

Family Support Group Video Conference

***First Wednesday of the Month, noon to 1:30 p.m.
and
Second Tuesday of the Month, 7:00 to 8:30 p.m.***

If you wish to participate, please provide the following information to tmaier.namioc@gmail.com at least one hour before the group begins:

- ❖ Date of group you are attending
- ❖ First and last name
- ❖ E-mail address
- ❖ Physical address from which you will be attending

Questions? Call Barb Maier at 919-929-7822

Before the group starts you will be sent an e-mail explaining how to sign onto and join the group

Note that by replying to this and providing the required info you are agreeing to the following:

- I understand that participating in the support group is voluntary.
- I am a resident of Orange, Chatham or Person County and I have provided NAMI Orange with the street address from which I am participating in the online group.
- I understand that the group is an opportunity to learn and share experiences.
- I understand that the group is not a substitute for mental health services and is strictly a support group providing psycho-educational information and support.



- I understand that this group is not HIPAA (Health Insurance Portability and Accountability Act) Compliant; I also understand that NAMI Orange County and the facilitators will not share my information with anyone.
- I will not share anyone's personal information or story with anyone else.

- I will be in a location where others in my home cannot overhear, or I will use earphones.
- I will not share the website link or passcode with anyone else. If someone I know is interested in participating in the group, I agree to give them the contact information of the facilitator, listed at the top of this page.
- I will share any concerns as well as provide suggestions with the facilitator listed at the top of this page.
- I will contact the facilitator if I choose not to receive information related to the group as well as resources/supports that may be emailed.
- I understand that I will be muted or removed from the call if I am inappropriate.
- I understand and agree that if myself or my loved one is in crisis, I will contact crisis services:

9-1-1- Request a Crisis Intervention Team (CIT) Officer

Nearest Emergency Department:

UNC Psychiatry Crisis Services, 101 Manning Dr., Chapel Hill, 984-974-3950

Duke Hospital ER and Duke Regional Hospital ER, 855-6484

Chapel Hill Police Crisis Unit, 919-968-2806

Freedom House 24-hour Crisis & Mobile Unit (substance abuse and mental health), 919-967-8844

Suicide Hotline, 1-800-273-8255 Text 741