**CPS Oversight Committee Meeting Minutes**

*Thursday, February 9, 2017 10 AM to 12 noon at ABH*

The meeting was held by phone, due to a snowstorm. The notes and minutes from the last meeting were approved.

**Program update**

* The new class completed its first full week (4 days). Although 35 were admitted, three people dropped out at the last minute, two didn’t show, and one dropped out during the week—leaving 29 people.
* So far, 90 interviews scheduled for the next class, with 9 pre-accepted and 7 who were wait-listed for the current class, meaning over 100 people are interested in a class that can only take 35, and that almost half of the upcoming class has been selected already.
* There were no grievances or appeals filed related to admissions decisions for the current class.
* A new training is planned for May, using a “collaborative circles” approach to discussing recovery and wellness. It will be organized as a train-the-trainer session.
* The video project, described at the last meeting, has the goal of capturing the CPS training modules on video. Two modules have been recorded so far, with the purpose of: (1) getting positive feedback on the training and noting areas for self-improvement, (2) coaching new trainers, and (3) having recorded material for CPS trainees to review.
* Participants from the train-the-trainer program on doing a workshop met to pratice drafting workshop proposals. One person a workshop proposal for feedback. Another person plans to present at his agency. The Alternatives Conference call for proposals is now out, and the MassPRA call for proposals will be out soon.
* A number of resumes have been received for the Program Director position.

**New Business**

* A sexual harassment policy needs to added the Policy Manual. A draft was circulated for consideration at next month’s meeting.
* There was a bill filed by Ken Donnelly (SD893) related to peer specialist certification that would appoint a commission to look into this.
* The peer specialist database, “Doors to Wellbeing,” lists Massachusetts as “soon will be Medicaid reimbursable,” although that does not seem completely accurate, as there is no fee-for-service funding now for CPSs.
* Justin brought up the issue of the qualifications of this applicant pool and the issue of whether positions are available if all of these people did get certified. It may be that many of these applicants are not really invested in working as a CPS—they may be more interested in becoming a volunteer group facilitator.
* DMH crisis programs (ESPs) are being privatized meaning that some family partners may be interested in CPS training. In response to a DMH request, the interested family partners will be offered an interview, but that the criteria for acceptance into the CPS program will not change.

**NEXT MEETING: March 9**