

## **Meeting Recording**

January 22, 2026,

**AI-generated content may be incorrect**

It's OK. I guess I'm gonna call the meeting to order. Then it is.

1:37.

On January 22nd, 2026.. This is the juvenile subcommittee, the juvenile Guidelines and standards of committee.

Component of the Arizona sex Offender Management program.

My name is Scott Naegele, the chair of this subcommittee.

But we're here today and I guess I just wanted to take some time.

I mean, I know we all know each other, but I think taking a little bit of time maybe to talk about maybe path that we've all taken to get here might prove to be helpful to each other in understanding kind of where we come from, what we.

Bring to the process.

This and.

Maybe some hopes that we have with respect to larger process.

All right, Sir.

Please roll call.

Oh, Scott Naegele President.

Blake Barney present?

Beth Goulden present.

Ben Galarneau present.

Melania Opheim present.

Also present are staff Jenna Mitchell.

Ashlesha Naik

And Victoria Baldner council.

For a large board and also for your subcommittee.

In reflecting on today's meeting.

I took.

I took a moment.

Maybe for the first time in a long time to think about how, how did I get here? And while I want to profess that it was an accident.

It may have been an accident temporarily, but.

But the first time I started making more.

Informed, intended decisions, but I was working at a residential treatment center in South Phoenix called the new foundation at the time.

And this was about 1987 86 87 and as time passed we kept getting more and more referrals for young boys who had acted out sexually committed some sort of sexual perpetration against.

You know, either somebody in the community or a family member.

And the psychologist at the present at the time.

Why isn't saying if we're gonna continue to take these kids?

We probably should start to think a little bit more systematically about how we're gonna work with them and how we're gonna intervene with them in ways that are consistent with why they're here.

The the problem at that time was is there literally was no formal program in the state of Arizona for treating juveniles with these kinds of issues.

That predated any of residential programs that came on later.

So it was.

In a staff meeting with the psychologist said anybody interested in working on this with with me on this and for some reason my little old hand went up and said I will.

That was the beginning of process for me.

I was still a bachelor's level person at that point, decided to go to Graduate School with the encouragement of some of my my supervisors and program people.

While working on my master's degree at a job working at CASA, the Center against sexual abuse and I was a therapist for victims. And at that time CASA was also treating young boys who had these issues as well.

Again, there were no treatment programs in the state of Arizona at that time.

So because I had all of that experience from my one residential job, I became the person that got assigned to working with 357 adolescent boys.

One decision led to another by 1995 I took a job working full time at a residential treatment center called Arizona Youth Associates, where I got hired to be the lead therapist within six months.

The director had moved on and I got appointed to be the director of the program and I worked at that program for 1995 to 2001.

And then moved on to another program where I got hired to be the director of training.

Place an, a new leaf previously known as Prehab of Arizona, and I worked there.

In varying capacities, working with kids with these issues and families with these issues until about 2006, and they're recruited by a wise man called Tom Selby at a family transitions to work with them and started to work with young adult offenders.

18 to 24 year old young man who had offended or misbehaved sexually and quickly had a big case load of those guys.

Started to do evaluations in about 2010.

As soon as I said yes, instead of saying no for the years that I had said no, they came hurling at me like a hurricane, and my practice has evolved to the point where.

Out 3/4 of what I do is pre sentence psycho sexual risk assessments.

Both with juveniles and with adults, men and women, and about 25% of what I do at this point in time is treatment services for handful of juveniles in an outlying county, and I have three to five non probation involved clients at any given time we present with.

Types of sexual misconduct problems.

This board started the rumblings of this board beginning to be formed to happen and.

I asked by Beth to be part of that and said yes, and here I am.

So that's my journey in a nutshell.

So Blake, Barney.

I guess my journey is a lot shorter because I'm a lot younger.

True lot.

I gotta.

I gotta throw some humor in there.

So probably the first thing that brought me to the idea of.

juvenile offenders was actually what brought me to Arizona, and that's residential treatment with adolescent girls.

11 to 17 and I was the resident substance abuse counselor. But all the girls that had the worst substance abuse issues had been victims of sexual abuse.

I kinda had.

Preconceived idea that it was relatives.

It was probably neighbors.

It was this multiple times that his brother's cousins who were around the same age but knew way more, took advantage of them. And I saw that the really bad side from the victim standpoint.

And worked with the girls there for two years. And then.

For whatever reason, ended up out of the prison in Florence.

Started working with offenders but.

For most of the time it was mental health specific because I wasn't there in capacity, but there were conversations that came up as part of the mental health. And then I met Doctor Gray out there.

Him and I had some conversations.

Eventually I went to go work at PCS part time left the prison in 2018.

I went to PCS full time.

Eventually became the clinical director. There was doing assessments and following up on a lot of different people, but one of the.

Populations that I got that nobody else ever was working with were the juveniles. These kids who were 14 15 and then I took over the youth offender group when the therapist that was there left they took over the youth offender group.

So yeah, more knowledge that way.

Eventually I left PCS open my own place, and I continued to work with problematic sexual behaviors.

Not everybody is on probation.

Block pretrial guys.

Him and I have multiple clients that we share.

And I have a desire to.

Treat instead of incarcerate.

So the rehabilitation side is very important for me.

I'm hoping with this subcommittee that we can, as I was saying earlier, provide logic where most things are based off of emotion, emotion, and. It's natural state is irrational and so a lot of the things we do are more irrational and not real logic.

So I'm hoping to provide logic that will benefit everybody in the community.

Get to go about 3.

To go.

I'll go.

You want to go? I'll go.

I started with Maricopa County adult probation when I was 18 years old.

I was recruited by my relatives that worked for probation and they wanted to know if I wanted an office job during college.

So I was in college and I took an office job there and then.

Loved it so much.

I was in college working full time in my college job.

Was, umm promoted from like doing receptionist duties while in college to umm becoming a it was Screener at the time so I worked with the pre sentence writers and my job during college was to go to the jail to interview.

All of the people pending sentencing, so they had either taken a plea or they been found guilty so.

I went to the jails.

I always tell people I learned way more.

By doing that job, when I ever did in college.

But I did that.

It was really eye opening and not a lot of the people doing my job wanted to.

Interview those who had been either convicted or took pleas for less crimes, and I always loved the psychology of it was a psych major for a little while before I switched.

And so those cases interested in me interested me more. And I worked with a writer at the time who also specialized and had many years of field experience supervising individuals on on sex and probation.

So I kind of worked hand in hand with.

Graduated from college.

Promoted again to become a probation officer.

And I was given and asked for a sex interview, so that was the only piece that I had as an officer.

I worked as an officer ready to college with sex in our caseload.

Was handed 65,000 probation for either rape. You guys know. So just whatever sex crime I did that for.

Four or five years promoted again into management.

Back to pre sentence for a couple years.

Wanted to go back to. The sex offender Division requested that transfer transferred back to.

That the Sex offender division where I stayed for about 14 years and all my officers supervised sex spares on probation and I had a unit of intensive probation officers.

So the guys were on intensive probation, standard probation. I was in charge of the housing coordinator worked policies. Did all the trainings. I worked on.

Manage the search experience that we brought to Arizona.

So I managed that during my time.

Wrote the early termination protocol for Maricopa County.

I was asked to do that with with a committee, including judges that were on that committee.

What else?

I just and then and I retired.

So to do some some fun stuff because I wanted to do I I worked my entire adult life at probation and I felt like.

I wanted to do more.

I outlived the department and I thought I could offer.

Different things. So I retired, even though I love that job so much that I care.

I'll skip the legislative work.

Fun. There you go.

Got to work on this Board, so I'm very honored,

yes.

Ben Galarneau so after leaving the Marine Corp, I decided I wanted to learn more about people and some of the things that I saw. So I decided to come.

So do a as part of my honors requirement and do research.

So I just kind of randomly picked the professor off the board at at openings and it was Doctor Drew Becker.

Who specializes in sex offenders.

We did path that which you enable and so I started going to juvenile courts and going through juvenile sex offender files and reading all of these.

Sound crazy?

And so I did that for few years.

She's my mentor there. When she when I was getting ready to graduate, she was appointed as the consultant at the ACPTC. The adult Civil Commitment Center for sex offenders. And she said, hey, you want a job?

I said yeah, sure. I want to become a clinical psychologist.

I was kind of the focus.

And so I went there and they treated me to enable screenings. And, you know, his brass. I was doing some counseling, and I did all of the screening for the first couple years of the program.

Attending asu at the same time, the Master of Social work and then went left to do some CPRS work because I had to pay them back for the money they gave me while I was getting my MSW.

But I was still interning at at PCS and Doctor Gray's place doing groups and in Group one day somebody brought in a polygraph.

And I've been a group for about 6 months and I heard this guy who just presented his the best group member, all all the rules, doing everything right. And I started reading through the polygraph and I'm like, you're doing all this stuff. I've been in this.

Group for, you know quite a while and you haven't seen any of this stuff.

How long is this polygraph? It's about an hour.

So you brought us up in an hour and a half, and every week you're surrounded by people.

You have a therapist and you said nothing.

He's like, yeah, you know, I don't know, blah, blah, blah.

So I said, well, this is kind of cool.

I don't know what it is.

So in the polygraph school, Western University and I never want to become a polygraph. I didn't want to do it.

I didn't want to do my job.

I was young, motivated, had some energy, had had a little time, so I went out there with the polygraph school, came back from Doctor Gray's wife, Sandy Gray, like interned with said, hey, you want to start doing some?

Yeah, sure.

So I started doing some of those and it turned into a fulltime job in like a month.

And that was 23 years ago and 20,000 polygraphs ago.

What year was that?

That was 2002, OK.

I was right around the time when you were in, so I I established my own place AFA.

It's in Mesa and where the world in polygraphs and book these graphs enable screens doing objective sexual offenders for a while. Right now, though, they're pretty much exclusively just polygraphs.

So, but you know, 20,000 polygraphs later have worked all over state.

And of those probably 3500 to 5000 of those have been juvenile polygraphs.

So I've seen this process.

You know, I've I've been involved with most of the players in the stage, all the counties.

Role.

Private counseling and I and I've and I've kinda, you know, I I have. I've had my my fingers on the pulse of kind of what's been going on.

So I'm glad to kind of be here, have a chance to introduce polygraph.

Really introduce it because a lot of people have made their decisions that don't want to use it, don't have a lot of experience involved in their their base and their opinions on stories.

Things I've heard episodes of CSI, so I'm hoping we can kind of get everybody realistic looking into real positive because with everything I've done and using the polygraph of juveniles now I think it was the best treatment supervision tool we had and most of you probably know.

In about 2018, some people came in and evaluated the the Juvenile justice program.

Here it basically did away with polygraphs.

We can still technically do them, but the requirement so extensive prohibitive you look at it and therapist, but I'm not going for all this. You know you need court orders.

The kid can't be diagnosed with anything.

It's almost impossible to do a polygraph, so they basically went away with 2020s probably.

So that's what I hope to do.

Gather some information. Give people.

A.

Of a real, thorough chance to make a good foundation of what the polygraphs is and wanted to do.

Excellent.

My name is Melanie Opheim.

I don't know a lot of people in the room.

I just kind of seem like you run in the same circles for a while, but I am solely juvenile. I started.

I actually was going to school in Utah when I worked at the Utah State Hospital as a bachelor's level intern with the sex Offender Juvenile Unit.

Serves served for my church for a couple years in Brazil.

After that and when I got back, I had A I had to the paper at the time.

And saw a couple starting a company, the Development Institute.

So I went more for the choruses because because I had experienced before they kind of were like a shoo in.

So I worked for them for about 7 years when I was a day one staff with with Development Institute. We moved from the small place in Mesa to the large places now in Phoenix.

I saw a lot of issues with the bigger model. It was kind of hard for me.

I was a therapist.

I did.

I did start doing therapy pretty quick.

I was getting my masters at ASU. But the AOC gave me a. What they what? They thought a waiver.

So I my first year into school, I was able to start doing groups and I kind of fell in love with the SMB kids.

So you know, I'm doing my notes in class after school. And you know my friends are working at Olive Garden.

I kind of felt like, OK, I got this.

It's 26 and starting my therapy stuff so.

So do that for them for about 7-8 years.

Clinical director at one point for them.

2003 I went and left.

I saw a huge need for kids leaving the residential going home.

We had a lot of kids going straight from a level one, which is what that was called at the time straight to home, and there was not a lot of, I mean going from 24/7 staff to then expecting parents to watch kids 24/7 was.

A big expectation. So I opened a house.

I tried to hire a teacher.

Then I realized keeps going to charge way too much.

And it was going to be too hard to do.

And so I said, OK, then my kids are the ones that are going to the community.

So I became A level two group home now known as a PHRF.

And I got a lot of business that way at the beginning because I was a step down from the prehabs from the YD is Park Place of several in town that were larger and more secure.

And it was a nice little process that send them, send them to us when they need to practice before they go home.

That kind of dried up the funding sources didn't like.

And he stepped down.

They just don't straight from ydi out into the homes.

I opened in 2003.

Also I got the AOC contract.

I'm probably I pretty much kind of went on faith for eight months 'cause. I bought a house and didn't hardly have a job and just hoping that I'd get that contract 'cause. It's only open every five years.

So I did in 2003 or 2004, I got my contract.

I got my first kids. I was.

I was full immediately, within four or five months just because a lot of probation officers had known me as a therapist.

And so we filled up.

And we had a waiting list.

And so I was talking to opening a second home.

2008 we got a second home.

It was burnt down. It was.

It was an arson.

Fire. It was all over the news when they Super Bowl was here, in between the Super Bowl, there was a three alarm fire and it was my group home.

So the neighbors did not want us there, so I've had to deal with unit fee, community and and expectations we rebuilt.

So I've had my second group home and then since then I've had. I had an DCS group home.

I got rid of a DCS group home.

And then I have just recently opened another one.

Last five years only because a lot of my therapeutic home kids have nowhere to go. Once victims are involved, once therapists don't.

Once the the families don't get their children work, you know the work isn't done for the victims. Then a lot of times I I say I kind of got an orphanage on my hand.

I have a lot of kids that have nowhere to go and they're 1615, so we open the DCS house.

And then again, we sold that one and then I patched open it again because.

Really, I'm not a big fan of the DCS houses. My kids have gone to the last couple years.

It's probably a place to talk about it, but there's a new DCS program, a federal level home.

But it is.

It's not very quality, so we don't like our kids going to go those homes.

We don't like doing really great work for a year, year and a half and then sending to places where they're not taken care of.

So the RVCS house is well equipped.

They all go to therapy together.

Which doesn't happen a lot of the DC SSNB houses in the meantime.

We all started an outpatient clinic.

The Doctor Who does our evaluations and assessments, but we see about 200 kids all over the valley.

Not just SMB, but general mental health victims.

Now we see the Littles.

And then of course, substance abuse when they actually get referred.

So we got about 25 therapists that go all over, a lot of us in home.

We've got offices in Glendale and then six different offices in Mesa in one one building.

So yeah, I'm excited to be on this.

I was actually part of the.

Legislation now I was trying to think dates get up by dates, but years ago when they talked about the adult transfer youth.

And so I was.

I was proud to be part of that at the time. It was like kids could get put on, you know, be charged as an adult and never see a judge again.

So I I was a big advocate for, you know, kids can change.

Let's get them in front of judges.

Let's you know, get these things taken away before they're 30.

You know, it was really hard.

I've had a lot of kids that registered as juveniles.

That we say like, oh, it just means that the office knows your address, but it's not a whole lot else that's gonna happen.

But I've had lots of kids come to me like me and my girlfriend and my baby. Just gotta evicted. The owner. Just found out. And you guys have a lot of these stories.

But yeah, working with juveniles I've said I'm probably not a special enough person to work with victims.

We're adult offenders, but I kind of found my niche with the juveniles and it's it's worked out so.

Myself, I'd like to have the colleagues I'm kind of in my own little world, so it's nice when I come and see some of the bigger issues.

TCS and juvenile justice right now are are kind of the biggest.

I mean, we have some some bigger issues that are just.

How we do things but kind of working with a lot of the different systems, so I realize I'm not just a therapist or supervisor or therapist. I kind of have to play the bigger model sometimes too, not when I really plan to do.

So how many? That gives those of us that are sitting here a little bit better sense for the past that we've all taken to get here to be part of this process.

I recognize and I'll say out loud. This is Scott Naegle I just to be clear, I recognize that there's a whole bunch of this that I don't. I don't.

I don't have a path forward here, and I think that that's part of what I want us to talk about today. But before we do that, I want to try to have a discussion about the frequency of of the Subcommittee meetings and do our best to level best.

To try to identify a day or days that work most effectively for the the majority of the people in here, I also recognize from my own experiences of the larger committee that.

Everybody has.

Time constraints and everybody has days that work better and we're probably not gonna find a great day for everybody, but.

I I hope that we can all try to do our best to try to find a day that works consistently and and move forward with that.

I I'd like to propose, and I'd like others input that.

That we continue to do the meetings face to face.

I as a therapist.

Recognize the vast difference between sitting with my clients and my families?

And perhaps this is a?

A symbolic family that's being forged here in this room that things are not the same when you try to do stuff virtually or over a telephone as they are when you're sitting in the same room and in the presence of each other.

That's not to say that things can't get done in those other formats, but but I I don't.

I don't think they're equal, so I put that out to to everybody and and ask anybody who cares to comment on that.

Is there?

Is there anyone that disagrees with the necessity of trying to do it?

Face to face.

OK please.

Victoria Baldner Council from the board.

It's a perfect segue to something that I wanted to bring up.

I maintain that I need to be at the big board meetings every time.

I don't necessarily think I'll be particularly valuable in this setting after today, but.

My proposal is that I make sure I'm not double booked on the dates that you all get together.

And I will make sure I'm available by phone.

If I'm at the AG's office, I'm 7 minutes away from doing this thing.

So if I had to, you know, if I had to come over assuming, you know, we're here, I'm very close.

That was just my thought, and I certainly don't.

I don't want my schedule to cause an issue with your schedule because your schedule's more important.

That was just I wanted to come and see everybody today and just throw that out there like.

Even if I'm not with you in the room.

No, I don't think it's gonna be that big deal different than the the main board though.

And certainly you'd be allowed to go into executive session with me on the phone.

I wouldn't need to physically be here.

But again, we don't know. We don't know.

And I don't.

I don't know when you're gonna need legal advice.

Honestly, this is the subcommittees are like the specialists and the people who wanna talk about changing the law.

And so.

I mean, it's hard for me to admit it, but I don't think you're really going to be.

I will be available.

So this is Scott Naegele and I will just ask a question because I'm still trying to familiarize myself with the rules and the protocol here.

I ask this question, I assume we could.

We could make it a virtual optional but with the hope and the expectation that everybody try to do their best to come in person on whatever day that we identify is that is it.

Is it OK to do that?

That's a question.

Yes, we can accommodate that.

So then then I then I, then I suggested would be you allow for that to be the case, because there will be times where I'm sure that it's something unforeseen comes up that somebody might not be able to get their body here, right.

They still could find a way to be present for a virtual meeting, and you do have a much smaller group and your quorum. You gotta have three people.

Available or you can't have a meeting.

No, you should not have a meeting and certainly anything you decide is null and void if you don't have a quorum.

So.

I don't know.

You know, maybe it it'll be easier to get three out of five.

I guess that's to be determined.

See then 17 out of 32.

We've been doing fine with the big board, but yeah, I suspect it will be easier to mathematically. Yeah. So I mean that that would be my suggestion that that's OK as long as we kind of collectively have an understanding that, you know, we're gonna do our level best.

To be present physically so that we can all be together and and dialogue around these issues.

So then the next question is trying to pick a day.

I've I've already articulated in a larger process and I understand how it couldn't be accommodated that Mondays and Fridays are absolutely. Absolutely horrific for me because frankly, they are the day that the Maricopa County Sheriff's Office has bestowed upon us that room to do testing for in custody guys. And those are the only two days of the week that they allow for us to do that is on Monday.

And Fridays, we can negotiate with evaluators to do Rule 11 evaluations to have another day. But let it suffice to say that what's involved in that is.

Unintended so Mondays and Fridays are horrific.

For me, I just put that out there.

This this is a it's a hope that you don't take a Monday or Friday.

Thoughts for others?

Ben Galarneau that I get kind of thrown off the idea of doing this the same day we did the big board meeting, but I think Blake said that was gonna be too much.

Is anybody? Does that sound good to anybody?

So just make a day of it. Since we're here to do ours and then do the bigger one.

Well, Scott Naegele, the the issue there is, is I'm going to be fortunate if I can get to every other larger board meeting.

So to try to stack this on the same day that we're, we're also present at the larger board meeting.

Isn't going to be possible for me.

Ben Galarneau on that note and I Wednesdays Wednesday is a very good day for me.

But what other days?

Thursdays are probably the best day for me.

Melanie Opheim

Thursday is probably my best day.

Wednesday would also work.

I would only suggest that maybe we have our meeting a week before the other meeting. If we start kind of nailing stuff down, then we wanna present to the bigger meeting. Even if you can't go, if we're working on something one week, then it goes the next Monday.

Or Friday, if those are going to continue on those days, making it a little more fresh instead of, I mean, this week, this one was the week after, but maybe we meet the week before the meeting.

So that then we're showing up with information.

Comes down to that eventually.

Scott Naegele question when when is the next larger board meeting Jenna Mitchell?

It is February 23rd Monday, February 23rd.

So then I asked a question of the group.

Is it possible for those sitting in the room to be able to come to the next subcommittee meeting on Thursday, February 19th?

Melanie Opheim. Yes.

Blake Barney? Yeah.

Ben Galarneau, I believe you know.

I'll check my schedule once we have the days outlined.

I can be at everyone from here to.

It's just a matter of moving clients.

Maybe they're ready depending there, but as long as it gives us notice and we keep that schedule and we don't change it much, I could.

So Scott Naegle.

How about if I do this?

How about if I make sure that I'm clear about when all the the dates that are already scheduled for the larger committee?

But I look at those.

And identify where they sit in the month and I try to find days. Thursdays that are the week prior to those meetings and forward.

An e-mail to to to Jenna with respect to those days, to see if we can make those days work.

Does that? Does that sound like a reasonable proposal?

Jenna Mitchell

We do have them posted on the website, I just don't have them in my heads, you know.

So if you don't, if you don't mind me getting a chance to because I too have to do what Ben is doing, even though Thursday is the best day for me, that doesn't mean that I don't already have stuff on the schedule on Thursdays that I might have.

To move as well, so if it's OK with the group, I'll look closely at the at the dates that are already posted for the larger for the larger committee and and seek to identify a Thursday.

It's the week or before the those meetings.

And get all those dates to Jen Mitchell and we can try to go from there.

That sound reasonable? Yeah. So, Blake, Barney, one thing I'd like to say is, if we do the hybrid with the encouragement of everybody being in person, I think that makes it a little bit more accommodating for if something significant comes up or there's, you know, major kind.

Whatever the other thing is, if we have a rough idea of.

The length of our meetings, if they're gonna be, you know, two hours Max.

OK, we know from 1:30 to 3:30, we're unavailable, and then we can figure out our schedule after that.

That also helps.

So maybe that's one of the things that we can also, you know think about is much smaller group. We can get a lot more done in a very short in a

much shorter period of time.

What is it that we feel like is reasonable amount of time that's sufficient for us to talk about everything we need to talk about. Because I think that's the other side of it, is how much of this is going to take up our schedule so that we can open up other parts of our schedule or no, OK, this block of time is just not going to happen.

Scott Naegele that that's a fair request. I I think we can have a discussion right now about that, if if if everybody's amenable to that, I mean.

My personal thought is is I don't see it having to be more than two.

Hours, I think.

Like I think we can get done, but we need to get done in two hours now.

What else is on the agenda is to have a discussion about, you know, beginning to brainstorm some ideas about what we do wanna focus on and how we go about.

Calling the universe for information regarding a variety of things, and then what has to happen in between meetings and who has to do that.

To to make two hours meaningful.

Period of time, but I don't think they have to be any more than two hours unless somebody says otherwise.

I agree, but I move fast.

So I can get a lot done in two hours.

Yeah, not used to. Never went meeting or legislation.

So I am all aboard with like bullets and moving and talking and so I think we get a lot done.

Focus in two hours. Why say we just say that the meetings will be more than two hours?

They could be less than that if that's. If we don't, we don't have issues that we have to take the time to.

To do that.

So we've nailed down a possible day possible length of meeting.

Try to do it a week prior to the larger meeting.

That that sounds really good planning to.

Jenna Mitchell

Location and morning or afternoon would be helpful for me for you to discuss.

Ben Galarneau I like afternoons.

I like, I mean, I don't know what what our options are, but this, this works in the afternoon.

Like Blake Barney

Sorry.

Yeah, afternoons were a little bit better. 1:30 works.

It's in the middle of the day, but it gives me the opportunity to kind of shuffle some things to either be in the morning or a little bit later in the afternoon.

Melanie Opheim also works for me. 1:30 to 3:30. I don't know where everybody lives.

This is not far, but I don't know if we have to be official. It'd be someplace where there could be the recordings and things, and this is probably the best case scenario.

Sounds like afternoon works for majority of people.

That's good with me as well.

Talk about regarding on location. We can continue to book this room if you like this room and you like this location. Parking is easy access, but public is here.

We know they've been screened, so it's nice venue from that standpoint.

So it works for me, yeah.

Moving on on the agenda.

And and just so people can hear me say this out loud when the request came through agenda items, I literally sat with myself and brainstormed all kinds of things I thought were potentially important for us to talk about.

I don't have any parameters built around any of the things that I suggested, but the the next item is the discussion of issues to be included in the juvenile guidelines.

So I I I'd like to just take, you know, a few minutes for us all to kind of.

Chime in and perhaps comment aloud on things that we recognize that are areas needing some attention and focus.

And maybe begin to make a list of those things.

I'll start with Blake Barney.

Yeah. So one of the things that from the adult side and juvenile side is.

The systems that are in place are creating additional victims.

Through the process, from my perspective, in my opinion.

And so one of the things I would like to address or work through is coming up with ways that.

We can have systems in place that are not victimizing perpetrators, families any more so than they're already being victimized by the system and the processes that are in place, because if we're truly doing victim work, which I believe all of this in the in the grand scheme is.

To help.

Reduce and eliminate victims.

The families are also victims of.

The behaviors of of the family member.

And system the systems that are in place are not doing anything to help them. There's no programs.

There's no good conversations with the family.

There's no, you know, very clear.

This is what to expect.

This is how it's going to be.

From there, on probation and they cannot be around any minors.

So here's what it looks like if they're living in this house, no other minors can be here. If they're going to live in grandma's, no minor can ever go to Grandma's but none of that is really discussed with them until day one when it's. Oh, yeah. So now turn your whole life upside down because of something that your child.

And to me, that's problematic, because now we're victimizing the family.

In an attempt to prevent victims.

So that's one of the several things that I would like to to work through. The other thing I again I push for, rehabilitate over incarcerate.

And it feels like Arizona is very much incarcerated over rehabilitate.

So that's another thing I would like to look at, especially from a juvenile perspective.

There's so many opportunities for them to turn a corner based off of learning.

Victim empathy.

Gaining sexual knowledge that they are so curious and they're trying to understand themselves or.

Something that.

Will, based off of evidence, evidence based research.

Is incredibly productive in preventing reoffenses.

Throwing them in a jail cell or having them in a detention center or going to prison is not preventing them from creating new victims. It's keeping them out of the community until they go back, and then it's like now we're starting from square one. I feel like that.

Another thing that I would like to see.

Is we can provide evidence based research for the legislature and this is what evidence shows that would be effective in keeping kids in jail cells is so whether that be group homes.

Or other areas that we can have them that are not being confined.

Nobody benefits from it 3 1/2 years in the prison system, I didn't see a single guy benefit from being locked up.

So.

That's kind of my thoughts on it at this.

Melanie Opheim.

I probably have some not different views 'cause I absolutely believe in rehabilitation and treatment and and evidence based focus. But in the last probably two to three years and again we might have different experiences depending on who we're working with, but they are, I have a sleuth of.

Kids that I'm aware of, especially in these DCS QRTP homes that are absolutely in need of.

Sex, you know, sex offender, if you will.

Or or, you know, sexually abusive behavior treatment and are not getting it. And they're not even going to the system.

So I'm actually seeing the opposite and I'm not saying they should arrest kids more, but we were skipping.

I have some, you know, some some friends that are the the attorneys, the county attorneys.

But they're kind of skipping the psychological the assessment.

They're skipping this whole piece.

They're deciding how it just happened one time.

We're done.

And no polygraphs, nobody else involved.

Then probation's not even involved.

Then there's no funding, and then it's just a kid at home with his victim, and he's promised to be good, and maybe he'll do outpatient treatment for six months.

So I'm seeing a lot of the opposite. My houses that have always been full. I've always been a preferred provider in town.

There's not that many of us.

It's not that big a claim to fame.

But we've had a lot of empty beds and when I talked to the AOC director, he's like, no, no way.

But they're not coming to me and they're going to these DCS homes and with the with the shedding of SEF, the Southeast facility and then Durango has a new director.

For the last five years is like you don't get in if you know you wish.

Thou shalt thou pass kind of thing.

There's an 8 point system.

I had a kid grab a nurse breath, shut the door and try to assault her in my home.

It was an our nurse, but when we called the cops, they said sorry. I'm not taking him.

It's only two out of eight points.

They'll never take him at detention.

So there's a lot of things that are going unnoticed, unknown, but I'm seeing kids and when I hear these kind of frenemies of mine that are running these DCS group homes mostly for the money.

They're freaking out because they are now the new detention. There are kids that are never going to juvenile justice.

Never seen a judge?

Never see a probation officer.

And again, I'm not saying it's for every kid. And and that's part can be problematic. But I think like you're talking about giving it to a family and some of these other models.

I know Colorado has a big, you know, family model, and there's a case manager already on board for the victims.

There's probably a lot of better ways you can do it holistically around the whole family, but just skipping the whole juvenile justice system is not working for us.

Scott Naegele a question for you, so I think I hear you saying that there are some real procedural problems and some real dispositional problems

with the way which kids are going through the adjudication process and which kids aren't that are manifesting themselves in a whole bunch of different issues.

That you very well articulated, but there's something about procedural issues.

In the absence of anything that even remotely resembles an upfront assessment to try to make those decisions, somebody is just accepting on faith that we know kid X did this, and that's all he did.

And I and and I, I respectfully say for the record, I don't how anybody could know that including myself.

Based on just a paper review of a case, I don't think anybody can know that, so I I I I'm hearing you correctly.

I I that is a problem.

Melanie Opheim, you are hearing me correctly and it's ugly. And I I don't even know who assigned me or recommended me to this committee, but I saw it as like an answer because it's been very frustrating the last three or four years either with the DCS system with.

The juvenile justice system.

And I have good relationships with people.

Minus DCS, I don't. But with juvenile justice system, I'm talking and.

I don't think people know the problem, but I'm all about and I never thought I'd be in a position that maybe laws could change over procedural things could change it, but I'm trying not to be too hopeful.

But I'm pretty excited 'cause it's getting. It's. I'm getting to be like I'll be opening a flower shop next year.

It's getting ugly.

Scott Naegele.

Another comment about that I think.

I think the problem yet seems that's going to come out of what you're describing is.

A whole lot of kids that are still kids.

Are going to re offend and then depending on how old they are, they're either going to be moved to the adult system or they're going to be be detained because somebody is going to determine that they had already been given an opportunity for intervention and it failed when.

In reality, they were not even assessed for the type of care that that they ended up getting.

And whether or not they needed some higher level of care as a as a first intervention.

I mean, this stuff isn't going to show up.

For for some years, in terms of enough numbers for anybody to be concerned about it. But it's almost predictable.

And it's predictable, almost predictable to me.

And I think that others who know these issues would say the same thing.

So there are there are issues with with what you're describing for sure.

Now I'm going to go one step further and say.

Have there been historical issues where we've?

Delivered.

Extreme levels of intervention for some kids, yes, there are.

And if that, and this is if, if this is the reaction to that.

Then I say let's try to do something about that rather than having a sweeping policy change where we're we're not doing anything really to effectively evaluate what this kid and what this family need.

If all that's being done is a look at the police reports in a in a paper review.

Again, I don't wanna be beat the horse, but I don't how anybody could know that.

What this?

What this kid needs and what this family needs, if that's all that's going on.

Melanie Opheim.

Yeah, the the attorneys that we met with several years ago, it was in a big forum probation.

Was their treatment providers were there and they had started a post dismissal agreement.

So it was one of those where again, no doctor, no evaluator was involved.

They were trusting the police report.

They were talking to Katie, said one time. One person and they kept I.

I was arguing we're not gonna take these kids anymore, and the attorneys kept saying, well, how do you even have them at your group home?

Well, because they started outpatient and then they had 15 victims. And so then my my therapist was like, I'm not seeing them.

They're living with their their victims.

They got three other cousins in the next room.

They got to go inpatient until we figure this out.

So they were kind of like, oh, we didn't think of so. So they've kind of.

Again, I go based on the AOC 'cause. That's my biggest contract, but there is so much emphasis on how to do an evaluation. What words you can say?

How do you how do you psychologically assume and and I'm not even gonna polygraph yet, but how do you help determine where a kid needs to go? And we're all about putting them in the 1st place first. If he needs to go high level of care and then.

Move down. Great, but don't put him in outpatient.

Then he fails and he comes to me and then he fails and he has to go up. They feel like a failure.

It it's the wrong direction and I'm not about locking kids up, but a good evaluation from Scott or others in town tells us where the kid needs to go initially and when they skip that process, I'm telling you.

It it's like.

I have a defense attorney's like six months is up.

Next Tuesday, he'll be leaving your group home and and we found out four new victims and have done no work on himself and his own trauma. And we're having to watch again. Walk out the door with no nothing. There's just nothing.

It's been and with all due respect, this is Scott Naegle again.

That that doesn't do right by the kid and their family because that's that's that's essentially setting the kid up.

I mean, I I don't want kids rights to be trampled on at all.

I don't want that any more than anybody else.

Also does, but I don't want the decisions that we're making from a procedural and dispositional standpoint to end up.

The kid end up becoming.

Bears the consequences of improper decisions that were made that could have been made differently in the first place.

Melanie Opheim, this might be a good time for somebody to say that. Also taken away was the the juvenile polygraphers or, you know the polygraphs and that besides the fact that we absolutely use them as a clinical tool besides the fact that historically they might have been used. Punitively.

By probation specifically, or maybe by a provider. Given all that the the benefits definitely outweigh the costs. And one of the things that kinda goes along with what we're talking about helping the actual family.

I believe that me and the the clinicians that I have have a wealth of knowledge, years and years of experience with the clinicians that I have and

it was offensive to be told.

You know it's mean to make a kid take a polygraph and it's it's punitive and it's, you know, and I'm thinking, will you court order him to my place?

It's also not that it's also very coercive.

So I again, I'm doing it for the kid.

And then when the kids say I want to take a polygraph in the family says I want to know if my other four kids are victims when they took that away. I absolutely agree.

I don't like being accused of not liking kids or wanting to be mean or punitive or coercive.

I like to think that we like them better than you because we're trying to help them in the long run, so they're not in adult systems in three years, you know.

It gets very I just kind of like don't.

Aren't we supposed to be the ones that kind of know? Just trust us.

And again, I just can't have a lot of systems moving around that are making our jobs very hard.

We're trying to keep kids safe and the kids are not coming as any less traumatized, any less deviant.

I mean, there is a lot of I mean given the the technology it's it's a whole new world and we've talked about that.

It's just a whole new world of offenders and what they possibly can do and the sexual deviance, or just the the misguided sexual stuff with kids it it's like we need more help instead of having our hands tied, you know?

Yeah, Scott Naegele again regarding the.

The largely elimination of the use of polygraph with with juvenile clients.

My hope is this because I don't think it happened when the decision for it to be removed.

In the run up to the decision for it to be removed, I don't think that it was a was an honorable and fully vetted process.

I don't think that the decision was based on actual, real world experiences of having used the polygraph for for 25 plus years in practice.

I think it was based on a bunch of horror stories.

Is about about about the ills of polygraph, and they weren't experiences that.

That, that, that, wherever part of my process and I don't think the vast majority of the people who've done the work in the time that I've been doing the work either.

So I don't know what they were founded on and I found frankly some of the process in the run up to that to be obstructionist in, in, in not giving a whole bunch of people including myself and the good courses from YDI an opportunity to to actually.

We put some information out there about our experience with the use of polygraph. I mean, there were people who wanted to do that for sure, but we were blocked.

In in in our efforts to do that.

And while while I respect immensely the work that adds the association for the treatment of sexual abusers is done over the course of the last 40 plus years.

And I've learned a whole bunch from my affiliation with that organization and my participation in their conferences.

That doesn't mean that they know everything either.

I mean, I was asked in a presentation that I gave for the Arizona Juvenile justice.

For essentially defense attorneys a few years back, whether or not I thought ANSA got it right, when they, when they, when they, when they, when they, when they took the position to not have polygraph be part of the process.

And I told them no. I think they got it wrong. I think they got it wrong because their sole focus is on whether or not.

It 1 issue.

Is whether or not the only issue that became paramount to them was whether or not it reduced recidivism, and I and and I said, and I said on the record, I said, what about unknown victims, especially unknown victims that are already in the homes of the clients that.

We have that we don't know about and you're going to return kids to a household where there's already victims.

We just don't know about it, that we would have known about if we had had an opportunity to polygraph them in the first place.

Is.

And sadly, one of the leaders of that organization on the record said some of us besides me were in that room that day.

Victims are not concerned.

Wait a minute.

Victims are absolutely our concern.

That's the that's at the heart of all of this.

How could you even say that out loud?

But but so my hope is is that out of this subcommittee we can have an opportunity to.

I don't know.

Put forward a full and clear vision of how polygraph is helpful to us and how it's not what it's been mischaracterized as. Because because without it, we're doing an injustice to a whole bunch of families and. And just because you don't know about somebody doesn't mean that that's not an issue.

Beth Goulden If I may, sorry.

Are you gonna?

You're good.

So as I said, in the larger group meeting, I want to come up with goals for the larger committee that. We can hopefully work toward.

Getting some things done by the end of the year and I'm hearing too, there's two different schools of thought in my head that I like your everyone here's opinion on that because I also want us to align with the adult subcommittees.

So I think that because I think that would make more sense.

When both subcommittees are presenting to the larger group and making decisions on the recommendation so.

Two ideas.

Are to go chronologically in order as far as like making recommendations. As far as say, the pre sentence level and chronologically going down that way, or to your thought, which I do also agree.

I I don't know if there's a point on a wrong way to do this, but these are just ideas.

There are pressing issues in our justice system, such as do you think it makes sense to start with like pre sentence? But then what issues? Especially related to if we're talking polygraphs or if we're talking when someone can have contact with children or what chronologically makes sense. So we could go out of order. And but I do want to pick four to five topics that will be accomplished this year and in doing.

So my suggestion is.

And as we've discussed, we do not necessarily have to reinvent the wheel.

My comments on that would be kind of whatever topics we are working on for that month. If stay during the subcommittees, everyone's maybe someone or whoever.

Pulls 3 states with different who has recommendations because not every state has pre sentence. As you all know.

So, but we do have pre sentence here, so pulling three states with research and those things are decided, discussed and recommended upon for

them to bring back to the larger group and we kind of do it that way.

That is just kind of as I've been brainstorming, not only just.

An efficient way to do these things because a lot of states have done a research and you guys have all done a research.

But I do not think that.

You all need to go out and do like new research, unless you all know of newer research.

But there are boards that meet.

Continuously and are constantly updating the research.

So how can they help us? And if we wanted to pull 3 but my so I have a few questions, but if I may, my first question is because I do wanna come up with the goals for the next meeting, but I do wanna adult and juvenile to.

Align. Do we wanna go chronologically?

You know, say from pre sentence to you know like what's a.

Proper evaluation or probably what do we wanna go, chronologically? Actually, do we wanna pick topics? I want recommendations on that.

On what topics do you think so we know where we wanna be by the end of this year.

What? What do we wanna have recommended and adopted by the board as recommendation?

And then B I guess the best way.

Like I said, unless someone has a different idea.

Coming kind of ready to discuss.

Kind of those topics with say like I said, I don't care three to 10 States. I don't.

And what research they have and then you guys all or whoever is on the suddenly ready to adopt those and present them before, those are those are kind of my thoughts on how to how does anybody have any thoughts on that? Can I just?

Victoria Baldner.

I will be the first to admit that the statue is a Beast.

And.

I've looked through it and tried to.

To create like a flow chart in my mind.

Because.

I think this could spin out if you're not really focused on what it is you have to do.

The way I see you've got, you're the orange people. I've deemed you the orange people, the orange font in the list. I see two buckets.

One is evaluation of offenders. The other bucket is treatment.

When when I'm asked to change something, the first thing I say is OK, where's the thing?

You want me to change?

Give me the.

Give me the document.

Give me the thing.

Give me the e-mail.

Show me what you want me to change so.

I suggest that you wrap your arms around the standard procedures that are referred to in the statute. The guidelines that currently exist, assuming they do, sounds to me like it's a juvenile's.

Kind of.

OK.

There's none and and the standards referred to.

So if I were in your your seat, I would want to understand what am I being told to change? And so I suppose if there's very little, then you're going to be doing more recommendation than you are revision. And the subsections are pretty specific about what they want, Revised.

And what they want recommended.

I hope that helps a little bit.

Clearly there are problems in the system, but I don't want you guys doing more work than you need to do with regard to what subject.

What needs the recommendations and what subject needs the revision?

I think the subsection with the revisions is the bigger problem, because then you're supposed to analyze whether your revisions are any good. That doesn't make a lot of sense to me.

Yeah. So, Beth Golden, I would say be there are no standards here for the yeah, juvenile or adult supervision and treatment.

So we are starting from scratch and I think that's where all the evaluation or the treatment.

Evaluation, treatment and supervision.

All of it.

All of it.

We don't have.

And so Arizona's unique in that there are 15 counties, so you can go to big team at different counties and make that happen.

Building this morning, I was like, there's no way there's everybody's doing this.

No, and they have. Some counties don't even have Treatment providers.

And so that's part of the point of before and why it's created is to create these standards and then when you have people who move from county to county, they'll get a whole new set of rules and all that stuff.

So I think though that that's why many of us who work or have worked or worked in this system know probably some of the most important topics.

That should be.

Covered and worked on to make those create of those standards before we can revise, right?

Just ask yourself every time you want to change something or bring it up or talk about it, or spend your mental energy on it. Whether it falls under evaluation or treatment, I mean.

I don't see that it's in there.

Where do you remember it?

Fall under the

Melanie Opheim. really quick. Scott and I participated.

In a.

On a committee for several years.

Mostly kind of informal with all the other treatment providers, because impostors, if you will, kept showing up. Taking kids that didn't know what they were doing and using books that were outdated and didn't have any evidence base.

So we came up with a pretty good document.

I mean that might be a place to start, but it included the beginning until the end.

I mean, maybe not supervision to your point, Beth, but but it included a lot of like, what does a a treatment plan look like?

What does a good psychosexual look like?

How does the polygraph help?

I mean, it's just kind of a, it's not huge.

It's not really detailed, but it gave just at least a backbone to. If you're going to do this work, this is what it should look like.

And it was a pretty it was made with agreements from all of us. So it kind of felt like it was legitimate

Scott question. Mel, are you talking about the when we we all worked with even the victim treatment providers on reunification guidelines and that kind of stuff is.

That is that what you're referencing or correct or

Melanie Opheim?

I I know that we have the big big document with the Darren and the Tammy and that kind of came together and the courts still sometimes use that, ironically enough.

On how to treat victims.

So that's another whole topic, but well, it's part of the treatment topic.

But victims do not get the proper treatment in this this county. And if not, maybe the state. But but then there was also just at the courses at the YDI where we sat around and we ended up with an actual physical document. Talking about this is you can.

Skip these points and call yourself a treatment provider.

And we tried to give it to the AOC and have them implement at least.

But my my issue more recently especially is that a lot of these kids are now in the DCS care.

And there is no.

Guidelines there.

There's kids living with non SMB kids.

There's kids living with littler kids.

They have a whole other.

It's a whole other piece with the DCS world 'cause, they never even make it to our AOC contracts.

So. So, Scott, I believe I'm commenting on what I heard Victoria say.

There are some guidelines out there.

They exist, I think, mostly in contracts.

I don't think they exist in statutes.

I don't think that they exist in anything form.

I think that perhaps there's more structure in in Maricopa County.

Around some of that stuff and there are some of the outline counties, but there still aren't comprehensive guidelines.

I mean, probation Department spokesperson, they they have protocol whether or not some of the things we're talking about are fleshed out in the kind of detail that I think we're having a discussion about today. I think is a different discussion.

But there like for example.

The term psychosexual gets gets used over and over and over again to to reference an evaluation done on somebody that's supposed to evaluate strings and deficits risk level and what level of intervention is necessary to address that level of risk level. If you had a discussion about what? Does a psychosexual consist of there?

There would be some consensus.

But but there would be a whole lot of disparity about what that.

That needs consistent and what the AOC at this point in time, at least as far as juveniles are concerned, calls the psychosexual.

My my personal opinion is it's sorely lacking.

It's biopsychosocial.

It's a. It's a glorified psychological evaluation.

It's a biopsychosocial with some aspects of simple, and I recognize that I'm naive to the fact that funding streams and resources and all sorts of things like that economics.

Our piece of this discussion that drives some of these things.

But that shouldn't keep us from trying to come up with some measure of consensus around, for example, what is a psychosexual evaluation?

What is its purpose?

What are the metrics that are involved in in administering to client X?

Are are we using science to then take the data?

That's culled from the evaluation process to score people on risk.

Assessment skills that have been developed for evaluating risk are are we just randomly talking about what comes out in the wash because then

it because then it turns into, in my professional opinion and and this needs to be more about science, where science can help lend itself to. These discussions and there are clearly there are actuarial risk assessment skills in the adult in the adult world, there are none in in the juvenile world.

For a variety of reasons, and I could give a whole discussion about why that is, but but there are some. There are some empirically based risk assessment scales that have been created for work with juveniles, and there have been some protective factor scales that have been created that. Have supplanted some of those scales that some evaluators, myself included, continued to use both of those. The other the the risk scales and the protective factor scales to try to provide as complete a picture as I can.

To whoever it is that that this document's gonna land the treatment provider, that this document.

It's going to land in the hands of. I want them to know as much about this kid in their family as I can possibly give them before they start treatment.

And in and in my humble opinion, things in those evaluations should matter with respect to level of care. I I don't.

I don't know sometimes if if if they do or they don't.

But there's yeah.

So to repeat myself, there's there are things in contracts I guess is what I would say.

But I'm unaware outside of ASSA, the Association For The Treatment Of Sexual Abusers they have published in in its whatever generation at this point, standards for the assessment and treatment of both adults and juveniles.

They they probably call them guidelines.

They don't call them mandates, but they're the only entity that I'm aware of.

That has formally taken this task on to the extent that we're having a discussion about.

It'd be important.

So Victoria Baldner again to clarify something about the statute.

Beth, this goes to your question. Supervision.

Is referred to repeatedly in the adult subsections, not at all in the juvenile.

Here's what I would Beth Goulden.

Here's where we have gone off the rails of probation.

This will probably go to juvenile too.

Everything probation does should be driven by evaluation and treatment. And so I think the recommendations like out of this. If there's going to be some treatment, this is where treatment. I don't know how probation officers effectively do their jobs without and you guys know this has done off the rail in the recent years. So.

Probation these treatment providers will see offenders even more than probation officers .

Well, probation officers must be making decisions based on.

Recommendations.

Of like the evaluation and treatment progress.

Of providers.

Do do you have any understanding of why supervision isn't mentioned?

So I was kind of going through I there is.

There's.

A supervision. I've never prosecuted. Juval so I don't understand what happens with kids. Only adults is there.

There's juvenile bereave.

Specialized. OK.

They have specialized sex offenders, probation officers that run with juvenile kids over. Yes, right.

And there's also juveniles who are charged with adults.

True, which is also I would say.

I think you'd put that in here or you would put in the adult as a youthful.

How would you?

You know what I'm saying?

'Cause there's the whole Yxl here that they're adults, but they have different for children.

young adults.

A lot of 16, 17, but they'll be charges as adults.

But they're considered youthful offenders and they're they have the protections of like the a ARH hearing and all those sorts of things.

So I mean, that's conversation for another day where you would put those. If these are just strictly juveniles.

My my thought would maybe to be keeping those like in juvenile, but then make a separate section an adult for YSOs but.

To your point, I'll go through because some of the.

Language is like.

Procedures to evaluate juvenile, make appropriate and like.

Recommended behavior management monitoring, treatment and compliance with juvenile.

So it's like they're kind of.

You guys do make recommendations based on the time on whether or not they listen as a whole other animal, but so they think there's a little bit like of overlap. I would say with just odd to me that supervision is, yeah, yeah.

It shows up over and over and over again with adults, but it's totally silent.

It's a curious issue.

Why it's not there? I don't.

Yeah, reference for that either, yeah.

But piece of what's getting to Scott Naegle.

A piece of what's getting discussed is.

Is that there's a whole subgroup of juveniles that get identified with these issues as it currently exists, at least here in Maricopa County, who are not going through a formal adjudication process.

They are not being adjudicated.

And I and I'm not the best one to speak to. All the dynamics there.

Mel probably speak to this far better than I can, but there's a whole subgroup I don't know what percentage.

A fairly significant one, I think.

And more as time has passed, we're not going through the formal adjudication process.

They're entering into what's the language Mel?

It is diversion post dismissal agreement.

But now it's turning into diversion, so they don't get adjudicated.

And then when they can't go home, they're not on probation. They end up landing in, in DCS Group Homes, DCS Group Homes that are largely inadequate.

In working with kids with these issues and then we've now mixed these kids with these issues with other kids and that's twofold.

The problem one.

Because they may take advantage of some of the other kids in the program.

But most of these kids are not delinquent kids.

Most of the kids that are referred for sexual misbehavior problems are not highly delinquent kids.

They're kind of incompetent kids, so lack of a better way of putting it and they can be taken advantage by the more delinquent kids that are in the DCS Group Home because they don't have the where that some of those kids do.

So it's, it's just it's it's like a really bad mix.

And there was a reason why some of us didn't do it in the past.

And here.

And here we are.

Victoria Baldner. Again, sorry.

The best point if there's nothing to look at and change, you guys shouldn't.

Struggle with coming up with something from whole cloth.

Wouldn't looking at other states be?

At least some kind of a guide for you that way. Yeah, I think so.

Guess the question is what States and what they're doing.

There are states that those are the states.

I would recommend that are.

Meeting like constantly and they're every year.

They kind of update based on any of the latest research, so they're up to date on research.

I just 'cause I was looking so at California as an updated there since like 2017.

So like I would say, not, not not California.

Yeah, so, like, not that Idaho looked good. Colorado looks good. And I don't know. Like I said, I have not done a ton of research on.

But if anybody, that's my recommendation, if there's any of your favorite states that you know.

That, but I would kinda just kinda searching.

But yeah, who had The most who was constantly already updating.

So we have their latest work and research already done to tackle some of these.

So that's that's kind of my recommendation as whatever topic we're working on is if those states pick the topic, let's talk about it.

Does this work for us?

Because you all know and have worked here and what will work for Arizona, you know, and I think.

Intake or leave. Kind of what?

Or tweet what other?

What they're doing to adopt, you know, here and bring to a larger group.

Talk about, adopt, discuss and and I think that's the most efficient way.

Scott Naegele, I'm mindful of our time and I'm mindful of the fact that we got halfway through our agenda item. So I'm not really sure what the appropriate waiving to proceed with that is in order to move them to the next meeting and continue the discussion or I.

Just.

Stop at 3. Perfect. OK. I thought it was 3:30, so I'll be.

Perfect initially was, but we told we could only be in. OK, perfect.

So I guess I'm just asking for some guidance on let me just move some of the other things to our next meeting.

Melanie Opheim Are just the last two that we didn't get to?

E and F, right.

Yeah, I mean, E, if this has gotten any E is my attempt to.

To not have to do it all.

And and and from previous experience I I don't know what we can ask of.

Staff to help us with.

I mean, they're going to be pieces of this, you know, given what Victoria said, we're we're going to have to shoulder it.

There isn't any question about that.

I just, you know, I just want us to kind of agree to divvy it up and and fairly equitable way. I'll do more than everybody else, but not all of it.

Some commentaries of is invited.

Melanie Opheim I will help Scott.

Thank you, my sister.

I was gonna throw in.

I know we're almost out of time, but but Colorado has a great program in so many ways, and then it doesn't.

So as long as we can pick apart what we do and don't like, the AOC has already deemed them.

You know the experts and they call their their expert in quite often.

I saw him last week at the AOC.

Who was it but Tom Leversee.

Oh, OK.

But he was single handedly the person that got rid of our polygraph.

So we we kind of had a love hate relationship with their standards.

But they do have a very and I'd have to ask them about the DCS kids, because what you're talking about kids that get diversion or get the PFD as those aren't even talked about. The kids, that never even even get as far as a County Attorney. So there.

Even a whole other subset of the subset, so I would love to know how he catches those, but I could ask him for his guidelines.

But they do have a a kid gets caught and it's the family. And it's a case manager and it's a victim's person.

We don't have a victim's person.

I've had to create my own victim therapist because we don't have victim's people.

So who so they might?

I have a pretty good holistic they're just kind of close and we hear a lot about them.

But I'm willing to look into them and just see what they do. I can't remember.

They call it.

Do you remember Scott?

It's like a table or board. Or maybe they call it a board, but but they all kind of come together, write the initial.

Arrest.

So I can look into theirs. You know, I can do that.

I would identify three states that Beth Goulden that we want to use and look into and start and then again I wanna identify the topics. That we are in favor of that.

OK.

So let's all leave this meeting trying to pick, you know, three states. Colorado's clearly gonna be one of them. You know, I think I don't know much about Idaho.

I think Utah has some pretty good guidelines too.

Yeah, I would do that because again, I know that.

That Beth Goulden, like that, there are some like we have to pick the state. I think that's the best way to figure out what is best for our state. If there's things, of course we're not gonna adopt Colorado's, but I think their research is good too.

But yeah, and then I just want topic ideas from everyone to present to the next meeting. If anyone can send that over to staff, if you don't mind collecting those for me, can you guys think about that?

Maybe send your thoughts on maybe 5 topics the 1st 5.

To maybe tackle this year, yes, OK. And then I can come in.

Blake Barney, I think one of the things we bring up earlier, Beth, was do we address this chronologically?

To me, it makes sense that we address things chronologically because we're gonna hopefully prevent additional problems if we start at the beginning, then trying to jump into different spots where people have already been through that process, they've already gone through it.

It's not going to be affecting them if we address things from the pre sentence, the very beginning, the risk assessments, the.

The evaluation process, the.

Even the.

The sentencing aspect of things that makes sense because we're stopping a problem potentially instead of trying to nitpick some of these things that are gonna just complicate and and muddy the waters, right?

So chronologically I that's where I would like to start. Is pre sentence from the time that there's an arrest or a report made or something? What happens?

And.

Honestly, Melanie, I didn't realize there was that many kids who were completely missing the judicial side of it because everybody I've worked with has been involved on the judicial side and they're all in pre sentence and it's the the pre and post conviction. Yeah, aspects of what's happen. Where I see the, you know, families being victimized.

If I can tell you just really quick totally, I know we gotta go. But I I it's only because I opened my DCS home and I told the director of DCS

when he asked me to do that.

I will take my own kids for my own treatments.

Centers, because they're the ones that I'm working with, and it'll be when I got told I had to take another client, he had probably had seven different offenses, including grown man contractors in his home.

He's he's on the news eventually, but ultimately they said you have to take him.

You can't say no.

And I said he's going to come to group.

He doesn't have to.

He's going to your sex offender group home, but he does not have to attend group.

You know that, I said.

I will call the cops.

They will not arrest him and this kid.

They just asked me three days ago to take him again and he he's he's done the circuit. But these are the kind of kids that.

Aren't even being seen.

Cops know him, but nothing sticks. And so there's a whole again.

It's a whole their sub mess that don't even don't even see the law.

What is the beneficial item?

Up my thoughts and then you guys can you can back on what that would look like?

Final application.

I do agree.

Pre sentence and then even evaluations.

Evaluations lead to some of the other sexual decisions.

Yeah. So I can come up with that for the for us to go over either in subcommittees or.

That Blake Barney.

As far as states, I'm more than happy to research Idaho.

I lived there 24 years, so I might potentially know some people that are involved in all that, so I I would volunteer myself to to look through the

Idaho guidelines and everything they deal with juveniles.

It's not great with adults. I know that first hand, but juveniles, they may have a much better system, so I'm happy to research that.

Pardon me, I don't have a cold.

I just have allergies sometimes.

We can talk about the last item on we get together next time because frankly, I I'm just looking for things that could be borne out of this that I think.

Have merit to be researched.

Around recidivism.

Around what we learned from the use of polygraph and its effect on families and so on and so forth.

So we can talk more about that very mindful at the time.

We have one minute before we have to depart from this room so.

So I have to make a motion that you do.

Thank you. To complete you're catching on. You're doing great.

So I make a motion that we adjourn second.

All right, great.

Are you gonna vote? Oh, everybody says.

All in favor?

Oh, all in favor. Aye, aye. All opposed.