



# NATIONAL SIGNATURE PROGRAMS

OPERATING  
POLICIES &  
PROCEDURES

2023





## NAMI National Signature Programs Operating Policies and Procedures, 2023

I.	NAMI NATIONAL SIGNATURE PROGRAMS OVERVIEW.....	3
II.	COPYRIGHT .....	4
	TRANSLATION OF NAMI NATIONAL SIGNATURE PROGRAM MATERIALS .....	4
	INTERPRETATIONS IN A SECOND LANGUAGE DURING A PROGRAM .....	4
III.	ACCESS TO NAMI NATIONAL SIGNATURE PROGRAMS AND MATERIALS .....	5
	RESEARCH ON NAMI NATIONAL SIGNATURE PROGRAMS.....	5
IV.	NAMI NATIONAL SIGNATURE PROGRAM LEADERS .....	6
	NAMI NATIONAL SIGNATURE PROGRAM LEADER ELIGIBILITY AND QUALIFICATIONS .....	6
	NAMI NATIONAL SIGNATURE PROGRAM LEADER SUBSTITUTIONS AND MENTORING .....	7
	COMPENSATION FOR NAMI NATIONAL SIGNATURE PROGRAM LEADERS .....	7
V.	NAMI NATIONAL SIGNATURE PROGRAM STATE TRAINERS .....	8
	NAMI SIGNATURE STATE TRAINER ELIGIBILITY AND QUALIFICATIONS .....	8
	NON-CERTIFICATION OF STATE TRAINER TRAINEES .....	9
	COMPENSATION FOR NAMI NATIONAL SIGNATURE STATE TRAINERS .....	9
VI.	CERTIFICATION OF NAMI NATIONAL SIGNATURE PROGRAM LEADERS .....	10
	NON-CERTIFICATION OF A NAMI NAT SIG PROGRAM LEADER TRAINEE.....	11
	PROVISIONAL CERTIFICATION OF A NAMI NAT SIG PROGRAM LEADER TRAINEE. 12	
	DECERT OF NAMI NAT SIG PRM LEADER AND NAMI STATE TRAINERS .....	13
VII.	PARTICIPATION IN NAMI NATIONAL SIGNATURE PROGRAMS.....	15
	AMERICANS WITH DISABILITIES ACT ACCOMMODATIONS .....	15
	CONFIDENTIALITY .....	16
	MANDATED REPORTING.....	17
VIII.	CODE OF CONDUCT .....	18
IX.	NAMI NATIONAL SIGNATURE PROGRAM DESCRIPTIONS .....	19
	NAMI Basics .....	19
	NAMI Connection.....	20

NAMI Ending the Silence for Families .....	20
NAMI Ending the Silence for School Staff .....	20
NAMI Ending the Silence for Students .....	20
NAMI Family & Friends .....	222
NAMI Family Support Group .....	22
NAMI Family-to-Family.....	23
NAMI Hearts+Minds .....	23
NAMI Homefront .....	24
NAMI In Our Own Voice.....	24
NAMI Peer-to-Peer .....	25
NAMI Provider .....	25
NAMI Sharing Your Story with Law Enforcement .....	26

*These policies replace all previous versions.*

## **I. NAMI NATIONAL SIGNATURE PROGRAMS OVERVIEW**

**1.1** The NAMI National Signature Programs include all translations and adaptations of:

**1.1.1. CLASSES**

NAMI Basics  
NAMI Family-to-Family  
NAMI Homefront  
NAMI Peer-to-Peer  
NAMI Provider

**1.1.2. SUPPORT GROUPS**

NAMI Connection  
NAMI Family Support Groups

**1.1.3. PRESENTATION PROGRAMS**

NAMI Ending the Silence (for students, families, and school staff)  
NAMI Family & Friends  
NAMI Hearts+Minds  
NAMI In Our Own Voice  
NAMI Sharing Your Story with Law Enforcement

**1.2** NAMI deems changes to the program format, updates to the delivery method, and additions to the program content – all done by NAMI – to be program adaptations, and therefore all policies herein will also apply to those adaptations.

**1.3** NAMI has invested considerable time and resources in the development, maintenance, research, and technical support of each of these programs to ensure they reflect the goals and mission of NAMI. The following operating policies have been developed to ensure the ongoing delivery of consistent and quality programming across the NAMI Alliance at the national, state, and local levels.

**1.4** NAMI State Organizations (NSO) and NAMI Affiliates (NA), their boards of directors and staff may not set policies that conflict with the NAMI National Signature Program Operating Policies.

**1.5** Participants will not be charged a fee of any kind for enrolling and/or participating in any NAMI National Signature Program, other than NAMI Provider.

**1.6** NSOs and NAs may charge organizations for offering the program to their audience and/or staff, for example, NAMI Basics for Professionals (social workers, case managers, etc.) or NAMI Provider (medical office staff, hospital staff).

**1.7** Certified NAMI Program Leaders (teachers, facilitators, and presenters) and Trainers (national and state) shall adhere to these Operating Policies.

**1.8** Any operational issues not covered by these policies and procedures document may be addressed by the NSO in accordance with all applicable laws in their local jurisdiction.

- 1.9 NSOs and NAs may request NAMI National staff to answer questions or provide consultation on specific situations pertaining to any NAMI Signature Program and these Operating Policies and Procedures.

## II. COPYRIGHT

- 2.1 NAMI National Signature Programs are the Intellectual Property of NAMI National. The authority to use NAMI Intellectual Property is governed by the terms and conditions of the signed agreements made with NAMI National and any written guidelines contained in the NAMI Governing Documents or subsequently provided by NAMI (*State Organization Charter Agreement IV § B; Incorporated Affiliate Agreement IV § B*).
- 2.2 NAMI Signature Program materials can only be used by certified Program Leaders and Trainers for the intended audiences.
- 2.3 Permission to use any NAMI National Signature Program material in a setting other than a NAMI program offering must be sought from and given by NAMI National in advance.
- 2.3.1 In every case where permission is granted, NAMI must be referenced as the source of the material. Refer to **Appendix 1** of this document for more details.
- 2.4 No portions of a NAMI National Signature Program may be used as a component of any other program or presentation.
- 2.5 No group or individual other than NAMI National may edit any of the NAMI National Signature Program materials.

## TRANSLATION OF NAMI NATIONAL SIGNATURE PROGRAM MATERIALS

- 2.6 Any translation of NAMI National Signature Program materials is prohibited.

## INTERPRETATIONS IN A SECOND LANGUAGE DURING A PROGRAM

- 2.7 Verbal interpretations during any NAMI National Signature Program are prohibited. The activity is distracting to the participants and Program Leaders. Consult with NAMI National about the availability of offering the NAMI Signature Program in the needed language.
- 2.8 American Sign Language (ASL) with a certified interpreter is allowed during NAMI National Signature Programs.
- 2.9 For trainings in languages other than American English, consult with NAMI National about the availability of certified trainers that can offer programs in the needed language.

### III. ACCESS TO NAMI NATIONAL SIGNATURE PROGRAMS AND MATERIALS

- 3.1. NAMI grants access to specific program manuals and other relevant materials to NSOs and NAs that have successfully obtained permission from NAMI to deliver that program in their state.
- 3.2. The NSO will coordinate with NAs in their state to monitor program delivery and ensure adherence to the requirements for each NAMI National Signature Programs.
- 3.3. NAMI, in consultation with NSOs and NAs, has final determination on which NAMI National Signature Programs are offered in each state and who will provide those programs
- 3.4. NAMI National Signature Programs are only delivered through NSOs and NAs. They may not be offered by other organizations unless written authorization has been granted by NAMI National.
- 3.5. In return for access to the NAMI National Signature Programs, and to maintain consistency with the evidence-based practice designations:
  - 3.5.1. NSOs and NAs are required to maintain adherence to the requirements for each program by following the guidelines in each respective program trainer and leader manual.
  - 3.5.2. NSOs and NAs are required to report participation data for all program training and events (classes, support groups, and presentations) offered through the designated data site.
- 3.6. NSOs and NAs may not offer any NAMI National Signature Programs outside of the United States.
  - 3.6.1. A participant may take part in a NAMI National Signature Program event from outside of the United States if the program is offered via an online platform.

### RESEARCH ON NAMI NATIONAL SIGNATURE PROGRAMS

- 3.7 Any research studies conducted on NAMI National Signature Programs or recruiting participants from NAMI National Signature Programs must be approved in advance and in writing by NAMI National.
- 3.8 The individual/institution conducting the research must share with NAMI National the IRB application and approval, and any data, analysis, and conclusions from the research project. Refer to **Appendix 2** of this document for more details.

## IV. NAMI NATIONAL SIGNATURE PROGRAM LEADERS

### NAMI NATIONAL SIGNATURE PROGRAM LEADER ELIGIBILITY AND QUALIFICATIONS

- 4.1.** All NAMI National Signature Program Leaders must meet the requirements of NAMI membership, per the NAMI National Bylaws, and have a record in NAMI's member management system.
- 4.2.** All NAMI National Signature Program Leaders must be trained and certified in accordance with the relevant program standard (e.g., in-person and/or online training).
- 4.3.** All NAMI National Signature Program Leaders must be at least 18 years of age.
- 4.4.** The program-specific eligibility requirements for each NAMI National Signature Program are listed [Section 9 of this document](#).
- 4.5.** It is recommended that a Program Leader trainee have experience completing or participating in the program for which they are seeking certification.
- 4.6.** Documentation of a formal diagnosis of a mental health condition is not required to lead NAMI Connection, NAMI Ending the Silence, NAMI In Our Own Voice, NAMI Peer-to-Peer, or NAMI Provider.
  - 4.6.1.** The trainee needs to have experienced mental health symptoms and be in recovery. Recovery is defined as “a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential.” (*SAMHSA's Working Definition of Recovery*)
- 4.7.** The NSO and NA may impose additional requirements and/or conditions on prospective NAMI National Signature Program Leaders for the program in which they are training (e.g., agreeing to teach two full sessions of a course, or facilitate a support group for at least one year). NAMI National acknowledges that unexpected life situations may occur that necessitate NSOs and NAs to exercise compassion and flexibility with this particular policy.
  - 4.7.1.** The Program Leader is only obliged to comply with the conditions added by the NSO or NA hosting the NAMI National Signature Program which they are leading.
- 4.8.** The existence of a criminal record does not automatically disqualify individuals from leading NAMI National Signature Programs. The NSO and NA will review each situation on a case-by-case basis and may consult legal counsel. The NSO and NA have the right to deny or limit these volunteer opportunities based on their findings.
- 4.9.** Certain sites (e.g., schools, hospitals, VA facilities, jails, prisons, juvenile detention centers, etc.) may require that all volunteers have criminal background checks to comply with the law, or submit proof of vaccinations (e.g., TB, etc.) for the safety of

patients/residents/students. The NSO and NA will need to determine whether the expense of background checks will be paid by the Program Leader, the NSO, or the NA.

## NAMI NATIONAL SIGNATURE PROGRAM LEADER SUBSTITUTIONS AND MENTORING

- 4.10.** In instances where a Program Leader is unable to continue leading a program, an Untrained Substitute may be appointed to help with lecturing for the remaining classes in that specific course only. The Untrained Substitute is not considered to be certified and will not be allowed to lead future courses unless and until they attend the program training and achieve certification.

**4.10.1.** Untrained individuals are not permitted to serve as Program Leaders for these NAMI National Signature Programs: NAMI Basics, NAMI Family-to-Family, NAMI Homefront, NAMI Peer-to-Peer, and NAMI Provider.

- 4.11.** For NAMI Support Groups – NAMI Connection and NAMI Family Support Group – that do not have a second co-facilitator, the NAMI Support Group mentorship process may be used. This process allows a trained, and certified, facilitator to mentor a prospective facilitator until an official training can be held.

**4.11.1.** This mentorship process cannot continue indefinitely, and the mentee must be certified within one (1) calendar year of starting the mentorship process.

**4.11.2.** The NSO or NA with oversight of a Support Group that is being led by a certified facilitator and a mentee has final approval of the mentee's continued role as co-facilitator.

**4.11.3.** All mentees acting as a co-facilitator must otherwise be eligible for certification according to the requirements outlined in this document and the specific program manual for the program being led.

## COMPENSATION FOR NAMI NATIONAL SIGNATURE PROGRAM LEADERS

- 4.12.** NAMI National Signature Program Leaders may be compensated at the discretion of the NSO or NA providing the Program. However, NAMI National neither requires nor recommends payment of any type for NAMI National Signature Program Leaders.

- 4.13.** Any form of payment to Program Leaders (contract fees, stipends, etc.) may be considered an employer/employee relationship. NSOs and NAs must familiarize themselves with federal and state laws regarding regulations on employees and contractors if they opt to provide payments of any sort to Program Leaders. Guidance on federal law can be found at <https://www.irs.gov/businesses/small-businesses-self-employed> under the hyperlinks *Self-Employed* or *Independent Contractor* or *Employee*.

**4.13.1.** NAMI National recommends reimbursing Program Leaders for expenses such as supplies, copies, snacks, or mileage. Documentation (e.g., receipts and expense forms) should be managed in accordance with the policies of the NSO or NA providing the NAMI National Signature Program.



## V. NAMI NATIONAL SIGNATURE PROGRAM STATE TRAINERS

### NAMI NATIONAL SIGNATURE STATE TRAINER ELIGIBILITY AND QUALIFICATIONS

- 5.1. All NAMI National Signature Program State Trainers must meet the requirements of NAMI membership, per the NAMI National Bylaws, and have a record in NAMI's member management system.
- 5.2. The program-specific eligibility requirements for each NAMI National Signature Program are listed [Section 9 of this document](#).
- 5.3. All prospective State Trainers must be trained in the latest version of the respective program and have performed in the role of Leader for that program within the previous 12 months.
- 5.4. All prospective State Trainers must successfully complete all requirements of a NAMI National Training of Trainers event/program in order to achieve State Trainer certification. Only NAMI National can provide training and certification of State Trainers. NAMI National has the exclusive right to change training and certification requirements, including requirements of continued certification, for all NAMI National Signature Programs and for NAMI National Signature Program Leaders and State Trainers.
- 5.5. All prospective state trainers for NAMI National Signature programs must be screened for readiness and then be recommended to attend a NAMI National Training of Trainers event by their NSO (either by the executive director, president of the board of directors or program director). This recommendation indicates the NSO endorses not only that the individual meets the minimum requirements, but that they are willing and able to perform in that new role.
- 5.6. Prospective State Trainers that have successfully completed registration and have exhibited program knowledge via registration questions will be screened and vetted by a National Program manager to determine trainee readiness. NSO will also be interviewed regarding program needs and knowledge of trainee's experience.
- 5.7. The eligibility of a State Trainee and/or a State Trainer to train may be reviewed and eligibility revoked at any time by the NSO or NAMI National. Refer to **Appendix 3** of this document for more details.
  - 5.7.1. Revocation of eligibility to serve as a State Trainee can also revoke that individual's ability to serve as a NAMI National Signature Program Leader. Terms of decertification must be evaluated by NAMI National to determine certification status..
  - 5.7.2. The process to restore eligibility will be determined by NAMI National in consultation with the NSO and NA.

## NON-CERTIFICATION OF STATE TRAINER TRAINEES

**5.8.** NAMI National may recommend non-certification of a State Trainer trainee at a NAMI Training of Trainers event. Refer to **Appendix 3** of this document for more details.

- 5.8.1.** NAMI National personnel must document the objective reason(s) a State Trainer trainee is denied certification and document a conversation with the Trainee and the endorsing NSO regarding the reasons for non-certification.
- 5.8.2.** NAMI National personnel may choose to award the trainee a certificate of attendance in the event of non-certification.
- 5.8.3.** The trainee shall have the opportunity to respond to the reason(s) for non-certification. The NAMI Director of Programs, or other designated NAMI National personnel, shall have final and binding determination on State Trainer trainee non-certification.

## COMPENSATION FOR NAMI NATIONAL SIGNATURE STATE TRAINERS

**5.9** NSOs and NAs are encouraged to contract with State Trainers in order to provide compensation for training NAMI National Signature Program Leaders at a suggested rate of \$125-\$250 per day of training.

**5.9.1** State Trainers shall be offered accommodation the night before and nights during trainings when travel is required, at the expense of the host NSO/NA.

**5.9.2** NAMI National recommends reimbursing State Trainers for actual training expenses such as supplies, copies, snacks, or mileage, as well as lodging and meals. Documentation (e.g., receipts and expense forms) should be managed in accordance with the policies of the NSO or NA providing the NAMI National Signature State Training

**5.10** Any form of payment to State Trainers (contract fees, stipends, etc.) may be considered an employer/employee relationship. NSOs and NAs must familiarize themselves with federal and state laws regarding regulations on employees and contractors if they opt to provide payments of any sort to State Trainers. Guidance on federal law can be found at <https://www.irs.gov/businesses/small-businesses-self-employed> under the hyperlinks *Self-Employed* or *Independent Contractor or Employee*. This includes consideration of state laws in both the sending and receiving states if a State Trainer is providing a training in a state other than their state of residence.

**5.11** All contracts for State Trainer services shall be agreed to by all parties prior to the commencement of travel to provide said services. NAMI National has the right to review any such agreements or contracts at any time.

## VI. CERTIFICATION OF NAMI NATIONAL SIGNATURE PROGRAM LEADERS

**6.1.** NAMI National Signature Program Leaders achieve certification by successfully completing a State Training led by two (2) certified NAMI National Signature Program State Trainers.

**6.1.1.** Not every program uses a State Trainer certification model. Refer to the tables in [Section 9 of this document](#) under **State Trainer Qualifications** and **State Training Format** to determine if certification is required to be a NAMI Signature Program Leader. Contact the NSO to complete the requirements to lead non-certified programs.

**6.2.** Successful completion of a State Training includes attendance, participation, demonstration of program knowledge and understanding, and a recommendation for certification by the Certified State Trainers leading the training.

**6.3.** State training schedules, formats, and content may not be altered or condensed in any way without the approval of NAMI National.

**6.3.1.** Refer to each of the NAMI National Signature Program manuals for specific procedures.

**6.4.** Trainees are not guaranteed certification. Certification will be decided upon by the state trainers based on the trainee's ability to demonstrate the skills required and to adhere to the program model. NAMI National empowers and expects certified State Trainers to make decisions regarding the certification, provisional certification, or the non-certification of individuals attending NAMI National Signature Program Leader training.

**6.5.** NAMI National does not recognize any class, presentation, or support group provided by any individual(s) who attended a program training but failed to receive a certification of completion by a Certified State or National Trainer in good standing with NAMI National.

**6.5.1.** It is recommended that NSO/NAs who need an out-of-state trainer to conduct a training contact a NAMI National Program Manager to facilitate introductions to other NSOs with certified trainers. This ensures that a state trainer recommended by another NSO/NA or someone who promotes themselves as a trainer is in fact in good standing with NAMI National (i.e. has not been decertified).

**6.6.** NSO/NA may not charge trainees a fee to attend a NAMI program leader training. An NSO/NA may charge another NSO/NA for the expenses of training a leader if such an agreement is made in advance.

**6.7.** The NSO program director/coordinator must submit any documentation required for specific programs to NAMI National after the training. This documentation is described in each of the NAMI National Signature Program training manuals.

## NON-CERTIFICATION OF A NAMI NATIONAL SIGNATURE PROGRAM LEADER TRAINEE

**6.8** A certified State Trainer may deny a trainee the ability to receive certification. Potential documented reasons a trainee would not be certified include, but are not limited to:

- Fails to demonstrate understanding of the model or program.
- Fails to contribute to group safety.
- Focuses on a directive model (i.e., giving advice or acting as a therapist).
- Focuses on themselves and fails to create a space for all to share.
- Fails to adhere to the requirements of the model or program (i.e., fidelity).
- Fails to adhere to the NAMI Signature Programs Code of Conduct.
- Verbally or physically threatens a trainee or the State Trainer.

**6.9** The certified State Trainer must follow specific steps when they determine whether a trainee is ineligible for certification.

**6.9.1** The certified State Trainer must document in writing the specific and objective reasons why they believe the individual should be denied certification.

**6.9.2** The certified State Trainer must hold, and document in writing, a conversation with the trainee that (1) explains the reason(s) why the trainee is ineligible for certification, and (2) allows the trainee to respond and provide their own assessment of their performance in the training.

**6.9.3** The certified State Trainer must hold, and document in writing, a conversation with the NSO or NA providing the training and the NSO where the trainee is presumed to provide programs if certified, that relays the decision to deny certification to the trainee, explains the rationale for that decision, and outlines any recommended follow-up actions.

**6.9.4** The certified State Trainer must award the trainee with a certification of attendance rather than a certificate of completion.

**6.9.5** The certified State Trainer must document the retrieval of program training materials. Refer to **Appendix 3** of this document for more details.

**6.10 RESPONSIBILITY OF THE NAMI AFFILIATE:** Participate in a conversation with the NSO to understand the rationale for the certification denial, and then stand by the decision when interacting with the trainee.

**6.11 RESPONSIBILITY OF THE NAMI STATE ORGANIZATION:** Provide to the NA the written documentation from the State Trainer that describes the specific objective criteria used to support the determination to not certify the trainee.

**6.11.1** If necessary, provide mediation between the NA and the trainee and consult with the NAMI National Program Manager for guidance.

- 6.12 RESPONSIBILITY OF NAMI NATIONAL:** Support the NSO and NA in the procedures outlined above and in their authority to enforce non-certification.

## PROVISIONAL CERTIFICATION OF A NAMI NATIONAL SIGNATURE PROGRAM LEADER TRAINEE

- 6.13** Provisional certification will be considered when the State Trainer determines the trainee is capable of fidelity to the model but needs more practice time or oversight training the program.

- 6.14** The certified State Trainer must follow specific steps when they determine whether a trainee is eligible for provisional certification.

- 6.14.1** The certified State Trainer must document in writing the specific and objective reasons why they believe the individual should be provisionally certified along and the expected action steps required for full certification. Refer to **Appendix 3** of this document for more details.
- 6.14.2** The certified State Trainer must hold, and document in writing, a conversation with the trainee that (1) explains the reason(s) why the trainee is ineligible for full certification at the end of the training, (2) allows the trainee to respond and provide their own assessment of their performance in the training, (3) expected action steps and timeline leading toward full certification.
- 6.14.3** The certified State Trainer must hold, and document in writing, a conversation with the NSO or NA providing the training and the NSO where the trainee is presumed to provide programs if certified, that relays the decision to deny full certification to the trainee, explains the rationale for that decision, and outlines the recommended follow-up actions and timeline.
- 6.14.4** The certified State Trainer must award the trainee with a certification of attendance rather than a certificate of completion.
- 6.14.5** The State Trainer shall monitor the trainee's progress with agreed upon action steps toward full certification.
- 6.14.6** The State Trainer may recommend full certification or non-certification for lack of progress. The procedures listed in **6.6.1** through **6.6.5** shall be followed in the event of non-certification, excluding **6.6.4** if certificate of attendance has already been conferred.

- 6.15 RESPONSIBILITY OF THE NAMI AFFILIATE:** Participate in a conversation with the NSO to understand the rationale for provisional certification, and then stand by the decision when interacting with the trainee. Work with the State Trainer to monitor the trainee's progress toward full certification. Provide evidence of completion of action steps to the NSO and relay State Trainer's final recommendation of full certification or non-certification to the NSO.

- 6.16 RESPONSIBILITY OF THE NAMI STATE ORGANIZATION:** Provide to the NA the written documentation from the State Trainer that describes the specific objective criteria used to support the determination to not fully certify the trainee and the action steps necessary to achieve full certification.
- 6.17 RESPONSIBILITY OF NAMI NATIONAL:** Support the NSO and NA in the procedures outlined above and, in their authority, to enforce provisional certification and monitor progress toward full certification.

## DECERTIFICATION OF A NAMI NATIONAL SIGNATURE PROGRAM LEADER AND NAMI NATIONAL STATE TRAINERS

- 6.18** There are times when a NAMI National Signature Program Leader and/or NAMI State Trainer must separate from leading programs and/or trainings. Criteria for separation, whether temporary or permanent, from their role as a NAMI National Signature Program Leader and a NAMI State Trainer include, but are not limited to:

- Does not demonstrate understanding of the model or program.
- Does not contribute to group safety.
- Is focused on a directive model (e.g., giving advice or acting as a therapist).
- Is self-focused and unable to create a space for all to share.
- Is unwilling to be faithful to the model or program (i.e., fidelity).
- Does not follow the NAMI Signature Program Code of Conduct or Confidentiality Policy.
- Verbally or physically threatens a member or leader of the program or training.
- Behaviors and actions that compromise the integrity of NAMI, its programs, and jeopardize the experience of all participants.

- 6.19** Program Participants, Co-facilitators, State Trainers, NAs, NSOs, and NAMI National all play a role in decertification of a NAMI Signature Program Leader and/or State Trainer. Refer to **Appendix 3** of this document.

- 6.19.1 Program Participants, Co-facilitators, and State Trainers:** Provide written documentation to the NSO or NA that displays objective evidence of the necessity of separation. Documentation, such as grievances or complaints, need not specifically request Program Leader and/or State Trainer separation in order to serve as the basis for separation. Submission and review of complaints and grievances regarding programs shall follow the policies and procedures by the NSO as part of general operations.

- 6.19.2 NAMI Affiliates:** The NA may choose to temporarily or permanently decertify a NAMI National Signature Program Leader. The NA must have a documented conversation with the Program Leader regarding the objective evidence presented, using caution when exposing the identity of the person providing the evidence. The NA may seek corroborating evidence and provide a corrective action plan for the Program Leader. Documentation of the corrective action plan and any progress made must be maintained by the affiliate. Once the NA has

documentation of objective evidence, they will provide a copy to the NSO. Once the NA has documentation of objective evidence, they will provide a copy to the NSO.

The NA may provide objective evidence to support State Trainer decertification to the NSO but may not make the decertification determination. Any determination of temporary or permanent decertification of a State Trainer shall be provided to National from the NSO.

**6.19.3 NAMI State Organizations:** The NSO may choose to temporarily or permanently decertify a NAMI Signature Program Leader and/or a State Trainer that provides NAMI Signature Programs on behalf of the NSO.. The NSO receives documentation of objective evidence and provides a copy to the affected NA(s). The NSO must have a documented conversation with the State Trainer or Program Leader if the affected program is provided by the NSO. The NSO retains the right to decertify a State Trainer by rescinding the NSO's endorsement of State Trainer eligibility. The NSO may seek corroborating evidence and provide a corrective action plan for the Program Leader and/or State Trainer. Documentation of the corrective action plan, or any other action steps agreed upon for resolution, and any progress made must be maintained by the NSO. Any determination of temporary or permanent decertification, whether determined by the NA or NSO, shall be provided to the NAMI National Education Department.

**6.19.4 NAMI National:** NAMI National may review all documentation related to temporary or permanent decertification of any NAMI Signature Program Leader and/or State Trainer. In the event of a dispute between an NA and NSO, either party may initiate mediation with or without the recommendation of NAMI National. NAMI National reserves the right to a final and binding determination in all matters related to NAMI Signature Program Leader and/or State Trainer eligibility and certification, including decertification.

**6.20** The decertification process shall be finalized within 90 days of receipt of written objective evidence by the NA or NSO leader indicated above.

**6.20.1** In cases of imminent harm or reasonable suspicion of harm to program participants, it is the responsibility of the NA or NSO providing the affected program to locate an alternate facilitator while the decertification process is pending.

**6.20.2** Disputes arising between NAs and NSOs involving these policies or interpretations of these policies shall trigger the dispute resolution process outlined in the NAMI National bylaws (*Article I, Sectn 4(2)*)

## VII. PARTICIPATION IN NAMI NATIONAL SIGNATURE PROGRAMS

- 7.1. The program-specific participation requirements are listed within the tables in Sections 11.3 to 11.14 of this document.
- 7.2. Professionals (mental health, school, day care workers, etc.) are prohibited from attending NAMI National Signature Programs unless they meet the lived experience requirements of that specific program and participate fully as a non-professional. Exceptions exist for NAMI Basics (when offered to groups of professionals only) and NAMI Provider.
  - 7.2.1. NAMI Basics may be offered in its entirety to groups comprised only of professionals. Mixing groups of family members and professionals is prohibited.
  - 7.2.2. NAMI Provider is specifically designed for health care professionals.
- 7.3. Observers, including children of participants, are prohibited from attending or auditing any NAMI Signature Program for any reason.
- 7.4. Refer to the respective NAMI National Signature Program manual (provided to certified Program Leaders and State Trainers) for additional eligibility requirements.
- 7.5. A formal diagnosis is not required to participate in any NAMI National Signature Program.
- 7.6. An adult is defined as a person 18 years or older.

### AMERICANS WITH DISABILITIES ACT ACCOMMODATIONS

- 7.7. Under the Americans with Disabilities Act (ADA), accommodations must be made for participants who are deaf, hard of hearing, or deaf-blind. Accommodations that are made – such as contracting with interpreters – are the responsibility of the NSO or NA.
- 7.8. Digital copies of NAMI National Signature Program participant manuals should be made available for those individuals that need large print versions. Copies may be downloaded from the NAMI Store. The device to read the manuals is the responsibility of the participant.
- 7.9. Pursuant to ADA regulations, service animals (“*dogs that are individually trained to do work or perform tasks for a person with a disability*”) are legally permitted to attend all NAMI Signature Programs (<https://www.ada.gov/resources/service-animals-2010-requirements/>).
- 7.10. Comfort and emotional support animals do not qualify as service animals under the ADA and therefore are not guaranteed the same access to NAMI National Signature Programs.
- 7.11. The NSO or NA will have authority to determine whether comfort and emotional support animals are permitted at NAMI National Signature Programs.



- 7.12.** Consideration for people with serious allergies or fear of an animal may take priority when comfort and emotional support animals are present.
- 7.13.** Compliance with the ADA may also include ensuring that in-person trainings and programs occur in an environment that is accessible to persons with mobility restrictions that does not require the person to participate in a different format (i.e. holding a program in an inaccessible building and requiring those with mobility restrictions to join virtually).
- 7.14.** Virtual training and programs must ensure accessibility including, but not limited, platforms that support screen readers, live closed-caption, and/or an ASL application. Measures should be taken to ensure confidentiality of transcribed and/or recorded programs.

## CONFIDENTIALITY

- 7.15.** All NAMI National Signature Programs will incorporate the principles of mutual trust and respect among participants and Program Leaders.
- 7.16.** All NAMI National Signature Program Leaders will be trained in the importance of creating and maintaining an atmosphere of respect in NAMI programs that is conducive to participants' ability to gain valuable information and support around mental health conditions.
- 7.17.** This atmosphere of respect includes the assurance of confidentiality regarding participation in NAMI National Signature Programs as well as any information shared by participants about themselves or others.
- 7.18.** The protection of confidentiality is a shared responsibility of the Program Leader, the NSO, and the NA. If confidentiality is broken, the NSO and NA are both responsible for addressing the incident and preventing future violations.
- 7.19.** If a Program Leader violates confidentiality, they may be suspended by the NA or the NSO (depending on who is sponsoring the program).
  - 7.19.1.** In situations where the NA is suspending a Program Leader for a violation of confidentiality, the NA must notify the NSO and NAMI National of the cause and duration of the suspension.
  - 7.19.2.** In situations where the NSO is suspending a Program Leader for a violation of confidentiality, the NSO must notify NAMI National (and, if applicable, the NA) of the cause and duration of the suspension.
- 7.20.** A violation of confidentiality is also grounds for de-certification, meaning that the Program Leader is no longer credentialed to lead a NAMI National Signature Program. Any violation must be documented in writing and submitted to the sponsoring organization and NAMI National.
  - 7.20.1.** The process for de-certification involves the co-Leader/Trainer, the NA, and the NSO, with the final step being notification to NAMI National. Refer to **Appendix 3** of this document for more details.

- 7.21.** If a participant in a program violates confidentiality, the Program Leader may request that the NA or the NSO (depending on who is sponsoring the program) ask the individual not to return to the program.
- 7.22.** The only reason confidentiality should ever be broken is to protect the safety of the participant or someone else.
- 7.23.** Audio or videotaping during any NAMI National Signature Program is prohibited under any circumstances.
- 7.24.** Observers are not permitted to attend or audit any NAMI National Signature Program that is a class or a NAMI Support Group under any circumstances (e.g., media, researchers, students). Observers may attend any NAMI National Signature Program that is a presentation.
- 7.25.** Following an adopted whistleblower policy or state and federal whistleblower laws and regulations shall not be considered a breach of confidentiality.
- 7.26.** Records of attendance shall only be released in accordance with local, state, and federal laws. A program participant can request verification of their own attendance for personal use.

## MANDATED REPORTING

- 7.27.** A mandated reporter is a person who, because of his or her training or profession, is legally required to report suspicions of potential harm or neglect of a person to the relevant authorities. The specific definition varies from state-to-state.
- 7.28.** NAMI National Signature Program Leaders are not considered mandated reporters by virtue of their NAMI Signature Program training.
- 7.29.** If a NAMI National Signature Program Leader has additional certification or licensure (e.g., Certified Peer Specialist, mental health counselor), and/or has been trained in their respective state's laws around mandated reporting, then they are obligated to follow those laws.
- 7.30.** A NAMI National Signature Program Leader who has the designation of being a mandated reporter in his or her state is required by NAMI to inform the participants in the class/support group/presentation of their status even if their specific mandated reporter regulations do not require this disclosure.
- 7.31.** Participants in NAMI National Signature Programs, who are also mandated reporters, should follow the requirements of their licensure and state, and therefore may not be required to inform other participants and the Program Leader of their presence.

- 7.32.** A NAMI National Signature Program Leader, who is not a mandated reporter in his or her state but who is concerned about something reported by a participant in their class/support group/presentation, should discuss those concerns with the sponsoring NSO or NA and follow the policies and procedures of that organization, which must comply with the laws in that state.

## **VIII. CODE OF CONDUCT**

- 8.1.** NAMI National Signature Programs are built around the principles of mutual trust and respect among participants, trainees, Program Leaders and State Trainers. Certified Program Leaders and State Trainers are representatives of NAMI and are held to standards of conduct when leading a program. This Code of Conduct (the CODE) will be explained during both Program Leader and State Trainer trainings and will be included in all NAMI National Signature Program manuals.
- 8.2.** NAMI Program Leaders and State Trainers are representatives of the NAMI Alliance and NAMI holds these Program Leaders and State Trainers to a high standard of conduct. NAMI National Signature Program Leaders and State Trainers will:
- 8.2.1.** Offer and/or train only the NAMI National Signature Programs that they have been trained and certified to provide and ask for assistance from the NA or NSO as needed.
  - 8.2.2.** Understand the difference between peer support and therapy (i.e., refrain from acting in the capacity of a therapist or mental health professional).
  - 8.2.3.** Prepare for each program and training and conduct themselves in a courteous and respectful behavior.
  - 8.2.4.** Actively monitor their own wellness, respect their emotional and physical resources, and know their limitations.
  - 8.2.5.** Provide a safe and respectful environment for participants.
  - 8.2.6.** Respect the cultural differences of program participants.
  - 8.2.7.** Respect the privacy of program participants by creating an environment of confidentiality and by not sharing sensitive, private, and personal information. As a NAMI Program Leader and/or State Trainer, they must also be prepared to break confidentiality when they believe there is a risk of danger or harm to a participant or others.
  - 8.2.8.** Maintain appropriate boundaries by not engaging in romantic, physical, or sexual relationships with co-Program Leaders or participants in the NAMI program they are leading. Married couples may lead a NAMI National Signature Program only if it is in the best interest of the participants.
  - 8.2.9.** Recognize that it is best practice for participants to not attend a program led by someone with whom they are in a relationship.
  - 8.2.10.** Refrain from promoting their own personal, political, or faith/spiritual beliefs.
  - 8.2.11.** Not endorse/promote any individuals, groups, or businesses in which they have a personal or financial interest.

**8.2.12.** Remain accountable for their own behavior and keep personal opinions and actions separate from those made as a representative of NAMI and understand that their actions and behaviors reflect on the integrity of NAMI National Signature Programs and impact the public perception of NAMI as an organization.

**8.3.** The Code of Conduct will be explained during Program Leader and State Trainer training and will be included in all NAMI National Signature Program manuals.

**8.4.** The Code of Conduct also applies to program participants. NAMI National Signature Program participants will:

**8.4.1.** Attend programs with an open mind and open heart.

**8.4.2.** Act courteously and respectfully to Program Leaders, State Trainers, and other participants.

**8.4.3.** Maintain the confidentiality of all participants by not discussing personal topics outside the program.

**8.4.4.** Take from the program the information that they believe is most helpful for them.

**8.4.5.** Expect an atmosphere of support in the program that enables them to feel comfortable sharing with others, knowing that what they share should be respected and held in confidence by the other participants.

## IX. NAMI NATIONAL SIGNATURE PROGRAM DESCRIPTIONS

**9.1.** NAMI National Signature Programs may be delivered in-person, virtually (via a web-based video conference platform), or through a hybrid of those two options.

**9.2.** Participants will not be charged a fee of any kind for enrolling and/or participating in any NAMI National Signature Program, except for NAMI Provider.

**9.2.1.** NSOs and NAs may charge non-NAMI organizations a fee for offering the program to their audience/staff. For example, NAMI Basics for Professionals (social workers, case managers, etc.) or NAMI Provider (medical office staff, hospital staff).

### NAMI Basics

NAMI Basics	
<b>Program Format</b>	Six (6) consecutive weeks, one (1) class per week; <b>-OR-</b> Over a period of three (3) consecutive weeks, with no more than two (2) classes per week; <b>-OR-</b> Across consecutive weekend days with no more than two (2) classes offered during a single weekend.  <i>No greater than a one-week break may be taken for holidays which may occur during the course (e.g., Thanksgiving, spring break).</i>

<b># of Program Leaders</b>	Two (2) certified Program Leaders
<b>Eligible Participants</b>	Parents or other primary caregivers of an individual, twenty-two (22) years of age or younger, who is experiencing mental health symptoms.
<b>Program Leader Qualifications</b>	Prospective Program Leaders must be parents or other primary caregivers of a person who exhibited mental health symptoms prior to age thirteen (13). ( <i>The formal diagnosis may have been made years later, but symptoms appeared prior to age thirteen (13).</i> )
<b>State Trainer Qualifications</b>	Must have led at least one (1) complete NAMI Basics course (six classes) in the last year, (Most recent edition).
<b>State Training Format</b>	Two-day in-person training.
<b>State Training Leader(s)</b>	Two certified State Trainers

## NAMI Connection Support Group

NAMI Connection	
<b>Program Format</b>	Ninety (90) minutes, once a week, once every other week, or monthly.
<b># of Program Leaders</b>	Two (2) certified Program Leaders
<b>Eligible Participants</b>	Any adult (18+ years of age) who has experienced symptoms of a mental health condition.
<b>Program Leader Qualifications</b>	Prospective Program Leaders are adults (18+ years of age) in recovery with a mental health condition.
<b>State Trainer Qualifications</b>	Must have at least six (6) months experience leading a NAMI Connection group, utilizing the NAMI Support Group model.
<b>State Training Format</b>	Two-day in-person training.
<b>State Training Leader(s)</b>	One (1) certified state trainer for every 6 trainees. *

\* If training six (6) or fewer people and using only one (1) trainer, a state coordinator or other designated staff member must be present at the training site.

## NAMI Ending the Silence for Families

NAMI Ending the Silence for Families	
<b>Program Format</b>	Sixty (60) to Seventy-five (75) minutes.
<b># of Program Leaders</b>	Two (2) certified Program Leaders
<b>Eligible Participants</b>	General public, although the program is designed for adults with middle or high school aged youth.
<b>Program Leader Qualifications</b>	Prospective Program Leaders must meet <b>one</b> of the following descriptions: (1) Young adult aged 18-35 in recovery with a mental health condition; or

	(2) Adult who is either a family member or a person with a mental health condition. One leader must be a young adult in recovery.
<b>State Trainer Qualifications</b>	No state trainers for this program. To lead the practice session, you must complete the online training for NAMI Ending the Silence coaches.
<b>State Training Format</b>	Blended training: a combination of online and self-directed modules followed by a 4-hour in-person practice session.
<b>State Training Leader(s)</b>	One (1) certified coach.

## NAMI Ending the Silence for School Staff

NAMI Ending the Silence for School Staff	
<b>Program Format</b>	Sixty (60) to Seventy-five (75) minutes.
<b># of Program Leaders</b>	Two (2) certified Program Leaders
<b>Eligible Participants</b>	Any adult staff in a school setting.
<b>Program Leader Qualifications</b>	Prospective Program Leaders must meet <b>one</b> of the following descriptions: (1) Young adult aged 18-35 in recovery with a mental health condition; or (2) Adult who is either a family member or a person with a mental health condition. One leader must be a young adult in recovery.
<b>State Trainer Qualifications</b>	No state trainers for this program. To lead the practice session, you must complete the online training for NAMI Ending the Silence coaches.
<b>State Training Format</b>	Blended training: a combination of online and self-directed modules followed by a 4-hour in-person practice session.
<b>State Training Leader(s)</b>	One (1) certified coach.

## NAMI Ending the Silence for Students

NAMI Ending the Silence for Students	
<b>Program Format</b>	Fifty (50) minutes.
<b># of Program Leaders</b>	Two (2) certified Program Leaders
<b>Eligible Participants</b>	Middle and high school aged youth.
<b>Program Leader Qualifications</b>	Prospective Program Leaders must meet <b>one</b> of the following descriptions: (1) Young adult aged 18-35 in recovery with a mental health condition; or (2) Adult who is either a family member or a person with a mental health condition. One leader must be a young adult in recovery.

<b>State Trainer Qualifications</b>	No state trainers for this program. To lead the practice session, you must complete the online training for NAMI Ending the Silence coaches.
<b>State Training Format</b>	Blended training: a combination of online and self-directed modules followed by a 4-hour in-person practice session.
<b>State Training Leader(s)</b>	One (1) certified coach.

## NAMI Family & Friends

NAMI Family & Friends	
<b>Program Format</b>	4-hour version = one (1) day <b>-OR-</b> split into two (2) hours over two (2) days.  Ninety (90) minute version = one (1) day.
<b># of Program Leaders</b>	Two (2) to four (4) certified Program Leaders
<b>Eligible Participants</b>	General public.
<b>Program Leader Qualifications</b>	Prospective Program Leaders are adult family members (parents, siblings, adult children, spouses, partners, etc.) of a person with a mental health condition. They must be an existing Program Leader and have led one (1) complete course in any of the following: NAMI Basics, NAMI Family-to-Family, or NAMI Homefront.
<b>State Trainer Qualifications</b>	No state trainers for this program.
<b>State Training Format</b>	Online self-directed modules.
<b>State Training Leader(s)</b>	Self-directed by the trainee.

## NAMI Family Support Group

NAMI Family Support Group	
<b>Program Format</b>	Sixty (60) to Ninety (90) minutes, once a week, once every other week, or monthly.
<b># of Program Leaders</b>	Two (2) certified Program Leaders
<b>Eligible Participants</b>	Any adult (18+ years of age) with a loved one who has experienced symptoms of a mental health condition.
<b>Program Leader Qualifications</b>	Prospective Program Leaders must be adult family members (parents, siblings, adult children, spouses, partners, etc.).
<b>State Trainer Qualifications</b>	Must have at least six (6) months experience leading a NAMI Family Support Group, utilizing the NAMI Support Group model.
<b>State Training Format</b>	Two-days in-person
<b>State Training Leader(s)</b>	One (1) certified state trainer for every six (6) trainees. *

\* If training six (6) or fewer people and using only one (1) trainer, a state coordinator or other designated staff member must be present at the training site.



## NAMI Family-to-Family

NAMI Family-to-Family	
<b>Program Format</b>	<p>Twelve (12) consecutive weeks, one (1) class per week;  <b>-OR-</b> over a period of six (6) consecutive weeks, two (2) classes per week;  <b>-OR-</b> across consecutive weekend days with no more than two (2) classes during a single weekend.</p> <p><i>No greater than a one-week break may be taken for holidays which may occur during the course (e.g., Thanksgiving, spring break).</i></p>
<b># of Program Leaders</b>	Two (2) certified Program Leaders
<b>Eligible Participants</b>	Any adult (18+ years of age) with a loved one with a mental health condition; youth ages 14 and older provided they are attending as a participant and are accompanied by a parent or guardian.
<b>Program Leader Qualifications</b>	Prospective Program Leaders must be adult family members (parents, siblings, adult children, spouses, partners, etc.) of a person with a mental health condition.
<b>State Trainer Qualifications</b>	Must have led at least one (1) complete NAMI Family-to-Family course (8-9 classes) (Most recent edition).
<b>State Training Format</b>	<p>Two-and-a-half-day in-person  <b>-OR-</b>  Two-day in-person if all trainees are NAMI Family-to-Family graduates.</p>
<b>State Training Leader(s)</b>	Two certified state trainers.

## NAMI Hearts+Minds

NAMI Hearts+Minds	
<b>Program Format</b>	<p>Single Session Option = Course delivered over one full day of in-person instruction (approx. 8 hours).  <b>-OR-</b> Multi-Session Option = Course divided and delivered in five (5) separate in-person sessions.  Each session approx. 1.5 – 2 hours depending on group size and selected activities.</p>
<b># of Program Leaders</b>	2 presenters (must be certified Program Leader for another NAMI National Signature Program).
<b>Eligible Participants</b>	General public.
<b>Program Leader Qualifications</b>	Prospective Program Leaders must be an existing leader of another NAMI National Signature Program.
<b>State Trainer Qualifications</b>	No state trainers.
<b>State Training Format</b>	No state training.
<b>State Training Leader(s)</b>	N/A



## NAMI Homefront

NAMI Homefront	
<b>Program Format</b>	Six (6) consecutive weeks, one (1) class per week; -OR- over a period of three (3) consecutive weeks, two (2) classes per week; -OR- across consecutive weekend days with no more than two (2) classes during a single weekend.  <i>No greater than a one-week break may be taken for holidays which may occur during the course (e.g., Thanksgiving, spring break).</i>
<b># of Program Leaders</b>	Two (2) certified Program Leaders
<b>Eligible Participants</b>	Any adult with a loved one who is a Service Member (active-duty military or Veteran) with a mental health condition.
<b>Program Leader Qualifications</b>	Prospective Program Leaders must be adult family members (parents, siblings, adult children, spouses, partners, etc.) of Service Members (active-duty military or Veteran) who have experienced mental health challenges.
<b>State Trainer Qualifications</b>	Must have led at least one (1) complete NAMI Homefront course (6 classes) (Most recent edition).
<b>State Training Format</b>	Two-day in-person.
<b>State Training Leader(s)</b>	Two certified state trainers.

## NAMI In Our Own Voice

NAMI In Our Own Voice	
<b>Program Format</b>	Forty (40), sixty (60) or Ninety (90) minute sessions.
<b># of Program Leaders</b>	Two (2) certified Program Leaders
<b>Eligible Participants</b>	General public.
<b>Program Leader Qualifications</b>	Prospective Program Leaders are adults (18+ years of age) in recovery with a mental health condition.
<b>State Trainer Qualifications</b>	Must have given at least five (5) NAMI In Our Own Voice presentations.
<b>State Training Format</b>	Blended training: a combination of online, self-directed modules followed by a 1-day in-person training.
<b>State Training Leader(s)</b>	Two certified state trainers.

## NAMI Peer-to-Peer

NAMI Peer-to-Peer	
<b>Program Format</b>	Eight (8) consecutive weeks, one (1) class per week. <i>No greater than a one-week break may be taken for holidays which may occur during the course (e.g., Thanksgiving, spring break).</i>
<b># of Program Leaders</b>	Two (2) certified Program Leaders
<b>Eligible Participants</b>	Any adult with a mental health condition.
<b>Program Leader Qualifications</b>	Prospective Program Leaders are adults (18+ years of age) in recovery with a mental health condition.
<b>State Trainer Qualifications</b>	Must have led one at least (1) complete NAMI Peer-to-Peer course (8 classes) (Most recent edition).
<b>State Training Format</b>	Blended training: a combination of online, self-directed modules followed by a 1½-day in-person training.
<b>State Training Leader(s)</b>	Two certified state trainers.

## NAMI Provider

NAMI Provider	
<b>Program Format</b>	Five (5) consecutive weeks, one (1) class per week; <b>-OR-</b> Over a period of five (5) consecutive days, one (1) class per day; <b>-OR-</b> Over a period of two (2) consecutive weeks, two (2) classes in the first week and three (3) classes in the second week; <b>-OR-</b> Over a period of two (2) consecutive days, two (2) classes on the first day and three (3) classes the second day.  <i>No greater than a one-week break may be taken for holidays which may occur during the course (e.g., Thanksgiving, spring break).</i>
<b># of Program Leaders</b>	<u>Best Practice</u> : Five (5) certified Program Leaders (two family members, two individuals with a mental health condition, one mental health professional). <u>Alternate Option</u> : Three (3) certified Program Leaders (one family member, one individual with a mental health condition, one mental health professional).
<b>Eligible Participants</b>	Any adult (18+ years of age) who works with people with mental health conditions and/or their family members as a part of their job (e.g., mental health professionals, clinicians, lay professionals, administrative staff, etc.).
<b>Program Leader Qualifications</b>	Prospective Program Leaders must meet <i>at least</i> one of the following descriptions: (1) adult in recovery with a mental health condition; (2) adult family member or partner of a person with a mental health condition; (3) a mental health professional who also is either a family member of someone with a mental health condition or who has a mental health condition themselves.
<b>State Trainer Qualifications</b>	Must have led at least one (1) complete NAMI Provider Education course (5 classes).

<b>State Training Format</b>	Blended training: a combination of online, self-directed modules followed by a 1½-day in-person training.
<b>State Training Leader(s)</b>	Two certified state trainers.

## NAMI Sharing Your Story with Law Enforcement

NAMI Sharing Your Story with Law Enforcement	
<b>Program Format</b>	Thirty (30) to Fifty (50) minutes; the requesting agency or CIT Coordinator will provide schedule information.
<b># of Program Leaders</b>	Two (2) presenters who have completed the required online training with a coaching session.
<b>Eligible Participants</b>	Law Enforcement Officers.
<b>Program Leader Qualifications</b>	Individual with a mental health condition or a family member of someone with a mental health condition. Presenter may or may not have had previous interaction with law enforcement/justice system.
<b>State Trainer Qualifications</b>	No state trainers. To become a “Coach” for presenters, one must complete an online training.
<b>State Training Format</b>	Online presenter training followed by coaching session.
<b>State Training Leader(s)</b>	Need one (1) Coach provided by the NSO or NA.

## APPENDIX 1

### Application: Request to Use/Adapt NAMI National Signature Program Materials

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

Date of request: \_\_\_\_\_

State: \_\_\_\_\_

NAMI Affiliate (if applicable): \_\_\_\_\_

Contact person phone: \_\_\_\_\_

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

#### Program(s) from which material will be used/adapted:

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> NAMI Basics           | <input type="checkbox"/> NAMI Connection                              | <input type="checkbox"/> NAMI Ending the Silence |
| <input type="checkbox"/> NAMI Family & Friends | <input type="checkbox"/> NAMI Family Support Group                    | <input type="checkbox"/> NAMI Family-to-Family   |
| <input type="checkbox"/> NAMI Homefront        | <input type="checkbox"/> NAMI In Our Own Voice                        | <input type="checkbox"/> NAMI Peer-to-Peer       |
| <input type="checkbox"/> NAMI Provider         | <input type="checkbox"/> NAMI Sharing Your Story with Law Enforcement |  |

#### Please answer the following questions and include with this application:

- Who will be involved in the development of the adaptation; include names of individuals, colleges/universities, research groups, etc.
- Describe the adaptation; its purpose, design, audience, what specific NAMI content will be used and how.
- If the adaptation will require participants to share their personal information, describe the safeguards that will ensure confidentiality (permission to video tape or record forms, signed media releases, etc.)
- How you will implement the adaptation, include any necessary training procedures.
- How the adaptation will benefit the NAMI Alliance.
- The time frame in which you will develop and implement the adaptation; include start, pilot and implementation dates.
- Attach copies of all documents you refer to in this form (instruments to be used, training process outlines, etc.).
- Anything else that would be helpful to NAMI National in deciding whether to approve this request.

#### By submitting this application, you agree to:

- Acknowledge that all adaptations of NAMI National Signature Program content remain NAMI National intellectual property.
- Provide the adapted content to NAMI National in an electronic, editable format prior to any usage or implementation.
- Share the evaluation tool(s) and outcomes of the adaptation with NAMI National.

- Obtain NAMI National’s consent prior to publishing any data or analyses that result from this adaptation (either from the NAMI Director of National Signature Programs or the Chief Program Officer).
- Reference NAMI in all publication(s) of adaptation results.
- Obtain documented approval from NAMI National if the approved adapted materials are used outside of the parameters expressed on this application.

**For NAMI Use Only – Use/Adapt Application**

- ☐ Use/Adaptation proposal is APPROVED.
- ☐ Use/Adaptation proposal is DENIED.
- ☐ No decision can be made until the following issues/questions are addressed:

1.

2.

3.

Reviewed by:

Signature:

Printed  
Name:

Title:

Date:

## APPENDIX 2

### Application: Request for Approval of Research on NAMI National Signature Programs

Name: \_\_\_\_\_ Date of request: \_\_\_\_\_

State: \_\_\_\_\_ NAMI Affiliate (if applicable): \_\_\_\_\_

Contact person phone: \_\_\_\_\_ Email: \_\_\_\_\_

#### Program(s) from which material will be used/adapted:

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> NAMI Basics           | <input type="checkbox"/> NAMI Connection                              | <input type="checkbox"/> NAMI Ending the Silence |
| <input type="checkbox"/> NAMI Family & Friends | <input type="checkbox"/> NAMI Family Support Group                    | <input type="checkbox"/> NAMI Family-to-Family   |
| <input type="checkbox"/> NAMI Homefront        | <input type="checkbox"/> NAMI In Our Own Voice                        | <input type="checkbox"/> NAMI Peer-to-Peer       |
| <input type="checkbox"/> NAMI Provider         | <input type="checkbox"/> NAMI Sharing Your Story with Law Enforcement |  |

#### Please answer the following questions and include with this application:

- Who will conduct the research (e.g., NAMI State Organization, university, research group)?
- The type of evaluation/research being proposed (e.g., pre/post-test, interviews)?
- The purpose of the research (e.g., funder requirement)?
- The research methodology includes, at a minimum:
  - IRB approval documentation (*including if it was a standard or expedited review*).
  - The instruments that will be used.
  - Who will administer and collect the instruments?
  - How will participant consent be obtained?
  - The training process for NAMI National Signature Program Leaders.
  - Who will complete the data analysis?
  - The data analysis process.
  - What will be done with the results?
- The time frame for the research, including start and completion date.
- Anything else that would be helpful to NAMI in deciding whether to approve this research request.
  - ☐ Research request proposal is APPROVED.
  - ☐ Research request proposal is DENIED.
  - ☐ No decision can be made until the following issues/questions are addressed:

## APPENDIX 3

### Documentation for Non/Provisional/Decertification of a NAMI National Signature Program Trainee/Leader/Trainer

This information serves as documentation of:

- ☐ Non-Certification of a NAMI National Signature Program Trainee
- ☐ Provisional Certification of a NAMI National Signature Program Trainee
- ☐ De-Certification of an existing NAMI National Signature Program Leader
- ☐ De-Certification of an existing NAMI National Signature Program State Trainer

**Name of Individual:** \_\_\_\_\_

**NAMI Affiliate:** \_\_\_\_\_

**NAMI State Organization:** \_\_\_\_\_

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

**NAMI Program:**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> NAMI Basics           | <input type="checkbox"/> NAMI Connection                              | <input type="checkbox"/> NAMI Ending the Silence |
| <input type="checkbox"/> NAMI Family & Friends | <input type="checkbox"/> NAMI Family Support Group                    | <input type="checkbox"/> NAMI Family-to-Family   |
| <input type="checkbox"/> NAMI Homefront        | <input type="checkbox"/> NAMI In Our Own Voice                        | <input type="checkbox"/> NAMI Peer-to-Peer       |
| <input type="checkbox"/> NAMI Provider         | <input type="checkbox"/> NAMI Sharing Your Story with Law Enforcement |  |

**Objective reasons – observed behavior, real or potential consequences – that certification is either being denied, removed, or made provisional (be as specific as possible):**

---

---

---

---

**Description of conversation with Trainee/Program Leader/State Trainer (attendees; summary of the discussion):**

---

---

---

**Specific recommendations including time frames:**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

## APPENDIX 3 (continued)

Program materials retrieved and returned to the NAMI Affiliate or NAMI State Organization

☐ Yes

☐ No

Name, signature, and credential of authorized NAMI official(s) making this decision:

Printed Name Date	Credential	Signature

*Once completed, this report must be submitted to the NAMI State Organization Program Director.*