

COLORADO DOMESTIC VIOLENCE OFFENDER MANAGEMENT BOARD

MEETING MINUTES

July 9, 2025

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ATTENDANCE:

Domestic Violence Board Members Present:

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

Domestic Violence Board Members Absent:

Tracey Martinez, Jennifer Parker, Raechel Alderete

Staff Present:

Jesse Hansen, Brittinie Sandoval, Reggin Palmitesso-Martinez, Carolina Frane, Yuanting Zhang, Matthew Lunn, Christopher Lobanov-Rostovsky

Guests*:

Danielle de Boer, Lindsey Spraker, Ana Barrett, Douglas Carrigan, Kyrsten Berrigan, Ann Padilla Parras, Meghan Hargaden, Philippe Marquis, Megan Griffith, Alan Donald, Joseph Kuntz, Stephanie Powley, Nikki Tolle, Xaviera Turner, Sharon Griffin, Ana Lara, Wendy Biesemeier, Delphinia Jaramillo, Nola Knudsen, Judith Moreno, Brian Adams, David Prescott, Marlene Schafer, Allison Belli, Peter Di Leo, Mary Anne Avery, Tameka Bordeaux, Natalie Halcomb

**Not all guests might be included.*

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 noted that the meeting was being recorded. She indicated to contact Reggin Palmitesso-Martinez (ODVSOM Staff) if anyone is experiencing technical issues, and asked that Board members and guests sign in.

Michelle Hunter (DVOMB Chair) indicated that quorum was present and asked Board members and staff to introduce themselves.

The in-person DVOMB members introduced themselves.

The online DVOMB members introduced themselves.

The ODVSOM staff introduced themselves.

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



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

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

*Jeanette Barich (DVOMB Member) made a motion to approve the May 2025 Minutes as presented.
Jessica Fann (DVOMB Member) 2nd the motion.*

There was no discussion on the motion.

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

In-person voting.

Question #1

The motion passed with 14 votes to approve the May 2025 meeting minutes, 0 votes to object, and 1 vote to abstain.

Responses	Percent	Count
Yes	93.33%	14
No	0.00%	0
Abstain	6.67%	1
Totals	100.00%	15

ANNOUNCEMENTS:

Staff Announcements:

Carolina Frane (DVOMB Program Coordinator):

- She welcomed guests to the Board meeting and announced that this year is the 25 year anniversary of the DVOMB. The DVOMB's success is thanks to the hard work and dedication of Board members, Approved Providers (Providers), and stakeholders.
- Conference attendees were encouraged to buy raffle tickets for tonight's fundraiser benefiting Safer Society.
- Glory McDaniel has resigned from the Board effective immediately. Lori Griffith, Jessica Fann, and Andrea Bradbury have each committed to a second four-year term on the Board.
- LGBTQ+ Pride month was in June. The DVOMB requires Providers to have specialization in LGBTQ+ treatment.
- DCJ will be donating old cell phones to victim service organizations, and she welcomed ideas for possible victim service organizations to donate to.

Brittinie Sandoval (ODVSOM Staff):

- The deadline for the Application Review Committee (ARC) to review submitted materials at the August meeting is July 21.

Board Announcements:

None.



Public Announcements:

None.

There was a modification to the agenda. DCJ Director Dr. Matthew Lunn was delayed. As a result, the Diversion Language Presentation was given first.

DIVERSION LANGUAGE (PRESENTATION & DISCUSSION): (Attachment #2) - Erin Gazelka, DVOMB Vice Chair, and Jesse Hansen, ODVSOM Program Manager

Michelle Hunter (DVOMB Chair) introduced this as a presentation and discussion item and referred to Jesse Hansen (ODVSOM Program Manager). Jesse briefly introduced himself and welcomed all attendees of the conference. He explained that some prosecutor's offices have started to use Diversion in domestic violence cases. There have been questions from stakeholders surrounding what role the DVOMB and Providers have in Diversion cases, and whether language can be added to the Standards for clarity. This presentation will cover information from the Attorney General and provide next steps for how to address this issue.

Jesse Hansen (ODVSOM Program Manager) and Erin Gazelka (DVOMB Vice Chair) presented on the following information:

- The DVOMB's purview is enumerated in 16-11.8-103 (4), C.R.S., but does not specifically mention Diversion. The main reference for Diversion is 18-1.3-101(5), C.R.S., which specifies that a DVOMB Provider must be used to conduct an evaluation to determine appropriateness.
- The funding for a Diversion program impacts the rules and guidelines and whether the DVOMB has purview.
- There are different kinds of deferments: deferred prosecution (pre-trial diversion) and deferred judgement and sentences.
- The current language in the Standards is relatively confusing on guidance for Diversion.
 - If a provider does a presentence evaluation with a Diversion client, and then they are later placed in treatment, technically a post-sentence evaluation has not occurred.
 - If the Diversion program receives legislative funds from the state and is under purview of DVOMB Standards, a deferred prosecution and deferred judgment/sentence is technically pre-sentence and suggests it would require a presentence evaluator.
 - If the Diversion program does not receive legislative funds, then providers conduct evaluations consistent with the post-sentence evaluation requirements, for treatment placement with Standards and as a best practices guide.
- It was reported that the Attorney General clarified the following:
 - The DVOMB does not maintain any purview for Diversion, prosecutors are the gatekeepers.
 - Cases offered are pre-plea and therefore not subject to pre-sentence requirements.
 - Districts may contract with Providers and stipulate specific conditions for evaluation and treatment services under the Standards.
 - The DVOMB could create a White Paper that explains these limitations and what the DVOMB can provide guidance on.
- Diversion is often planned with the idea that it will handle lower risk cases, but District Attorney's often refer clients who are assessed at a Level C. Regardless of Level designation, Diversion cases do not pose less risk than probation, community corrections, and prison cases.
- There can be unique features of Diversion clients including general tones of entitlement and inexperience with mandated treatment and paperwork. Most programs will not allow clients into Diversion unless they accept accountability for the offense.
- Given the risk level of clients in Diversion, these clients should have at least three treatment plan reviews. However, Diversion clients often have only 6-8 months available for treatment. The Multidisciplinary Treatment Team (MTT) can assist with decision-making around timelines to possibly meet the demands for Diversion.
- Recommendations and next steps include creation of a White Paper and Revisions to Standard 4.03(IV)



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to be inline with the Attorney General's guidance.

Board Discussion:

There was a question asked if there was research on jurisdictions where there is not Diversion but a domestic violence (DV) fast-track program. Jesse explained that he is only aware of one possible instance of a DV fast-track program. In terms of the availability of data for research, only some Providers are inputting data for Diversion cases upon discharge. A Board member explained that in the 17th Judicial District, there is a "fast-track" program that is victim-centered and geared toward making contact with the victim within 48 hours on all misdemeanor cases.

A Board member thanked Jesse and Erin for their presentation and the Board's consideration on this matter. They shared that they have been receiving a lot of referrals from judicial for Diversion clients, and there can be cultural differences when evaluating immigrant clients. Their Diversion clients are often not Level C, and many are reactive victims. They support the Diversion program for clients that are low risk, which has been the majority of clients they see.

It was asked if there was a connection between the entitlement seen in some Diversion clients and the fact that these clients are considered "pre-sentence". Erin highlighted the importance of acknowledging clients' cultural differences. She said some clients do have a belief that if they qualified for Diversion that inherently means they are lower risk.

There was a question asking for clarification on what the Board is being asked to consider in this discussion. Jesse clarified that Nil Buckley (DVOMB Member) had initially raised this as a future agenda item a few months ago, and now the discussion is focused on next steps of potentially creating a White Paper and revising Section 4.03 of the Standards per the Attorney General's guidance. The Board can decide what the next steps are.

A Board member shared that they worked in a Diversion program previously, and that there can be a void for victims and victim-centeredness with the lack of a Treatment Victim Advocate.

Audience Discussion:

An audience member shared that they are the director of the 17th Judicial District's Diversion program, and they always try to remain victim-centered. They agreed with a lot of what was shared by Board members. They shared that few clients are being unsuccessfully discharged, and asked Erin if she would like to share some of the success stories with her Diversion clients. Erin shared that besides the Diversion cases that are sent back to court for not taking accountability, every Diversion case has successfully discharged from treatment.

It was asked how the Diversion standards affect background checks in placement of children in kinship homes. A Board member answered that it could impact background checks and be a potential issue, and a Diversion case would potentially be seen as an open case or pending charges in a background check.

Another Board member clarified that during Diversion the case remains open, and when they successfully complete Diversion the case is sealed and it is removed from their criminal history.

It was asked if a Diversion case is completely sealed and would not show up on a background check. A Board member said that on a background check the case would show as dismissed and sealed, similar to a deferred judgment. Another Board member clarified that just because someone is part of a Diversion program with a pending case, that does not exclude them from being a kinship home for child placement.

Michelle Hunter asked if there was consensus to move forward with the creation of the White Paper and have the Executive Committee look at revisions to Section 4.03 of the Standards. There was consensus.

DIRECTOR LUNN'S ADDRESS (PRESENTATION & DISCUSSION) - Dr. Matthew Lunn, DCJ Staff

Michelle Hunter (DVOMB Chair) introduced this as a presentation and discussion item and referred to Dr. Matthew Lunn (DCJ Director). Dr. Lunn thanked everyone for attending and thanked the Board members and staff for their work. He expressed gratitude for the expertise of everyone participating, and showed appreciation for



evidence-based discussions within Board matters. The new DCJ Strategic Plan includes three pillars: elevating and being responsive to all who call Colorado home; recruitment and retention of staff; and enhancing collaboration of public safety. He shared that he looks forward to new ways that DCJ can collaborate with the Board. He will be doing a series of town halls and listening tours this fall, with more information to come. He asked everyone to please follow DCJ on LinkedIn, and listen to the newly launched DCJ podcast. He thanked everyone again for being here today.

Board Discussion:

None.

Audience Discussion:

None.

DVOMB/SOMB DUAL CREDENTIALLED PROVIDERS (PRESENTATION Q&A): - Alan Donald, DVOMB/SOMB Approved Provider, and Xaviera Turner, DVOMB/SOMB Approved Provider

Michelle Hunter (DVOMB Chair) introduced this as a presentation Q&A and referred to Carolina Frane (DVOMB Program Coordinator). Carolina shared that given the conference is for both domestic violence and sex offense specialties, it felt apt to include a presentation from dual credentialed providers during the Board meeting. Xaviera Turner and Alan Donald introduced themselves and their background, and shared what led them into domestic violence and sex offense work.

The following questions were asked to Xaviera Turner and Alan Donald:

What crucial insights or skills have you gained through your dual credentialing that are vital to working with domestic violence and sex offenders in multidisciplinary settings?

Alan Donald: The theoretical orientation between DV and sex offense (SO) treatment is very similar. The more he has worked with diverse populations, the more fluent he has become in different frameworks. With DV clients, he has become more comfortable asking questions regarding sexual health and assessing sexual behaviors. For SO clients, he has become more comfortable discussing relationships and relationship styles.

Xaviera Turner: She learned that she cannot do everything by herself, and having a team approach is crucial to success. She also learned the importance of debriefing with coworkers to help process the difficult information that can be shared during treatment. She has grown in her confidence and ability as a Provider in holding clients accountable while building rapport.

How has your dual credentialing helped you navigate the unique ethical dilemmas of working with both domestic violence and sexual offenders?

Alan Donald: On the SO side, the treatment team is involved in making safety decisions for the client on a regular basis. Since the DV side has less supervision, he has grown in his ability to think through the needs of the client and how the team can work together.

Xaviera Turner: If a client is both in DV and SO treatment, it is possible to address more issues through either offense-specific treatment. If an issue cannot be addressed through DV treatment, it might be possible to address through SO treatment, and vice versa. It is also important for the treatment and supervision teams to work together to ensure that the needs of clients are being met and addressed.

Could you both share some examples of how your work with DV/SO clients has improved your communication outcomes with the MTT involving both DV and SO cases? How do you navigate that?

Alan Donald: There was a previous case where he was treating a client with a DV offense that occurred within the context of sex, and he was unsure how to proceed. Sentencing orders are not always good evaluations of



risk and needs. There is a lot of work done between treatment teams for both DV and SO to make sure clients' needs are not being siloed. The Provider's role is to help the treatment teams determine the proximal goal and how to address that.

Xaviera Turner: She learned how to fulfill her role and responsibilities as part of the treatment team to ensure communication between both the DV and SO sides, including all members of the team. It is crucial to ensure all team members know their role, and that everyone is included in discussions.

Can you speak to the feasibility of completing DV and SO treatment at the same time?

Xaviera Turner: She explained that it is absolutely possible to do both. Clients will learn similar things in both DV and SO treatment, but there are differences between the types of treatment, and clients can benefit from experiencing both at the same time. It can often be more effective to complete both offense-specific treatments at the same time.

Alan Donald: He shared that it is doable and can be appropriate to complete both treatments at the same time. There can be concerns when other risk factors are present that add complications to client needs. Caution and assessing risk is highly important in targeting criminogenic needs.

What challenges have you faced in bridging the professional cultures of DV and SO treatment and supervision fields, and how does your dual credentialing foster integrated approaches for offenders?

Xaviera Turner: The biggest challenge was the lack of a team approach. Everyone can have their own agenda and viewpoint and it can be hard to work together. It is important to value everyone's view point and reiterate that everything is a team decision. The provider is not the sole leader of the team.

Alan Donald: The worlds are so siloed and if there are overlapping treatment needs it can be difficult. There can be challenges in pre-sentence SO evaluations, when the evaluation shows a pattern of coercive control, is it appropriate to complete a DV pre-sentence evaluation as well? In some cases it is necessary to go back to court to get another evaluation ordered. Providers try to follow their Standards as closely as possible but it can be difficult.

Board discussion:

Jesse Hansen (ODVSOM Program Manager) thanked everyone for participating and explained that all our meetings are open and have hybrid options if people are interested in continuing to participate in Board or Committee meetings.

Michelle Hunter (DVOMB Chair) thanked everyone for attending and also encouraged attendance at future meetings.

Audience discussion:

None.

ADJOURN

The meeting adjourned at 10:59 pm.

Respectfully submitted by,

Ellen Creecy, Program Assistant



Name	Q1
Andrea Bradbury	1
Erin Gazelka	1
Jeanette Barich	1
Jennifer Parker	NP
Jessica Fann	1
Karen Morgenthaler	1
Lori Griffith	1
Michelle Hunter	1
Chris Chino	1
Nil Buckley	1
Sandra Campanella	1
Stephanie Fritts	1
Tally Zuckerman	1
Yolanda Arredondo	1
Roshan Kalantar	3
Raechel Alderete	NP
Kolony Fields	1
Tracey Martinez	NP
Total	Yes = 14 No = 0 Abstain = 1 Total Present = 15

Q1 Motion to approve the May 2025 Minutes.

