of Building Bridges at **658-6524** or email **msalvato@wtrc.com**.

Please keep this fact sheet for your future reference. Thank you!

BUILDING BRIDGES



CONSENT FORM FOR BUILDING BRIDGES

Hospice of San Angelo offers a program designed to address the special needs of children who have lost, through death, someone important in their lives. Children will be given the opportunity to recognize and express their feelings and receive guidance as they are adjusting to the changes in their lives and in their families. Building Bridges is a grief support group, not professional therapy. *****Due to COVID-19, Building Bridges may be conducted via Zoom video conferencing for the Spring 2021 term. Participants will need to provide an email address for the Zoom session links to be sent should the program be held virtually. More info will follow as needed.***

It is my desire that my child(ren) _____
participate in the Building Bridges group offered by Hospice of San Angelo.

Name of Parent/Guardian _____

Address _____ Zip _____

Phone: _____

Email (**MUST PROVIDE): _____

Child's School _____ Grade _____

Child's Date of Birth _____ How did you hear about us? _____

Relationship of deceased to child _____ Date of Death _____

Specific concerns/needs: _____

Please indicate your child's/children's t-shirt size: _____ Youth Small _____ Youth Med _____ Youth Lg
_____ Adult Small _____ Adult Med _____ Adult Lg _____ Adult XL _____ Adult XXL

Once participants have registered, detailed instructions will be sent outlining dates, times and how to connect to group if needed. Any questions, please contact Melissa Salvato at (325) 658-6524.

Signature of Parent/Guardian

Date

Please return this signed consent form to: **Building Bridges**
P.O. Box 471, San Angelo, TX 76902
or email to: *msalvato@wtrc.com* or fax: (325) 658-8895



Informed Consent for Building Bridges Virtual Group – Spring 2021

Description of Services

This informed consent for the Building Bridges Virtual Group contains important information pertaining to joining an online bereavement support group via the phone or internet. Groups are held on the Zoom video conferencing platform. It is preferred that participants join on camera to create more personal connections with other group members. Groups will last for 30 minutes and will begin and end on time. Group members are expected to participate for the duration of the group. The Building Bridges Virtual Group is a grief support group and is not designed to offer therapy or counseling. Participants must pre-register to attend.

Acknowledgements and Agreements

I _____, hereby consent to allow my child/children to participate in the Building Bridges Virtual bereavement support group provided by Hospice of San Angelo (HOSA). I acknowledge and understand the following:

1. The purpose of this group is to offer bereavement support to individuals who are grieving the death of a family member or loved one.
2. This group is being conducted via Zoom video conferencing. Participants are responsible for providing and securing their own phone/tablet/computer hardware, internet access points and password security. Although group guidelines are in place to create a safe and supportive virtual environment, due to the nature of this technology, we cannot guarantee your complete privacy as a participant in virtual groups. It is important to be in a private area where others cannot see or hear the group and where you will not be interrupted.
3. HOSA is not responsible for participant's equipment failure or internet connection problems.
4. Participants are not allowed to make an audio or video recording of any portion of the session.
5. While confidentiality is an important part of virtual support groups, there are limits to what we are able to keep confidential. Statements about harm, self-harm, or harm to others will require us to break confidentiality to seek appropriate help.
6. Participants are not allowed to invite family members or friends who are not participants in Building Bridges to view the virtual group. All group members must be registered.
7. Participants may be removed from group if they: purposefully allow others who are not participants to hear the conversation or see the video screen, make an audio or video recording of the virtual group, or violate the privacy of other group members by breaking confidentiality in any other way.
8. To help group run more smoothly, participants should mute their microphone unless the facilitator directs the group or individuals to unmute.

I have read, understood and agree to the above conditions and policies. By signing this consent, I agree to abide by the conditions and policies above.

Signature of parent/guardian

Date

Please list your Child's/Children's name(s)

West Texas Rehab Center's Hospice of San Angelo, P.O. Box 471, San Angelo, TX 76902 (325) 658-6524