
DOMESTIC VIOLENCE OFFENDER MANAGEMENT BOARD
APPLICATION REVIEW COMMITTEE

Chair: Karen Morgenthaler.

January 11, 2024

10:30AM- 1:30PM
Minutes-Zoom

Staff: Carolina Frane; Jesse Hansen; Chris Lobanov-Rostovsky; Reggin Palmitesso-Martinez; Alyssa Dalen; Brittinie Sandoval, Kelly Lippitt

Committee Members¹: Karen Morgenthaler (Chair); Jennifer Parker; Michelle Hunter; Erin Gazelka; Melissa Hall, Jeannine Anderson; Sandie Campanella

Members Absent:

Staff Absent: Kelly Lippitt

Guests: Mary Anne Avery, Kathye Pebely, Sandra Merrow

“CDPS is committed to the full inclusion of all individuals. As part of this commitment, CDPS will ensure reasonable accommodations are provided to enable all people to engage fully in our trainings, meetings and events. To request accommodations, please contact Adrienne Corday no later than 7 days prior to this meeting. Please make sure to also let us know if you need any of the materials in an alternative format.”

Start Time: 10:34am

UPCOMING MEETING PLANNING:

Meeting date	Member Absences	Key Items to be discussed	Items Needing Ratification
1/11/24			
2/8/24	Erin Gazelka		
3/7/24	Jennifer Parker		
4/11/24			

1. GENERAL ISSUES FOR DISCUSSION: 10:30AM-11:30AM

Topic	Notes/Comments	Decision/Action
Any Recusals for this meeting?		- none additional reported
Approval of December minutes		Approved by consensus

¹ Quorum requires two thirds of committee membership (3 members) and a minimum of two clinicians are required to review evaluations.

<p>Appendix I</p>		<p>ARC facilitating as a subcommittee group for providers. Concern for agencies not offering any in person services and lack of random monitoring for substance use. Approach should be victim centered. Research team could provide some data to address any limitations. Do we have emerging research for forensic vs voluntary clientele? Higher risk offenders not being allowed to start in teletherapy? Level A 90%, Level B 80% for completion of treatment. Level C 50% completion or discharge from tx process. Focus should possibly be on the Level C clients. Stronger language in Appendix I to support the options for in person services. It was said that prior to the use of teletherapy there were more unsuccessful discharges.</p> <p>Discussion was had about the need for teletherapy for client's where there are no services. Staff asked what clients did prior to Teletherapy option, and how sex offender clients are managed as they are required to attend in person. Staff brought up ability for providers to request variances for certain clientele. Sometimes this can be abused especially in urban areas vs rural areas. More opportunities for transportation in urban areas. Concern if a variance goes on for a certain period of time it can become more of a permanent option rather than a variance.</p> <p>Rural providers discuss snow and issues like lack of transportation-bus routes etc. that come up for clients and the need for treatment vs not receiving services. Good to see clients in their home setting. Less excuses to not get into treatment can also help with lowering risk. What is a fair distance to travel? Important not to forget victims and is it the offenders responsibility to make treatment a priority due to their crime?</p> <ol style="list-style-type: none"> 1. Providers want research for relevance. 2. Teletherapy is not going away, will continue to be an option. 3. Provider vs. MTT decision for teletherapy.
<p>2024 Standards Compliance Reviews</p>		<p>Legislative mandate effective July 2023 and staff has begun to administer the SCR's. 10%</p>

		<p>requirement but would like to stagger the SCR's for cause 2 per month as well as individuals volunteering for SCR's. Need to begin adding them to the agenda. ARC is in favor. February will add for cause SCR's to allow ARC to prioritize and map out a plan for the remainder of the year.</p>
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2. ATTESTATION OF BOARD MATTER CONFIDENTIALITY

To be read by the Board Chair:

“Do you attest and affirm that all conflicts of interest have been disclosed and that confidentiality of all board matters has been maintained since the previous board meeting?”

ARC Member responses: KM Y JP Y MH Y EG Y M.Hall, Y JA, Y SC Y

3a. Applications and Variance Requests: 11:30AM-12:15PM

Do ARC members need more time to review assigned materials?

Are there any items that require discussion in Executive Session? If so, please state the Provider ID and the reason.

Provider	New or MIL?	Notes/Comments	Decision/Action
3165,3203, 4209	New	Associate Level Candidates apps approved	
359	<input type="checkbox"/> New <input type="checkbox"/> MIL <input checked="" type="checkbox"/> Variance <input type="checkbox"/> Concern	Variance requests for treatment	<p>Variations approved with monthly reports.</p> <p>KM Y JP Y MH Y EG Y M.Hall Y, JA, Y SC Y</p>
686	<input type="checkbox"/> New <input type="checkbox"/> MIL <input type="checkbox"/> Variance <input checked="" type="checkbox"/> Concern	Renewal concerns	<p>Provider has not responded to concerns. Letter with 30 day timeframe to submit required documents to avoid delisting.</p> <p>KM Y JP Y MH Y EG Y M.Hall Y, JA, Y SC Y</p>

1056	<input type="checkbox"/> New <input type="checkbox"/> MIL <input type="checkbox"/> Variance <input checked="" type="checkbox"/> Concern	Renewal concern- requested information	<p>MIL-request evaluations to show inclusionary/exclusionary criteria for a client who qualifies for teletherapy and one who does not. What would be the process to move someone to an in person group if needed? Request offender contracts.</p> <p>Request DVCS provide information on supervision of provider.</p> <p>KM Y JP Y MH Y EG Y M.Hall Y, JA, Y SC Y</p>
3135	<input checked="" type="checkbox"/> New <input type="checkbox"/> MIL <input type="checkbox"/> Variance	New Associate application for males, treatment only	<p>Approve with comment: personal change plan and aftercare plan should be discussed in the treatment plan.</p> <p>KM Y JP Y MH Y EG Y M.Hall Y, JA, Y SC Y</p>
3182	<input checked="" type="checkbox"/> New <input type="checkbox"/> MIL <input type="checkbox"/> Variance	New Associate application for males for treatment and evaluation including teletherapy	<p>MIL</p> <p>KM Y JP Y MH Y EG Y M.Hall Y, JA, Y SC Y</p> <p>Evaluation is missing mental health tools. MMSE is not the correct tool for mental health-that is a cognitive screen. Language for teletherapy-meets or doesn't meet inclusionary/exclusionary criteria and why. Include in recommendations.</p> <p>TX plan missing teletherapy/face to face, personal change plan, aftercare plan, more needed on SMART goals. Include if in teletherapy or not.</p>
4205	<input checked="" type="checkbox"/> New <input type="checkbox"/> MIL <input type="checkbox"/> Variance	New Associate Candidate application with criminal history	<p>Approve Associate Candidate application.</p> <p>KM Y JP Y MH Y EG Y M.Hall Y, JA, Y SC Y</p>

3b. Complaints: 12:15PM to 12:45PM

Provider	DORA Case Number:	Reason for Subsequent Review	Decision / Action / Comments
PH	N/A	<input type="checkbox"/> NEW Complaint-not DVOMB approved <input type="checkbox"/> Not reviewed – waiting on DORA <input checked="" type="checkbox"/> DORA requests ARC feedback <input type="checkbox"/> Staff update	K, G, J, E, M
103	2022-9174	<input checked="" type="checkbox"/> NEW Complaint <input type="checkbox"/> Not reviewed – waiting on DORA <input type="checkbox"/> DORA requests ARC feedback <input type="checkbox"/> Staff update	Jesse KAREN RECUSED
141	2020-3489	<input type="checkbox"/> NEW Complaint <input checked="" type="checkbox"/> Not reviewed – waiting on DORA <input type="checkbox"/> DORA requests ARC feedback <input type="checkbox"/> Staff update	S & M
410		<input type="checkbox"/> NEW Complaint <input checked="" type="checkbox"/> Not reviewed – waiting on DORA <input type="checkbox"/> DORA requests ARC feedback <input type="checkbox"/> Staff update	KM & SC
460	2023-1301	<input type="checkbox"/> NEW Complaint <input checked="" type="checkbox"/> Not reviewed – waiting on DORA <input type="checkbox"/> DORA requests ARC feedback <input type="checkbox"/> Staff update	KM & EG
465	2020-2576	<input type="checkbox"/> NEW Complaint <input type="checkbox"/> Not reviewed – waiting on DORA <input type="checkbox"/> DORA requests ARC feedback <input checked="" type="checkbox"/> Staff update	K & M
484	2020-7271 2020-7359	<input type="checkbox"/> NEW Complaint <input type="checkbox"/> Not reviewed – waiting on DORA <input type="checkbox"/> DORA requests ARC feedback <input checked="" type="checkbox"/> Staff update	K, G, J, E, M
686	2023-686-3	<input checked="" type="checkbox"/> NEW Complaint <input type="checkbox"/> Not reviewed – waiting on DORA <input type="checkbox"/> DORA requests ARC feedback <input type="checkbox"/> Staff update	Karen & Erin ARC to investigate, forward to DORA. Multiple concerns. Refer to DORA as a complaint and investigation. DVOMB to investigate as well.
760	2024-760-0	<input checked="" type="checkbox"/> NEW Complaint <input type="checkbox"/> Not reviewed – waiting on DORA <input type="checkbox"/> DORA requests ARC feedback <input type="checkbox"/> Staff update	ARC requests provider response. KM Y JP Y MH Y EG Y M.Hall Y, JA, Y SC Y

924		<input checked="" type="checkbox"/> NEW Complaint <input checked="" type="checkbox"/> Not reviewed – waiting on DORA <input type="checkbox"/> DORA requests ARC feedback <input type="checkbox"/> Staff update	Jennifer & Michelle KAREN RECUSED . Provider is currently NCP and as evidenced by letter for a DV client sent to Staff, Provider has violated NCP Status, found in Appendix D, I, D, 1 Refer complaint to DORA Boards. Staff to send a letter to Provider outlining Appendix D, I, D, 1, to cease and desist providing any DV related services, including documentation. SC yes; JP yes; MH yes; EG yes
937	2023-4391	<input type="checkbox"/> NEW Complaint <input type="checkbox"/> Not reviewed – waiting on DORA <input type="checkbox"/> DORA requests ARC feedback <input checked="" type="checkbox"/> Staff update	
978	2023-978-7	<input type="checkbox"/> NEW Complaint <input type="checkbox"/> Not reviewed – waiting on DORA <input type="checkbox"/> DORA requests ARC feedback <input checked="" type="checkbox"/> Staff update	ARC finds the complaint is unfounded. KM Y JP Y MH Y EG Y M.Hall Y, JA, Y SC Y

4. STANDARDS COMPLIANCE REVIEW: 12:45PM-1:00PM

Provider	Random/For Cause	Notes/Comments	Decision/Action
17	For Cause	SCR documents received and put in the google folder for review.	Erin & Jeannine ARC recommends additional documentation within 30 days for full SCR review. Full treatment and discharge report showing MTT consensus.
489	For cause	Modified SCR documents	ARC recommends closing SCR as complete. KM Y JP Y MH Y EG Y M.Hall Y, JA, Y SC Y
943	For cause	SCR documents	Karen & Erin

5. COMPLIANCE ACTION PLAN:

Provider	Dates and Length	Notes/Comments	Decision/Action
462		Provider is asking for reconsideration for order of CAP	Erin & Jennifer ARC recommends to show work product to include treatment plans and evaluations with proof of peer consultant as a modified CAP within 6 months.

6. MONITORING: 1:00PM-1:15PM

Provider	Reason for Subsequent Review	Decision / Action / Comments
489	Response to action-due by 3/10/24	Karen & Jennifer ARC recommends tabling for review once SCR response is received.
489	Variance-monthly report	Monthly report approved for continued variance. KM Y JP Y MH Y EG Y M.Hall Y, JA, Y SC Y Variance approved with continued monthly reports.
961	Treatment plan review w/MTT consensus due by February, 2024	
971	POC, new treatment plans by 1-10-24	Table to next months ARC.
3129	Variance – complete victim training by January 2024	
3160	Variance – 8 months to obtain victim training hours- no later than December of 2023	ARC will approve a 30 day extension to provide proof of training. JP Y MH Y EG Y M.Hall Y, JA, Y SC Y KAREN RECUSED
3166	Variance – 8 months to obtain victim training hours- no later than January of 2024	
3195	Variance – 1 year to obtain CAS licensure w/DORA no later than May of 2024	

7. EXECUTIVE SESSION

EXECUTIVE SESSION for the purpose of discussing matters that are confidential pursuant to Colorado Revised Statute 24-6-402(3)(a)(III). Specifically, we will be discussing Mental Health records, which are

confidential pursuant to Colorado Revised Statutes 13-90-107(1)(g) and 24-72-204(3)(a)(I).

Motion to enter into executive session: _____ Second: _____ In Favor _____ Opposed _____
 Abstain _____

Provider	New or MIL?	Notes/Comments	Decision/Action

END EXECUTIVE SESSION

This is [NAME] and it is [TIME]. We have concluded executive session and will be inviting the public to return and turning the recorder off.

8. VOTING: 1:15PM-1:30PM

Motion to approve items previously voted on: Second: In Favor Opposed Abstain

Motion to vote on above discussed items: Second: In Favor Opposed Abstain

E-voting for this meeting.

End Time: 1:38PM