


Authorized Signature

Number: AMH-AR-13-03
Issue Date: July 31, 2013

Topic: Addictions and Mental Health (AMH)
Substance Abuse & Gambling Prevention

Due Date: August 23, 2013

Subject: New Certified Prevention Specialist Cohort Training Opportunity

Applies to (check all that apply):

- | | |
|---|---|
| <input type="checkbox"/> All DHS employees | <input type="checkbox"/> County DD Program Managers |
| <input type="checkbox"/> Area Agencies on Aging | <input type="checkbox"/> County Mental Health Directors |
| <input type="checkbox"/> Aging and People with Disabilities | <input type="checkbox"/> Health Services |
| <input type="checkbox"/> Children, Adults and Families | <input checked="" type="checkbox"/> Other (please specify): County and Tribal
Prevention Coordinators, Drug Free
Community Coalitions, Latino Advisory
Council for Problem Gambling & Prevention |

Action Required: If interested in applying for the training, complete the training application and supervisor authorization form and email to AMH by deadline of August 23, 2013 by no later than 5:00 p.m.

Reason for Action: Training Opportunity to assist prevention professionals in receiving the required training to become a Certified Prevention Specialist (CPS).

Field/Stakeholder review: Yes No

If yes, reviewed by:

If you have any questions about this action request, contact:

Contact(s): Jeff Ruscoe	
Phone: 503-945-5901	Fax:
E-mail: Jeff.RUSCOE@dhsoha.state.or.us	



ADDICTIONS AND MENTAL HEALTH DIVISION

John A. Kitzhaber, MD, Governor

Oregon
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500 Summer Street NE, E-86

Salem, OR 97301-1118

Voice: 503-945-5763

Fax: 503-378-8467

TTY: 800-375-2863

www.oregon.gov/OHA/mentalhealth

ANNOUNCEMENT

Date: August 1, 2013

To: County and Tribal Prevention Coordinators

From: Jeff Ruscoe, Prevention Unit Lead
Substance Abuse & Gambling Prevention

Subject: New Certified Prevention Specialist (CPS) Cohort Training Opportunity

Dear Potential Participants:

To assist prevention professionals in receiving the required training to become a Certified Prevention Specialist (CPS), the Addictions and Mental Health Division (AMH) is offering a special eleven-month training series, consisting of over 130 hours of prevention CEUs.

Participants need to apply and 20-25 applicants will be selected. Participants are required to attend all trainings and complete a series of book study courses. All trainings are free and lodging will be reimbursed for those participants selected to participate in this project. If you are interested in this project, please complete the attached application. **Please submit your finished application to the AMH office via fax or email by August 23, 2014 by 5:00 pm.**

Below is the Prevention Certification Training Cohort and tentative topics. Dates and locations have not been determined at this time but will be finalized in the near future.

- **CPS Cohort Kick-Off** October 1-4, 2013, Salem, Oregon
- **Substance Abuse Prevention Skills Training:** Presented by AMH Staff
- **Media Advocacy/Literacy Webinar:** Presented by Jeff Ruscoe, AMH
- **CPS Cohort Book Study and Conference Call:** Facilitated by AMH Staff
- **Data Webinar:** Presented by Rusha Grinstead, AMH

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- **Alcohol and Underage Drinking and Prevention Pharmacology:** Presented by AMH Staff
- **Facilitation:** Presented by AMH Staff.
- **Community Mobilization:** Presenter: TBD
- **Prescription Drugs and Marijuana:** Presenter: TBD
- **Program Evaluation:** Presenter: TBD
- **3-day CPS Prep Workshop:** September 2014. Presenter: Caroline Cruz and Annette Chastain

Participants will be notified by August 30, 2013 of acceptance to this project. Please place the first training date tentatively on your calendar.

Questions about this announcement:

Contact Sandra Lacher, at Sandra.lacher@state.or.us or call her at (503) 945-7814

Thank you for your support.

Sincerely,



Jeff Ruscoe, Prevention Unit Lead

Substance Abuse & Gambling Prevention



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New Certified Prevention Specialist (CPS) Training Application

2013-2014 CPS Cohort Supervisor Authorization:

Participant Name:

Participant Title or Position:

Participant Agency:

Agency Address:

Agency Phone:

Preferred Contact Phone:

Agency Fax:

Preferred Contact Email:

I will ensure attendance at all training events as well as time for project completion if _____ is accepted as a member of the 2013-2014 cohort.
(Participant Name)

Supervisors Name:

Supervisor Authorization Signature: _____ Date: _____

Application Questions:

- 1) How many years have you worked in the prevention field and in what capacity? (Please briefly describe your work experience)

- 2) Is your current position funded by the Addictions and Mental Health Division (AMH)? If not, who funds your current position?

- 3) What types of programs/activities do you implement in your current position?

- 4) Describe the knowledge and skills you hope to obtain from participating in the cohort training.

- 5) What are your career goals and how will your participation in this cohort help you achieve them?

Fax or email application to:

Sandra Lacher at Sandra.lacher@state.or.us or fax to 503-378-8467 by August 23, 2013 by 5:00pm.