

SEX OFFENDER MANAGEMENT BOARD MINUTES

Friday, January 16th, 2015

Board Members

Alli Watt
Allison Boyd
Amy Fitch
Angel Weant
Bill Hildenbrand
Carl Blake
Doug Stephens
Jeff Geist
Jeff Jenks
Jessica Curtis
Jessica Meza
John Odenheimer
Kandy Moore
Kim English
Merve Davies
Missy Gursky
Nancy Jackson
Richard Bednarski
Tom Leversee
Brie Akins
Marcelo Kopcow
Rick May

Visitors

Roberta Ponis
Steve Parker
Cindy Reinhardt
Susan Walker
Walt Simon
Kris Newland
Shayna Miller
Gale Page
Debby Baty
Dianne Lawyer-Brook
Sterling Harris
Michelle Spradling
Dafna Gozani
DeAnn Major
Truman Hiatt
Laureen Quinn
Todd Hanenberg
Mary Heather
Matthew Goldberg
Jim Edgar
Bryan Jameson
Madison Nessett
Cara Morlan
Susan Morris
Amanda Zengel
Charla Thorstad

Visitors

Joe Gerber
Jeff Carpenter
Laurie Rose Kepros
Roger Kincade
Dr. Chris Renda
Carolyn Turner
Jerry Frye
Pat Harris
Beverly Casey
Tom Casey
Laura Saurini
Jo Stack
Margaret Boatman
Yvonne Pariette
Katheryn Abrahamson
Steve Huston
Ann Greenwood
Gary Davison
Jodie Goter
Melissa Blasius
Suzanne Juarez
Lou Swanson
Alan Marschke
Gary Reser
Lee Oesterle
Jeff Shay

Absent Board Members

Mimi Scheuermann

Mary Baydarian

Staff

Chris Lobanov-Rostovsky
Cathy Rodriguez

Harmony Fox
Jesse Hansen

Lucy Klos
Raechel Alderete

Board Meeting Begins:

INTRODUCTIONS -

FUTURE AGENDA ITEMS - No future agenda items.

ANNOUNCEMENTS – Chris Lobanov-Rostovsky noted the call for papers for the Sex Offender Management Board (SOMB) Annual Conference has been sent and submissions are currently being taking. Also, the SOMB Legislative Report will be published soon and will include Committee reports, which all SOMB Members are encouraged to review.

Cathy Rodriguez noted that the SOMB is currently scheduling Policy Update trainings for the upcoming year.

Jesse Hansen noted that the Family Engagement Support survey has received a significant response and the SOMB is extending the deadline for an additional month.

Merve Davies announced the Domestic Violence Training Committee wants to collaborate with the SOMB Training committee to provide a Psychopathy Checklist Revised (PCL:R) training by Dr. Robert Hare.

Angel Went announced continuing trainings in 2015 for the VASOR/SOTIPS risk and need assessment instruments around the state.

Lori Kepros commented that the Council of States Governments (CSG) is doing a series of free webinars, and registration is required. Interested parties may contact her for additional information.

The Colorado Juvenile Defender Coalition is offering free legal services for juveniles with sexual offenses who are seeking relief from registration. Handouts were available.

The SOMB gives thanks to Doug Stephens for his 8 years of service on the SOMB and wishes him the best of luck.

APPROVAL OF DECEMBER MINUTES WITH CHANGES SUGGESTED BY KIM ENGLISH: motion to approve Kim English; 2nd by Rick May, (please note that due to a technological problem, the votes of individual SOMB members will not be reported on this month)

15 Approve

0 Oppose

5 Abstain

Motion Passes

APPROVE AGENDA – Agenda approved.

ADULT STANDARDS TERM INQUIRY – Adult Standards Revision Committee – Cathy Rodriguez outlined the various options in terminology available, and some of the supporting reasons and research associated with the use of the various terms.

Missy Gursky noted the preference for the term “client” over the current term “sex offender,” stating that the Adult Standards are written with the main audience focus being treatment providers, evaluators, and polygraph examiners.

Merves Davies added that the term “sex offender” is not ideal, due to its impact as a label.

Tom Leversee acknowledged the research provided to the SOMB. He also noted that within the Juvenile Standards the SOMB separates behavior from identity, and therefore, doing this in the Adult Standards is consistent.

Kandy Moore stated that most professionals she spoke with did not like the term “client” because this term is also used to describe victims as well as a lot of other people, thus diminishing the victim’s voice. She expressed support for the term “person who has committed a sexual offense”.

Carl Blake noted that “person who has committed a sexual offense” may be wordy and difficult to fit into the Adult Standards. Because of this he suggests that maybe the adaptation of more than one term may be required, but would prefer to avoid the term “sex offender”. He noted that other types of clients are not referenced by their behavior.

Jeff Jenks noted that in his office they use the word "defendant" because the term "client" can be confusing in a court room or various other settings.

Kim English noted that the current literature has moved away from the term "sex offender" in favor of the use of the term "client". The addition of a definition of this term within the Adult Standards might help aid how to understand what the SOMB goals are when using these terms.

Angel Weant noted the vast amount of documentation required to process sex offenders and if this term is changed there will be a fiscal cost, at least for her department, to accommodate this change. Her department has created these forms using the term "sex offender" because that is what their guiding statute uses.

Carl Blake responded that the SOMB may require the use of new terminology within the SOMB, but this is not a mandate to the agencies that follow the SOMB guidelines. Therefore, no fiscal cost would be created.

Lori Kepros referred to the therapeutic alliance as an essential tool in changing behavior, and labeling someone based on their behavior may inhibit this alliance.

Additionally, Lori Kepros read a statement from a person who has committed a sexual offense, which explains how he experiences shame when labeled as a "sex offender" and this labeling/the feeling it creates does not aid in the reduction in recidivism.

Susan Walker noted that language has changed in the past without significant detriment to the function of the system. She believes that removing the term "sex offender" will actually aid in the stability of this population and that the research supports this.

Sterling Harris pointed out that words do have a significant impact for victims and offenders. She noted that the SOMB is advisory to the Department of Public Safety/Division of Criminal Justice, and it is the responsibility of the SOMB to clearly identify dangers to the public. A change in the terminology would be another step in minimizing the impact on the victim and lessening the awareness of potential threats to the public.

Michelle Spradling noted her support for the continued use of the term "sex offender". She believes that this term holds someone accountable for their actions. She noted that the research shows that most offenses are still not reported and therefore many sex offenders are never held accountable for their actions. As a result, removing the term of "sex offender" is a personal issue for the victims with whom she works.

Cara Morlan, noted that regardless of the term used within the SOMB the label will remain within the court. She feels that allowing the use of a new term does not aid in the recognition of the offender's action and that changing this language may aid in more denial. The term "sex offender" will be a part of this person's life no matter what the SOMB chooses, but she noted that changing the term the SOMB uses does make a statement both to sex offenders and victims. She concluded that the primary goal of the SOMB is public safety and holding sex offenders accountable is a part of that responsibility.

Pam Bricker supported keeping the current term of "sex offender". She noted that the denial aspect is a significant worry, as well as the message it would send to victims to change the term.

John Odenheimer noted that "sex offender" and "sex offenses" are defined by statute. He stated that he would expect that treatment providers would refer to this population as "client", whereas a judge may use another term, and prosecutor may use another. He supports the use of respect in all cases, no matter what the term being used.

Amy Fitch stated that the persons that the SOMB is referring to in the Standards are persons who have already been convicted of this crime, and not someone pending or accused. She noted that the term is not designed

as an insult, but rather as a proper depiction of what they have done. Therefore, she believes that continuing to use this term seems the most accurate way to speak to this specific population.

Allison Boyd commented on the degree in which victims pay attention to the actions of the SOMB. She feels the other terms, besides "sex offender", are minimizing of the impact on victims. Victims often face a lifetime of recovery and therefore the term "sex offender" is the best term to honor the victim's experience. She suggests that potentially using the word "client" in the treatment provider section of the Adult Standards may be appropriate. Additionally, she would like to see further research which would show the impact on victims by changing this term and not just research which focuses on the impact to sex offenders. Lastly, she noted that the term "individual who has committed a sexual offense" is problematic because of the word "a" as this would seem to indicate a single offense when it is well documented that most offenses are still not being reported or identified.

William Hildebrand referred to the research handout provided to the SOMB that shows the negative impact of labeling and that this research is what is at the core of this discussion.

Jessica Meza noted the goal of the SOMB to take an evidence based role when making decisions about the individual risk of each individual who has committed a sexual offense.

Merve Davies supported the treatment section of the Adult Standards using the term "client". He noted that the goal of treatment is to create a more stable offender, which ultimately creates a safer community.

Doug Stephens commented on law enforcement's experience, noting that every few minutes a sexual offense is being committed. He explained that there are many more victims than offenders and that the victims also face labels. He noted that the sex offenders have a choice and it is their choice that create the situation of them being labeled as a "sex offender", whereas the victims will face labeling because of something outside their choice. He believes the SOMB is focusing too heavily on the treatment side and should redirect attention to the ultimate goal of making the public safer.

Carl Blake noted that as a person under the purview of the SOMB, he finds that the current use of the term "sex offender" creates a moral conflict for him in providing treatment. He agreed that it is the choice of the sex offender that has put them in this situation, but that sex offenders can still take responsibility for their actions without the additional stigma of this label. He feels this is a huge hindrance to treatment and creates less stability and more risk for the community.

Ali Watt agreed that respect needs to be at the core of all interactions, regardless of the language used. She believes it is not the place of the SOMB to take this label away from a sex offender, but rather that it is the responsibility of the sex offender to overcome. She added that this is also a future that victims face.

Pam Bricker commented that she feels that the Adult Standards are a highly specific treatment document and that moving away from the term "sex offender" moves away from the targeted population.

Marcelo Kopcow noted that legislation created the SOMB and therefore the SOMB should be consistent with the body which created it; the legislature uses the term "sex offender" and so the SOMB should be consistent. Each provider can use the term which they feel best describes the offender, and that there is no moral obligation to use the term decided in this discussion as this is focused on the term used in the Adult Standards.

William Hildenbrand moves to refer the issue back to the committee to provide further research before coming to a decision. Marcelo Kopcow 2nd the motion.

Missy Gursky commented that the committee has referred this issue to the SOMB and therefore would rather see the conversation continue at a future board meeting.

APPROVAL OF WILLIAM HILDENBRAND'S MOTION TO REFER THE MOTION BACK TO THE COMMITTEE TO ASK FOR MORE RESEARCH AND MAKE CONCRETE RECOMENDANTION ABOUT THE DIFFERENT TERMS TO BE USED IN DIFFERENT PARTS OF THE ADULT STANDARDS: motion to approve William Hildenbrand; 2nd by Marcelo Kopcow,

2 Approve 19 Oppose 0 Abstain Motion does not pass

MOTION TO MAINTAIN THE TERM SEX OFFENDER BUT ALLOW THE ADULT STANDARDS COMMITTEE TO RECOMMEND TO THE SOMB THE ADAPTIVE USE OF TERMS WITHIN EACH SECTION OF THE ADULT STANDARDS: motion to approve Allison Boyd; 2nd by Amy Fitch,

Missy Gursky noted concerns that not all persons were able to speak during this meeting and therefore, would like to see this as a future agenda item.

13 Approve 8 Oppose 0 Abstain Motion Passes

BREAK

TREATMENT PROVIDER PANEL PRESENTATION – CARL BLAKE – Carl Blake explained the purpose of this panel is to address the recruitment and retention of treatment providers in the field. The panel consists of Charla Thorstad, Lee Oesterle, Shana Miller, and Jim Edgar.

How are providers in the system being impacted by the supervising officer and or the referral sources being the head of the Community Supervision Team (CST) or Multi-Disciplinary Team (MST)?

Lee Oesterle responded that some teams have equal say, but this is not always the case. The Adult Standards clearly say the supervising officer has final say when there is a disagreement. The other thing that he has seen is that the supervising officer may pull an individual out of the program, or not refer individuals to that provider in the future when and if conflicts do arise.

Charla Thorstad noted a concern that as a provider they do not always have the power to have a say in the final decision about what happens with their clients. Providers sometimes do not feel free to speak up for their client based on a concern for losing their referral sources.

Lee Oesterle noted his experience that providers have lost business with referral sources after speaking up against a decision made for their clients.

Shana Miller commented that, on the juvenile side, supervision officers are able to pull a client from the program if they feel the client presents too much of a continued risk, even if the provider feels differently. Because of the system of referrals, many providers feel unable to speak up for their client fully to ensure the client is receiving the best treatment.

Jim Edgar noted that he has had good experience in his time working with MDTs and that as problems arise they have been addressed within the MDTs.

What concerns do providers face when a supervisory officer, agency head, or referral source makes a decision that is contrary to the SOMB Standards?

Lee Oesterle relayed an experience he had where a client was removed from his program due to being deceptive on a polygraph test.

Charla Thorstad explained further the details that become a concern when a deceptive polygraph is presented to her. She noted that this is supposed to be more of a tool to help the sex offenders and to help the team gain more information about the sex offender rather than a reason to remove an individual from the program, if this is the only risk feature present.

Lee Oesterle noted that this issue of deceptive polygraphs is why he particularly likes VASOR/SOTIPS.

What concerns do providers have with a member of the CST or MDT as the referral source?

Charla Thorstad commented that more frequent updates from and to supervision officers would aid in the stability for the client. Despite the time requirement that this requires she feels the disruption to the sex offender creates additional risk and therefore should be considered a priority.

Lee Oesterle noted that complaints are being made from supervising officers to the SOMB, but when the complaint is between the provider and a supervising officer there is no good system in place to resolve this concern.

Charla Thorstad commented that providers often feel the need to advocate for their client, because they have a more open relationship with the sex offender than the offender has with the supervision officer.

How is the definition of client impacted by the dual regulation?

Shana Miller stated that DORA defines "client" as the person who is receiving therapeutic services while the SOMB Juvenile Standards talks about community safety as the primary goal. Her experience is that this can discourage providers at times when it becomes unclear who you are representing or speaking for, the sex offender or the community as the "client".

Jim Edgar noted that, as a supervisor he finds these challenges more prevalent with new providers. This group of providers are not only learning how to work in a non-academic environment, working on getting licensed, and working towards SOMB approval. This can lead to a large workload for a new provider and potentially early burn-out.

How has the change in procedure for complaints had an impact on providers?

Lee Oesterle noted that he was also unclear when he heard that DORA and the SOMB were sharing processes. His understanding originally was that DORA would work with licenses and removing of licenses. Then the SOMB would be an overseeing body for providers. As he understands now both are overseeing bodies with different rules and purview that providers need to be meet and that it is creating confusion.

What possible solutions are there for the systemic problems of referral sources?

Lee Oesterle noted that other systems have used outside personnel to do the actual referring, such as the Child Welfare program. Taking the referral away from the case carrying personnel and giving it to someone outside who is able to more neutrally locate providers would not only create better matches for clients to providers, but also create a more balanced power structure within the MDT/CST. He noted that in many cases this is not necessarily needed, but when it is needed the clients can be severely affected, which can have a big impact on the safety of the community.

What possible solutions can you identify for the issue of dual regulation?

Lee Oesterle asked the SOMB to review the process that other overseeing government bodies are already using as an example of how to better streamline the process of complaints.

Carl Blake opened the discussion for comments from the SOMB.

Amy Fitch noted her interest in the challenges present with the current system of referral sources. She understands the conflict that is present when someone within the MDT is also the referring body. This creates a less neutral referral system. Therefore, an outside group doing the actual referring, based on provider qualification, might be a more fluid system.

Jessica Curtis recognized the frustration created when a provider's professional opinion is not honored fully by the same bodies that are placing these clients in their care to begin with. Whether this is an innate problem in the way the system works or if it is a perception of a problem, or a perception of a lack of power, it creates a weakened community and provider confidence.

Angel Weant noted that the Juvenile Standards and system seem to be more balanced. Overall the gaps seem to be widened by a lack of communication. Even though many providers and supervision officers are very busy, taking the time to meet and communicate is a significant tool in lessening these gaps. She suggests to the SOMB a future panel of supervising officers. She recognized the concerns presented by providers, but also the challenges present in the lives of the officers.

Susan Walker noted that in other systems there is a person who can be called in to aid when a conflict is presented. Her experience is that these various groups still have communication issues to resolve. And that certain parts of the team seem to have significantly more power than others and this creates a challenging imbalance.

Missy Gursky relayed her experience with new providers becoming discouraged to enter the field as they learn more about the field. She is thankful for the discussion and hopes to see it continued.

Allison Boyd suggested more discussion around the concept of all the various requirements that must be balanced when looking at treatment, including victim's voice, and mandatory treatment.

LUNCH

LEGISLATIVE REPORT – JESSE HANSEN –

Jesse Hansen outlined the recommendations made in the report, including sex offender classification systems, transient sex offenders, geriatric sex offenders, and a follow up section from the 2014 recommendations. He detailed that one such recommendation was for further examination of the Sexually Violent Predator (SVP) classification. Currently, the SVP Classification Committee has met and made the recommendations included in the report, including eliminating the SVP term and for using a three tiered system to separate high, medium, and low risk adult sex offenders.

Jesse Hansen next addressed the section covering the transient population.

Jessica Curtis noted a similar law already present, but added that if the goal was to broaden the definition she would like to see this wording added.

Jessica Meza addressed a concern that deregistration would place the burden back on the offender and this system has been tried before, and due to a lack of legal processes knowledge this created a great cost fiscally and time wise to the courts.

Jeff Shay noted that though communication can always improve within law enforcement, the current law has taken the burden from sex offenders, but has created a situation where law enforcement is not able to adequately track offenders and this is creating many problems for offenders and law enforcement.

Lori Kepros noted that this registration law was voted on and passed by CCJJ and recommended the SOMB resubmit this issue to CCJJ.

Chris Lobanov-Rostovsky suggested a language change to allow this issue to be addressed when further knowledge is attained about the problem.

Jesse Hansen then addressed the section covering the geriatric population.

Chris Lobanov-Rostovsky noted that there are various populations within the sex offender population that may require more specialized treatment, such as the geriatric and developmentally disabled/ intellectually disabled (DD/ID) population. This may be a consideration when looking at who is required to register.

Jesse Hansen addressed the sections covering the housing restrictions and sexting regulations.

APPROVAL OF RECOMMENDATIONS AS AMENDED: motion to approve by Rick Bednarski; 2nd by Cathy.

20 Approve

0 Oppose

0 Abstain

Motion Passes

COSA UPDATE – Dianna Lawyer-Brook provided an overview of the Circles of Support and Accountability (COSA) program. .

BREAK

STAFF RESOURCE ALLOCATION FOLLOW-UP DISCUSSION –

Carl Blake noted that the SOMB may not always be fully informed on the potential projects the SOMB would address if more staff resources were available. Each project suggested and addressed has a cost to time and available personnel resources. Therefore, projects are looked at on a priority scale.

Lori Kepros acknowledged the SOMB staff's ability with community outreach and continued efforts here are encouraged.

Tom Leversee asked if further FTEs have been explored.

Chris Lobanov-Rostovsky explained that the Executive Committee did explore this to see if there was a need, and met with the Director of the Division of Criminal Justice. It was suggested the evidence to support FTEs was needed and therefore, looking to pilot initiatives was a mechanism to consider. The first pilot is the competency based treatment provider approval model.

Allison Boyd asked that an updated on the strategic planning be put on as a future agenda items.

MEETING ADJOURNS at 2:25pm.