

## COLORADO DOMESTIC VIOLENCE OFFENDER MANAGEMENT BOARD

### MEETING MINUTES

August 8, 2025

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#### **ATTENDANCE:**

##### **Domestic Violence Board Members Present:**

Yolanda Arredondo, Jennifer Parker, Andrea Bradbury, Erin Gazelka, Jessica Fann, Lori Griffith, Tally Zuckerman, Tracey Martinez, Nil Buckley, Jeanette Barich, Hon. Kolony Fields, Chris Chino, Michelle Hunter, Sara Carty, Sandra Campanella, Roshan Kalantar

##### **Domestic Violence Board Members Absent:**

Raechel Alderete, Karen Morgenthaler

##### **Staff Present:**

Jesse Hansen, Brittinie Sandoval, Reggin Palmitesso-Martinez, Carolina Frane, Rachael Collie, Yuanting Zhang, Ellen Creecy, Christopher Lobanov-Rostovsky, Agatha Chronos, Taylor Kriesel, Jessica Manrique

##### **Guests:**

Danielle de Boer, Joel Malecka, Kaye Knaub, Lydia Hoffman, Mike Salaz, Natalie Seils, Philippe Marquis, Sharon Griffin, Jeff Longmore

#### **INTRODUCTIONS:**

The meeting convened at 9:02 AM.

Michelle Hunter (DVOMB Chair) introduced herself and welcomed the Board and guests.

Carolina Frane (DVOMB Program Coordinator) introduced herself and welcomed the Board and guests. She indicated that quorum was present and noted that the meeting was being recorded. She indicated to contact Taylor Kriesel if anyone is experiencing technical issues, and asked that Board members and guests sign in.

The in-person DVOMB members introduced themselves.

Taylor Kriesel introduced the online DVOMB members.

The ODVSOM staff introduced themselves.

Taylor Kriesel introduced the online guests.

Michelle Hunter (DVOMB Chair) asked if there was consensus to approve the agenda. There was consensus.

Michelle Hunter (DVOMB Chair) then moved to the next agenda item related to reviewing the July Minutes.

#### **REVIEW AND VOTE ON JULY 2025 MEETING MINUTES: (Attachment #1)**

*Andrea Bradbury (DVOMB Member) made a motion to approve the July 2025 Minutes as presented.*

*Sara Carty (DVOMB Member) 2<sup>nd</sup> the motion.*



**COLORADO**

Division of Criminal Justice

Department of Public Safety

There was no discussion on the motion.

Michelle Hunter (DVOMB Chair) asked staff to prepare the vote.

Session ID: 755253

### Question #1

The motion passed with 12 votes to approve the July 2025 meeting minutes, 0 votes to object, and 2 votes to abstain.

Responses	Percent	Count
Yes	85.71%	12
No	0.00%	0
Abstain	14.29%	2
Totals	100.00%	14

*\*Nil Buckley, Kolony Fields, Jeanette Barich, and Chris Chino voted yes in the chat.*

### ANNOUNCEMENTS:

#### Staff Announcements:

##### **Carolina Frane (DVOMB Program Coordinator):**

- There was a solicitation for the DVOMB Member position representing Victims and Victim Service Organizations. A finalist has been selected and will be announced soon.
- Jessica Manrique is the new Statistical Analyst working part time for the ODVSOM. Jessica introduced herself and shared her background.
- The Core Competency one-pager has been finalized. The one-pager highlights the importance of individualizing treatment and following evidence-based practices to help offenders rehabilitate.

##### **Taylor Krisel (ODVSOM Staff):**

- ODVSOM Conference:
  - The conference recordings have been uploaded and were made available for those registered on August 1, 2025. The recordings will close on November 1, 2025.
- Training Events:
  - DV102: October 20
  - DV103: November 3
- She thanked Nil Buckley for presenting at the most recent DV Lunch and Learn.

##### **Brittinie Sandoval (ODVSOM Staff)**

- The deadline for the Application Review Committee (ARC) to review submitted materials at the September meeting is September 1.

#### Board Announcements:

None.

#### Public Announcements:

None.



**PROPOSED REVISIONS TO SECTIONS 5.03, 5.04, 5.05, 5.06, 5.07, AND 5.08 (PRESENTATION AND Q&A):**  
**(Attachment #2) - Erin Gazelka, DVOMB Vice Chair, Jesse Hansen, ODVSOM Program Manager**

Michelle Hunter (DVOMB Chair) introduced this as a presentation and Q&A item and referred to Erin Gazelka (DVOMB Vice Chair). Erin reintroduced the historical context behind revisions to Section 5, and the reasoning behind restructuring and changing language. Jesse Hansen (ODVSOM Program Manager) explained that the revisions to Section 5 have been methodical and intentional, and the revisions presented today are focused on the structure of treatment. He thanked the Standards Revisions Committee (SRC) for their hard work and progress through Section 5. He explained that today there will only be a presentation and discussion on revisions to Section 5, and next month the Board will vote to send the proposed revisions to public comment.

Jesse and Erin presented on the proposed revisions to Section 5, which are summarized below:

- The section on the Multidisciplinary Treatment Team (MTT), currently in Section 5.03, is proposed to be moved to Section 3, in order to fully expand on requirements, function, roles, and responsibilities. Under this proposal, Section 3 would constitute a new and dedicated focus in the Standards regarding the MTT.
- The section on Couples Counseling Prohibition, currently in Section 5.09, is proposed to be moved to the new Section 5.06 Domestic Violence Offender Treatment.
  - Agatha Chronos (ODVSOM Staff) conducted a literature review on couples counseling and domestic violence offender treatment, which was presented to the SRC. The review focused on the effectiveness of couples counseling in domestic violence offender treatment, and the SRC decided that the current stance of prohibition is still warranted. If an Approved Provider (Provider) feels that couples counseling is beneficial to a client's treatment, they can apply for a variance that would be approved by the ARC.
- Section 5.03 Implementation of Individualized Treatment Plan:
  - There is an added requirement to orient the client to the purpose and need for treatment plan reviews (TPRs) as part of the individualized treatment plan. A Board member emphasized the importance of orienting the client so they can be successful in treatment.
- Section 5.04 Length of Treatment:
  - There is no assigned duration for domestic violence treatment. The length of treatment is based on the client's individual progress. A client's treatment duration is not limited to the length of their supervision.
  - Phases of treatment:
    - Phase 1 (optional): Treatment Readiness and Motivational Enhancement
    - Phase 2: Domestic Violence Offender Treatment
    - Phase 3: Maintenance
    - Discharge
- Section 5.05 Preparing Readiness, Internal Motivation, and Engagement:
  - This phase of treatment is optional and not required.
  - Providers can use short-term interventions focused on client readiness, addressing potential barriers, and offering psychoeducational content. Accountability interventions are introduced specifically for clients in severe denial.
- Section 5.06 Domestic Violence Offender Treatment:
  - Language was added to allow for a more expansive Program Design that can utilize an array of research-informed theoretical approaches and other strategies.
  - Providers can request a variance through ARC if they want to deviate from the Standards regarding couples and family counseling. This allows for the ARC to have oversight of the process if couples counseling is found to be necessary for treatment.
  - Chris Lobanov-Rostovsky (DCJ Deputy Director) discussed the possibility of renaming couples counseling to remove the sense of mutuality in the situation, and asked if there has been consideration to limiting couples counseling to solely approved domestic violence providers.
  - There was discussion among board members about couples counseling and restorative justice practices within domestic violence offender treatment. It was emphasized that if a Provider applies for a variance, the ARC can ensure victim safety. The Board emphasized the need for MTT consensus and inclusion of the Treatment Victim Advocate (TVA) in these discussions to fully consider the safety of the victim.



## Break due to technical issues with Webex: 10:15 am - 10:30 am

- There are revisions regarding responsivity considerations that Providers may want to consider during treatment. The SRC has begun drafting an appendix that discusses more specific information regarding responsivity factors. A Board member spoke to the importance of considering culturally responsive care. It was explained that there is flexibility built into the Standards to consider culturally specific components of treatment, and that individualization of treatment is paramount.
- No changes were made to Provisions II, III, and IV.
- Section 5.07 Levels of Treatment:
  - The number of treatment levels has changed from three to five, and the new levels are identified by intensity.
    - 1 (Very Low)
    - 2 (Low)
    - 3 (Moderate)
    - 4 (Moderate - High)
    - 5 (High)
  - Placement is determined within the first 30 days of treatment using the CASCADE score.
  - The duration of treatment is now tied to these new levels. Clients may be in treatment longer than the minimum timeframes prescribed.
  - Low risk clients shall be identified and separated from moderate and high-risk clients in treatment groups.
  - There is drafted language that intends to clarify how ongoing assessment of client's risk directs Providers to make adjustments to the treatment plan.
- Section 5.08 Second Contact Recommendations:
  - The term "second contact" is more broadly defined to include adjunct treatments and interventions for co-occurring needs and responsivity factors.
  - A table outlining the required frequency of these contacts is provided based on the five new treatment levels.
  - Providers must adjust the type, frequency, and intensity of second contacts as a client's risk and needs change.
- Section 5.09 Treatment Plan Reviews:
  - The timeframe for a TPR now begins the date the client attends their first domestic violence treatment session.
  - The frequency of TPRs is adjusted to every two to four months instead of two to three months.
  - Client's risk must be re-assessed at each TPR using the CASCADE.
  - Clients are required to sign the treatment plan to acknowledge the review occurred and agree to modifications.
  - A client cannot be eligible for treatment completion discharge until they have met the minimum number of review periods associated with their treatment level.
- Section 5.10 Maintenance Phase of Treatment:
  - This is a new section dedicated to the final phase of treatment.
  - The maintenance phase is described as a critical stage to sustain therapeutic gains and promote long-term non-abusive behaviors.
  - During this phase, clients finalize a personal change plan and an aftercare plan.
  - In this phase, the MTT will start preparing and planning for discharge. In the future, any victim clarification programming requirements would be placed here.

### **Board Discussion:**

A Board member shared they support the different levels of treatment intensity, and asked if sharing treatment timeframes with clients can create more challenges. Erin shared that clients often create upper limits to the time frame of treatment even when there is no set upper limit. Providers must follow other requirements with regulatory agencies regarding providing time frames and cost estimates for treatment, even though that is very challenging in a forensic setting. Jesse explained that there was a discussion in the SRC to eliminate the time



frames altogether, allowing the time frame to be at the Provider's discretion. However, there were concerns that eliminating time frames could allow for Providers to discharge clients earlier than is clinically indicated.

**Audience Discussion:**

None.

**LEGISLATIVE UPDATES (DISCUSSION AND Q&A): (Attachment #3) - Joel Malecka, CDPS Legislative Liaison**

Michelle Hunter (DVOMB Chair) introduced this as a discussion and Q&A item and referred to Joel Malecka (CDPS Legislative Liaison). Joel introduced himself and explained his role as the Legislative Liaison. He shared that the Legislative Impact Summary explains all bills passed that impact the division, including their title, description, impact to existing laws and policies, sponsors, and effective date. The Impact Summary also includes bills that did not pass that impact the division.

The following legislation was discussed:

- HB25-1098 Automated Protection Order Victim Notification System
- HB25-1148 Criminal Protection Order and Protection Order Violation
- SB25-304 Measures to Address Sexual Assault Kit Backlog
- HB24-1304 Extension of Restitution Deadlines
- SB25-295 Transfer Proposition KK Money ARPA Cash Fund

Governor Jared Polis called a special session to convene on August 21st to address budget shortfalls. Further reduction to government programs is expected.

**Board Discussion:**

Jesse Hansen (ODVSOM Program Manager) asked Joel to explain TABOR and associated challenges. Joel explained that TABOR is very niche to Colorado, and it caps the amount of the revenue the state can spend. Anything in excess of the cap is refunded to the taxpayers, and the revenue cap is met quickly. The only way the cap can increase is through population growth or increases to adjust for inflation. Since the implementation of TABOR, there have been changes to Colorado's industries, rural growth, and tourism, and TABOR was not created with those changes in mind.

**Audience Discussion:**

None.

*\*Jessica Fann left the meeting at 11:02 am.*

*\*Jennifer Parker left the meeting at 11:29 am.*

**DATA COLLECTION PLAN MODIFICATION PROPOSAL REGARDING WHEN DOMESTIC VIOLENCE TREATMENT IS NOT RECOMMENDED PER STANDARD 4.07 (DISCUSSION AND CONSENSUS)- Nil Buckley, DVOMB Member, Carolina Frane, DVOMB Program Coordinator**

Michelle Hunter (DVOMB Chair) introduced this as a discussion and consensus item and referred to Carolina Frane (DVOMB Program Coordinator). Carolina explained that Section 4.07 of the Standards allows for Providers to not recommend domestic violence offender treatment based on certain criteria. It is not used widely, but it exists as a safeguard to prevent individuals from being placed in treatment who would absolutely not benefit. In some cases, self-defending victims are referred to treatment, and this Standard exists to prevent re-traumatization of the victim. Nil Buckley (DVOMB Member) shared that infrequently she will be referred clients, particularly in diversion cases, where there is no pattern of power and control and a lack of criminogenic needs. Understanding how often these situations occur would be very valuable information.

Carolina added that data collection requirements for providers currently only include discharge outcomes, so this would be an additional requirement for Providers. If the Board decides to implement this requirement, it is



important that data entry remains manageable for Providers. Jesse Hansen (ODVSOM Program Manager) noted the complexities with building this item for data entry.

**Board discussion:**

A Board member shared that they are excited about the collection of this information. In their experience, victims will often plead guilty due to lack of resources or the emotional strain of court proceedings. This is a great training opportunity to see the full scope of the issue.

Erin Gazelka (DVOMB Vice Chair) discussed that she sees benefit in collecting data before and after treatment. Another Board member agreed that they have encountered several self-defending victims and they feel anecdotally there has been an increase in such cases.

Chris Lobanov-Rostovsky (DCJ Deputy Director) discussed that there are other reasons a client might be contraindicated for treatment besides being a self-defending victim. He also explained that in the SOMB PDMS system, there is data capture for evaluation results. Nil agreed with Chris that there are other reasons a client might be contraindicated for domestic violence offender treatment, and that other types of treatment may be appropriate.

Several Board members discussed the importance of capturing this data to help future victims and understand these cases in the future. It was mentioned that capturing the demographic data and referral sources associated with these cases would also be valuable for training.

**Audience discussion:**

None.

Michelle Hunter (DVOMB Chair) asked if there was consensus to approve the modifications to the data collection plan. There was consensus.

Break: 11:45 am - 12:15 pm

*\*Jennifer Parker joined the meeting at 12:03 pm.*

**SECTION 6.0 CORRECTIONS TO TELETHERAPY CONTRACT REQUIREMENTS (DISCUSSION AND CONSENSUS):**  
**(Attachment #4) - Jesse Hansen, ODVSOM Program Manager**

Michelle Hunter (DVOMB Chair) introduced this as a discussion and consensus item and referred to Jesse Hansen (ODVSOM Program Manager). He explained that this item will be brought back next month for the Board to vote on sending the proposed revisions to public comment. Section 6.0 was recently revised, and there are concerns that language in Provision VI might be interpreted that the MTT needs to approve everyone present in a teletherapy session, which was not the intention of the provision. The proposed revision would change the language to state that the client should uphold confidentiality requirements to not violate the integrity of the treatment process.

**Board Discussion:**

None.

**Audience Discussion:**

None.

Michelle Hunter (DVOMB Chair) asked if there was consensus to move forward with corrections to the teletherapy contract requirements in Section 6.0. There was consensus.





**DIVERSION STANDARDS LANGUAGE UPDATES (DISCUSSION AND CONSENSUS): (Attachment #5) - Carolina Frane, DVOMB Program Coordinator**

Michelle Hunter (DVOMB Chair) introduced this as a discussion and consensus item and referred to Carolina Frane (DVOMB Program Coordinator). Carolina explained that staff had a meeting with the Attorney General (AG) to discuss the language in Section 4.03 of the Standards, regarding presentence evaluations. The DVOMB does not have purview over pre-plea evaluations, and there was a discussion point regarding the use of Providers for pre-plea evaluations. Since the DVOMB does not have purview, the AG recommended removing the discussion point, and adding language Provision III which states that if a pre-plea evaluation has been performed, once there is a finding of guilt, an offender evaluation that complies with the Standards shall be utilized to determine treatment needs.

**Board Discussion:**

None.

**Audience Discussion:**

None.

Michelle Hunter (DVOMB Chair) asked if there was consensus to move forward with revisions in Section 4.03 regarding Diversion. There was consensus.

**HB25-1188 AND STANDARDS 7.05(I)(E) UPDATES (DISCUSSION, Q&A, AND CONSENSUS): (Attachment #6) - Jessica Fann, DVOMB Member, Andrea Bradbury, DVOMB Member, Carolina Frane, DVOMB Program Coordinator**

Michelle Hunter (DVOMB Chair) introduced this as a discussion, Q&A, and consensus item and referred to Andrea Bradbury (DVOMB Member). Andrea explained that HB25-1188 was signed into law this year, and there were changes regarding mandatory reporting for child abuse and neglect. Victim advocates were removed from being a mandatory reporter of child abuse or neglect. The bill does not delineate between systems based advocates and community based advocates. A treatment victim advocate within domestic violence treatment is considered a community based advocate and would fall under the confidentiality clause. Within Section 7.0 of the Standards, there is language that needs to be revised to align with the new bill. Jesse noted that some language in Section 7.0 speaks to training and might not need to be revised.

**Board Discussion:**

None.

**Audience Discussion:**

None.

Michelle Hunter (DVOMB Chair) asked if there was consensus for the Victim Advocacy Committee to revise Section 7.0 to align with HB25-1188. There was consensus.

**ADJOURN**

The meeting adjourned at 12:34 pm.

Respectfully submitted by,

Ellen Creecy, Program Assistant



Name	Q1
Andrea Bradbury	1
Erin Gazelka	1
Jeanette Barich	1
Jennifer Parker	3
Jessica Fann	1
Karen Morgenthaler	NP
Lori Griffith	1
Michelle Hunter	1
Chris Chino	1
Nil Buckley	1
Sandra Campanella	1
Sara Carty	1
Tally Zuckerman	NP
Yolanda Arredondo	1
Roshan Kalantar	1
Raechel Alderete	NP
Kolony Fields	NP
Tracey Martinez	3
Total	Yes = 12 No = 0 Abstain = 2 Total Present = 14

Q1 Motion to approve the July 2025 Minutes.

