

APPENDIX I. APPROPRIATENESS AND READINESS CRITERIA FOR TELETHERAPY WITH DOMESTIC VIOLENCE OFFENDERS

I. INTRODUCTION & BACKGROUND

On March 13th, 2020, the Domestic Violence Offender Management Board (DVOMB) authorized the use of teletherapy with domestic violence offenders subject to the DVOMB Standards and Guidelines. Prior to this date, all forms of teletherapy were prohibited and required for in-person, face-to-face services. The DVOMB made this change in response to the COVID-19 pandemic as a measure to limit any disruption to evaluation and treatment services for offenders that may have caused undue risk to victim and community safety.

Since the authorization of teletherapy, much more information has been made available regarding its use with domestic violence offenders. There are numerous practical, clinical, and safety-related considerations regarding Teletherapy with domestic violence offenders. However, there is still much unknown and limited empirical research on the use of teletherapy with domestic violence offenders.

This appendix outlines the parameters, requirements, and considerations for the safe and effective use of teletherapy by DVOMB Approved Providers working with domestic violence offenders. This appendix does not replace any mandates currently required in the DVOMB *Standards and Guidelines*. Clinical and professional expertise, as well as a review of available research and literature, served as the foundation for this appendix. Subsequent revisions to this appendix will be made as new information becomes available regarding the use of teletherapy with this population.

II. DEFINITIONS

A. TELETHERAPY

“TELETHERAPY” means to deliver services through a secured telecommunications system that facilitates the synchronous, real-time, video-based assessment, evaluation, treatment, and behavioral management of a domestic violence offenders in locations different from the Approved Provider.

III. TELETHERAPY APPROVED STATUS

The provision of teletherapy services to individuals subject to the DVOMB *Standards and Guidelines* shall only be conducted by a DVOMB Approved Provider who has met the criteria established by Section 9.08 and who is listed as being Telehealth Approved. Online programs or individuals who are not listed on the DVOMB Approved Provider List do not meet the requirements set forth in 16-11.8-104, C.R.S.

IV. CONSIDERATIONS AND FACTORS FOR CLIENT AMENABILITY TO TELETHERAPY

The provision of services via teletherapy is considered to be a privilege that is intended to promote risk-reduction strategies and engagement in the therapeutic process for the client. If the use of teletherapy presents any unresolved concern(s) related to the safety of a victim, the client's compliance with the treatment contract or their overall amenability, the Approved Provider shall document such reasons and determine if face-to-face services are more appropriate. Offenders may be subject to additional monitoring as a result of being allowed to engage in domestic violence offender treatment via teletherapy.

In assessing if teletherapy would be an effective and appropriate modality for a client, the Approved Provider shall consider and mutually assess the following appropriateness criteria in the overall case conceptualization. Approved Providers shall utilize their best clinical judgement in consideration of these factors to determine the client's readiness and appropriateness for teletherapy. Such recommendations may include but are not limited to teletherapy only, teletherapy with some frequency of face-to-face services, time-limited teletherapy services, and face-to-face services only. Teletherapy may also be utilized as an incentive for clients who progress in treatment and demonstrate readiness for teletherapy that may not have been suitable at the start of treatment. In some cases, teletherapy may be an appropriate modality to meet the individual needs of the client.

Discussion Point: *It is not a requirement that all appropriateness criteria be met, but that the Provider has assessed for and considered all of these contributing factors as part of the treatment planning process. For example, if a client's risk and criminogenic needs are high, but their stability in treatment*

is enhanced by attending sessions via teletherapy in order to not disrupt employment, teletherapy can be recommended.

Appropriate and Readiness Criteria for Teletherapy are factors that serve as reasons as to why a client would benefit from teletherapy. Those who may be considered for teletherapy include any combination of the following:

- i. Clients who do not have any of the following risk factors on the DVRNA:
 1. Prior conviction of domestic violence (A1).
 2. Substance abuse/dependence (B1) or illegal drug use (B3)
 3. In need of mental health evaluation (C7)
 4. Offender was on community supervision at the time of the offense (F1)
 5. Explicit domestic violence attitudes (J1)
 6. Any prior domestic violence offender treatment (K)
- ii. Clients who are not assessed as having high criminogenic needs (e.g. LSI score) or procriminal pathologies suggestive that teletherapy **CAN PROVIDE** adequate containment.
- iii. Clients with physical disabilities that affect their mobility, mild developmental disabilities, or mild cognitive impairments that affect their participation **FOR IN-PERSON** group settings.
- iv. Clients who lack access to reliable private or public transportation which serves as an impediment to their ability to engage in treatment. This includes clients who reside in underserved areas where an Approved Provider may not be available for **IN-PERSON** services otherwise.
- v. Clients whose primary and secondary language is a language other than English which requires an Approved Provider who may be at a distance and is fluent in that language.

- vi. Clients who are progressing in treatment (good attendance, engagement, etc.) and whose engagement would be enhanced through teletherapy.
- vii. Clients who present in a preparation stage of change, who is participating in treatment, exhibits a high level of accountability.
- viii. Clients who exhibit behavior that is conducive of group culture, boundaries, and norms.
- ix. Client who are able to navigate technology and can effectively participate via teletherapy (e.g., failing to login on time, requires ongoing technical assistance, does not use camera, etc.).
- x. Clients who have the adequate equipment (e.g., internet, computer) and physical space to confidentially engage in sessions.

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