

FY25 TXN RFP Questions & Answers

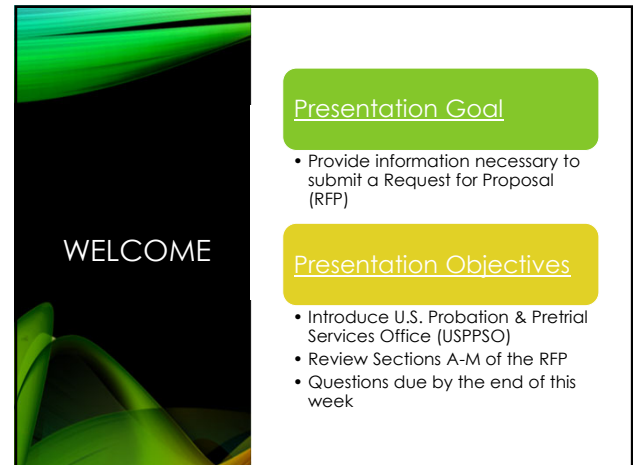
****Offerors' Presentation Attached****

1. Should the RFP submission response be emailed in PDF format?
 - Yes, it is recommended you submit your response via PDF.
2. The Model Policy Sex History Disclosure (Pages 1-28) in the RFP is new. Are we required to utilize this in Outpatient Substance Abuse Treatment?
 - You are not required to utilize this for Outpatient Substance Abuse Treatment. This document was prepared to assist in standardizing and promoting the effectiveness of the sexual history exam. It is provided to assist convicted persons, treatment providers, supervising officers, and polygraph professionals in increasing the standardization and effectiveness of the sexual history exam only.
3. Page L4 of 15. Monitoring Reports. It states current vendors need not supply USPO monitoring reports but does the USPO want monitoring reports from other agencies if the vendor has other contracts? If so from just that facility or from all facilities operated by the proposer?
 - Only the monitoring reports related to our prior/current contract is needed - no other monitoring reports from other agencies are required. As part of the process, if we begin evaluating a vendor, reference checks are conducted which covers the performance supplied to other facilities/agencies.
4. It does not appear that the proposal submission includes a description of how the facility intends to comply with sections, C, D, E, F, G, H, I, and J or with the Local Services (Pages 26 and 27). Is certification of the Compliance Statement all the information required in this area?
 - The Compliance Statement covers what is necessary to meet the mandatory requirements in the above sections. While that single document itself is vague, it references the performance expectations with any requirements, terms, and/or conditions. Those expectations are captured in each of the sections noted above but is also referenced in the evaluation factors of the Monitoring Report included in the RFP.
5. When Submitting Offerors Staff Qualification should resume' and education certificates be included as an attachment or is simply completing the chart with relevant information sufficient?
 - In the new attachment (document), the printed and signed name of the vendor is sufficient. In the third bullet point, it states "staff specified to provide services listed by project code have the required education, relevant experience and current licenses/credential listed in Section C of the RFP" referencing that, when the vendor signs off on that document, that itself is validating the required information. If attachments are received, we will definitely receive them and save them for our records.
6. In the previous contract as 2nd day UA was required for those that missed the UA day. On average 1 to 3 persons would arrive on the 2nd day. Will a second day be required under the new contract? Could you explain the schedule expectations in detail?
 - This is not required. It is expected that vendor staff be available for a UA based on the local needs dates and times listed in the RFP; however, the second day UA is not "mandatory" and can be discussed based on best-practices, staffing issues, district/vendor needs, etc. The specific oversight officer can chat with the individual vendor about this specific issue.

7. On PROB 45's are officers' signatures no longer required? Only Referral Agent?
 - Correct. The ONLY signature required, per the Administrative Office, is the Referral Agent (the middle signature) on the Prob 45's.
8. On AMENDED PROB 45's we have been collecting missing P/S signatures. Will this still be required?
 - This is no longer required. The ONLY signature required, per the Administrative Office, is the Referral Agent (the middle signature) on the Prob 45's.



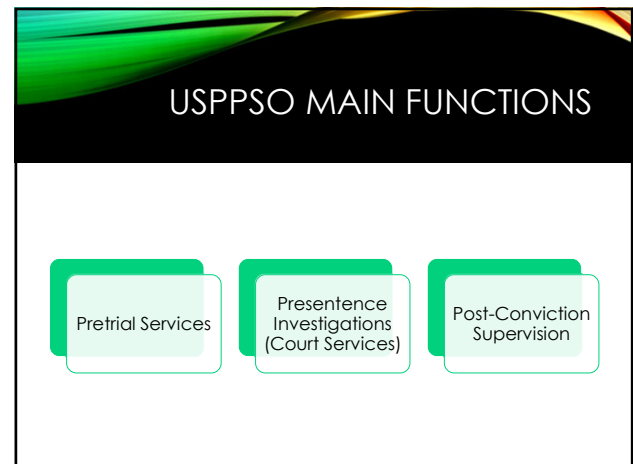
1



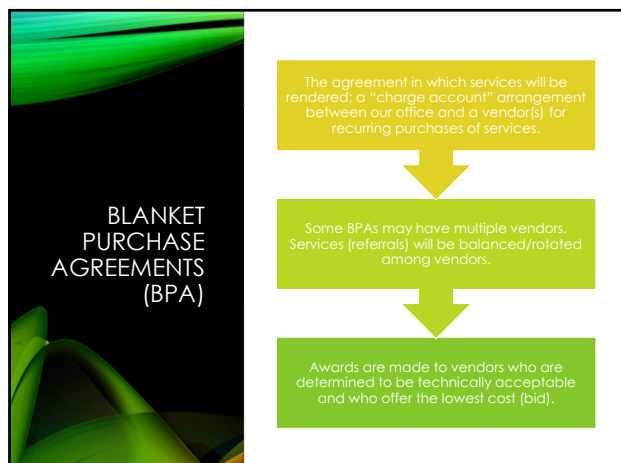
2



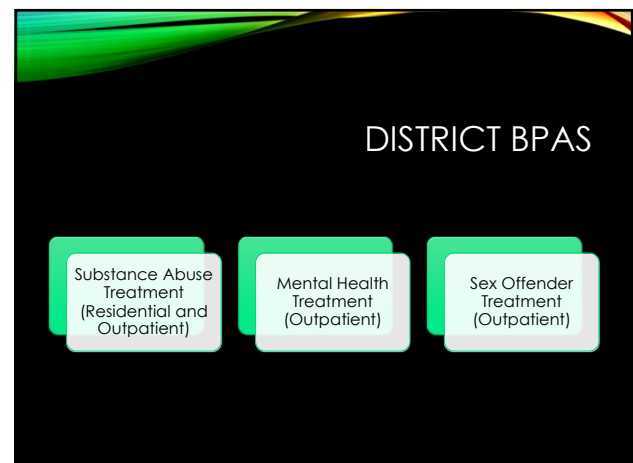
3



4



5



6

STATEMENT OF WORK SECTION A

Solicitation/Offer/Acceptance (AO 367)

- Complete Blocks 8 through 15
- Our office completes the remaining blocks

7

8

With the above, the undersigned agrees, if this offer is accepted within _____ calendar days (365 calendar days unless a different offer is specified above, to furnish any or all items upon which prices are offered at the price set opposite the designated point(s), within the time specified in the schedule.

FOR PROMPT PAYMENT	10 CALENDAR DAYS	30 CALENDAR DAYS	60 CALENDAR DAYS	90 CALENDAR DAYS
	%	%	%	%

ACKNOWLEDGEMENT OF AMENDMENTS
or acknowledgment receipt of amendment
to the SOLICITATION for offers and documents numbered and dated:

AMENDMENT NO.	DATE	AMENDMENT NO.	DATE

14. ☐ AWARD
Your offer on Solicitation Number _____, including additions or changes made by you which additions or changes are set forth above, is hereby accepted as to the items listed above and on any continuations.

15A. NAME OF CONTRACTING OFFICER _____

15B. UNITED STATES OF AMERICA

15C. DATE OF AWARD _____

15D. OFFER DATE _____

BY _____
(Signature Of Contracting Officer)

9

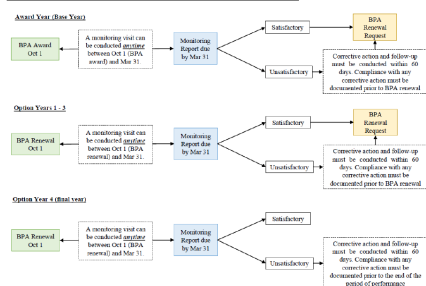
Supplies or Services & Offeror's Prices

- Page B-1
- **Catchment Area:**
Geographic area where services are required to be performed
- **BPA Duration:** Fiscal Year (FY) 2024 in addition to FOUR 12-month option years – not to exceed 60 months

STATEMENT OF WORK SECTION B

10

Example Monitoring Timeline for Awards Beginning October 1



Note: this example time frame is based on a 10/1 award. If the award is not on 10/1, the initial monitoring report is due within 180 days of the award. Therefore, BPA option year renewals should occur on 10/1.

11

SECTION B - SUPPLIES OR SERVICES AND OFFEROR'S PRICES

The United States District Court for the _____ is soliciting a vendor to provide substance abuse, mental health, and/or sex offender treatment services. A Vendor must be capable of providing services within a geographic area encompassing _____.

As a result of this solicitation the Government intends to enter into a Blanket Purchase Agreement (BPA). For this BPA, approximately _____ vendors are needed to provide the required services. The Government reserves the right to award to a single vendor.

A Blanket Purchase Agreement is a "charge account" arrangement between a buyer and a seller for recurring purchases of services. BPAs are not contracts and do not obligate government funds in any way. A contract occurs upon the placement of a call or referral from the Probation/Pretrial Services Office and the vendor's acceptance of the referral. Referrals will be entered among all the vendors on the BPA. BPAs are valid for a specific period of time, not to extend beyond the current fiscal year. The total duration of this BPA, including the exercise of two 12-month options, shall not exceed 36 months. BPAs will be issued to those vendors determined to be technically acceptable and offering the lowest cost to the Government, using the Evaluation Criteria established in Section M of the Request for Proposal.

Section B is generic and used nationwide to procure the particular needs of each U. S. Probation/Pretrial Services Office. For this solicitation, only those services marked by an "X" under the Required Services column are being solicited. Offerors shall propose on only the required services. Services proposed, but not marked as required, will not be evaluated or included under any resultant agreement. Offerors failing to provide offer on all required services marked, will be considered technically unacceptable.

Note: Estimated Monthly Quantities (EMQs) represent the total monthly quantities to be ordered per service item under the BPA. Each vendor placed on the BPA may receive a share of the total quantity stated. However, EMQ's are estimates only and do not bind the government to meet these estimates.

An asterisk * indicates a requirement line item which has been modified under "Local Services."

12

STATEMENT OF WORK SECTION B CONT.

Supplies or Services & Offeror's Prices

- Page B-2 & beyond
 - **Required Services:** All services listed are required
 - Offerors must submit bids on all required services or the proposal will be considered technically unacceptable
 - **Project Code and Service:** The project code is a number associated with a specific service
 - **Estimated Monthly Quantities (EMQ):** Aside from new services, the estimated monthly quantities for services are based on historical data
 - EMQs are estimates and our office is not bound to meet them

STATEMENT OF WORK SECTION B CONT.

Supplies or Services & Offeror's Prices

- Page B-2 & beyond cont.
 - **Units:** Defined in **bold** under the EMQ column (i.e., 30 minute increments, per intake, per day, or per dose)
 - **Price:** Reflects your cost to perform the requirements of the Statement of Work (Section C) as well as all relating terms and conditions of the RFP
 - Client 'no shows' and administrative functions, such as completion of paperwork and phone calls, are not billable and should be included in the unit price
 - If the service will be performed by a vendor with whom you team (subcontract), enter 'S' next to the price and describe the arrangements in Section J

13

14

URINE COLLECTION:

PROJECT CODE	REQUIRED SERVICES	ESTIMATED MONTHLY QUANTITY	UNIT PRICE
1010	Urine Collection/Testing & Reporting	2020	
		2020	
		2021	
		Unit Price per specimen	

STATEMENT OF WORK SECTION C

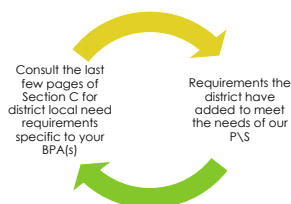
Provision of Services - Piggybacking

- Other U.S. Probation and Pretrial Services Offices, and the Federal Bureau of Prisons, are authorized to use our contracted vendors to provide treatment services to active P/S and inmates residing in local community corrections centers

15

16

LOCAL NEED REQUIREMENTS



LOCAL NEED REQUIREMENTS

The vendor shall provide treatment staff fluent in the Spanish language to ensure that Spanish speaking persons under supervision receive treatment services. Bilingual treatment services may be provided directly by the vendor's staff or through a subcontractor.

The vendor's services are made available during the weekday (from 9:00 a.m. until 5:00 p.m.) and 2 evenings per week (from 5:00 p.m. until 8:00 p.m.).

The physical facility at which services are provided is located within 1/2 mile of public transportation access.

The vendor shall operate a code-a-phone system for random urine collections and schedule urine collections three days per week from 10:00 a.m. to 8:30 p.m., and two weekends per month from 12:00 p.m. to 5:00 p.m.

17

18

LOCAL NEED REQUIREMENTS CONT. (UPDATED) (GROUP TELEMEDICINE)

The Northern District of Texas is seeking this local need in response to the unique treatment barriers and needs in our district. We would like to use telemedicine when appropriate to achieve these ends. The use of telemedicine is authorized only after vendor and the DPHQ/SPSO staff the individual client's case, determine he or she is appropriate for treatment via telemedicine, and it is approved by the district's contracting officer or designee. The use of telemedicine is for the benefit of the judiciary and not the convenience of the vendor. The use of telemedicine is not in lieu of the vendor's ability to provide services in-person when appropriate (see note below).

The vendor is authorized to provide this service via telemedicine, which includes providing health care delivery, diagnosis, consultation, and treatment and the transfer of medical data through interactive audio, video, or electronic/data communications. The vendor must adhere to and meet the same legal, ethical, and confidentiality standards when providing telemedicine. The vendor shall also obtain consent of the client before the delivery of telemedicine services and shall include documentation of the same in the individual's treatment record.

To ensure confidentiality for each session, the provider shall require that each client verify that he or she is the only person on that line and that no person who is not part of that treatment group is listening. Each participant will also enter into a confidentiality agreement before being allowed to participate in treatment by telephone.

To verify that services were performed, the vendor shall complete the sign-in log with the following information:

- The client's name.
- Date of the session.
- The time the session began and concluded.
- Confirmation of the means in which the session was conducted (i.e. teleconference, video conference, internet).

The assigned officer will follow up with the client to ensure that the session was completed.

For de-escalation, if an emotionally charged topic was discussed or the client appears emotionally agitated, the provider shall follow up with additional contact later in the day to ensure that the client has successfully de-escalated. The provider shall also remind the client to reach out to his or her social support system at any time.

NOTE: This requirement is not in lieu of the provisions set forth in the Request for Proposals which require the vendor (and any proposed subcontractor) to maintain an acceptable facility located within the defined catchment area.

19

LOCAL NEED REQUIREMENTS CONT. (UPDATED) (INDIVIDUAL TELEMEDICINE)

The Northern District of Texas is seeking this local need in response to the unique treatment barriers and needs in our district. We would like to use telemedicine when appropriate to achieve these ends. The use of telemedicine is authorized only after vendor and the DPHQ/SPSO staff the individual client's case, determine he or she is appropriate for treatment via telemedicine, and it is approved by the district's contracting officer or designee. The use of telemedicine is for the benefit of the judiciary and not the convenience of the vendor. The use of telemedicine is not in lieu of the vendor's ability to provide services in-person when appropriate (see note below).

The vendor is authorized to provide this service via telemedicine, which includes providing health care delivery, diagnosis, consultation, and treatment and the transfer of medical data through interactive audio, video, or electronic/data communications. The vendor must adhere to and meet the same legal, ethical, and confidentiality standards when providing telemedicine. The vendor shall also obtain consent of the client before the delivery of telemedicine services and shall include documentation of the same in the individual's treatment record.

To verify that services were performed, the vendor shall complete the sign-in log with the following information:

- The client's name.
- Date of the session.
- The time the session began and concluded.
- Confirmation of the means in which the session was conducted (i.e. teleconference, video conference, internet).

The assigned officer will follow up with the client to ensure that the session was completed.

For de-escalation, if an emotionally charged topic was discussed or the client appears emotionally agitated, the provider shall follow up with additional contact later in the day to ensure that the client has successfully de-escalated. The provider shall also remind the client to reach out to his or her social support system at any time.

NOTE: This requirement is not in lieu of the provisions set forth in the Request for Proposals which require the vendor (and any proposed subcontractor) to maintain an acceptable facility located within the defined catchment area.

20

MANDATORY REQUIREMENTS

Required services
and related
standards

Consult Section B for
project codes and
services required for
your specific BPA

21

URINE COLLECTION, TESTING, & REPORTING (1010)

Store supplies in a secured area

Limit use of lavatory for other purposes

Collect one specimen at a time by direct observation

Follow Chain of Custody protocol

Store and mail positive specimens as indicated in this section

Maintain a Urinalysis Test Log

Collection of specimens by trained staff

Our office provides all necessary collection supplies **other than** gloves.

22

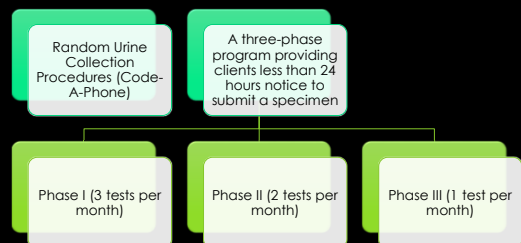
URINE COLLECTION, TESTING, & REPORTING (1010) CONT.

Local Need Requirement

- The program shall operate a code-a-phone system for random and **observed** (unless otherwise approved) urine collections using a Phase system.
- The vendor shall operate a code-a-phone system for random urine collections and schedule urine collections three days per week from 10:00 a.m. to 8:30 p.m., and two weekends per month from 12:00 p.m. to 5:00 p.m.

23

URINE COLLECTION, TESTING, & REPORTING (1010) CONT.



24

TREATMENT SERVICES REQUIREMENTS

- Provide emergency services when counselors are unavailable
- Create and update treatment plans, and forward plans to the USPPSO at least every 90 days. (Preparation of treatment plans must be included in the unit price)
- Forward typed discharge summary to the USPPSO within 15 calendar days after treatment is terminated
- Notify USPPSO within 24 hours of 'No Shows', violation conduct, and/or third-party risk issues

31

PHYSICAL EXAMINATION & LABORATORY STUDIES

- Laboratory Studies and Report (4020)** - Blood and urine testing is conducted when medically necessary. Testing is billed at actual price
 - Typed report to be submitted to the USPPSO within 15 calendar days after completion

32

PSYCHOLOGICAL/PSYCHIATRIC EVALUATION TESTING & REPORT

- Psychiatric Evaluation and Report (5030)** - consisting of a medical evaluation and report conducted and prepared by a licensed medical doctor/physician, a psychiatrist who specializes in disorders of the mind, or other qualified practitioner who is board certified or board-eligible, and meets the standards of practice (i.e., academic training, residency, etc.) established by their state's regulatory board. The purpose for this type of evaluation is to establish a psychiatric diagnosis, to determine the need for psychotropic medications and/or to develop an initial treatment plan with consideration of any immediate interventions that may be needed to ensure the client's safety to that of the community.
 - Typed report to be submitted to the USPPSO within 15 calendar days after completion.

33

MENTAL HEALTH INTAKE ASSESSMENT & REPORT (5011)

- Performed by a masters or doctoral level clinician who is licensed or certified and meets the standards of practice established by his/her state regulatory board. The assessment could also be conducted by a non-licensed masters level clinician under the direct supervision of a licensed professional in accordance with state licensing standards
- The vendor shall provide:
 - At least one comprehensive clinical/diagnostic interview utilizing a structured interview tool such as the Structured Clinical Interview for DSM
 - A typed report shall be provided to the USPPSO within 15 calendar days after the vendor's first personal contact and must include more than simply a synopsis or overview of presentence and/or pretrial services reports or institutional progress reports provided by the USPPSO to the vendor for background information

34

MENTAL HEALTH CASE MANAGEMENT SERVICES (6000)

- Defined as a method of coordinating the care of severely mentally ill people in the community. Case management services serve as a way of linking clients to essential services including but not limited to securing financial benefits, health and mental health care. This service is only available when used in conjunction with some form of mental health counseling (Project Codes 6010, 6015, 6020, 6021, 6026, 6027, 6028, 6030, 6036, and 6080)

35

MENTAL HEALTH CASE MANAGEMENT SERVICES (STAFF REQUIREMENTS)

Case Managers meet the standards of practice established by their state's professional regulatory board (where applicable) and meet the **minimum** qualifications (must have 1 or 2 and 3):

- Bachelor's degree in a behavioral health field (psychology, social work, counseling, etc.) and one year experience in behavioral health field or appropriate internship; **or**
- High School Diploma or GED and five (5) years experience in behavioral health setting; **and**
- Work under the direct supervision of, and in conjunction with licensed/certified psychiatrist, psychologist, or masters or doctoral level practitioner who meets the standards of practice established by his/her state's professional regulatory board

36

MENTAL HEALTH SERVICES

Individual Counseling (6010) - one (1) client;

Group Counseling (6020) - two (2) or more clients but no more than twelve (12);

Family Counseling (6030) - a client and one or more family members. The vendor may meet with family members without the client present with USPPSO written approval

37

MENTAL HEALTH COUNSELING (STAFF REQUIREMENTS)

- Conducted by a licensed/certified psychiatrist, psychologist, or masters or doctoral level practitioner who meets the standards of practice to perform psychotherapy/counseling services as established by his/her state's regulatory board
- Emergency services (e.g., after hour phone numbers, local hotlines) shall be available for clients when counselors are unavailable. Emergency telephone calls shall be included in the basic unit prices
- Only contacts between practitioner and client(s) (or family) are invoiced

38

SEX OFFENSE-SPECIFIC EVALUATION & REPORT (5012)

- A sex offense-specific evaluation (also commonly known as a "psychosexual evaluation") is a comprehensive evaluation of an alleged or convicted sex offender, meant to provide a written clinical evaluation of a person under supervision's risk for re-offending and current amenability for treatment; to guide and direct specific recommendations for the conditions of treatment and supervision of a client; to provide information that will help to identify the optimal setting, intensity of intervention, and level of supervision, and; to assess the potential dangerousness of the defendant/offender. This type of evaluation may include one or any combination of the following services: penile plethysmograph (5021), clinical polygraph (5022), psychological testing (5020), and/or Visual Reaction Time (VRT) Measure of Sexual Interest (5023), and any other assessment deemed appropriate by the clinician and approved in advance by the USPPSO.
- The vendor shall provide:
 - A sex offense-specific evaluation and report (5012); for the purposes of assessing risk factors and formulating a treatment program plan. A sex offense specific evaluation of a client shall consider the following: sexual developmental history and evaluation for sexual arousal/interest, deviance and paraphilia, level and extent of pathology, deception and/or denial, presence of mental and/or organic disorders, drug/alcohol use, stability of functioning, self-esteem and ego-strength, medical/neurological/pharmacological needs, level of violence and coercion, motivation and amenability for treatment, escalation of high-risk behaviors, risk of re-offense, treatment and supervision needs, and impact on the victim, when possible.
 - Typed report to be submitted to the USPPSO within 15 calendar days after completion of evaluation.

39

SEX OFFENSE-SPECIFIC EVALUATION & REPORT (STAFF REQUIREMENTS)

- A sex offense-specific evaluation and report (5012) is provided by a licensed/certified psychiatrist, psychologist, or masters or doctoral level practitioner; who meets the standards of practice established by his/her state's regulatory board and adheres to the established ethics, standards and practices of state regulatory sex offender management boards (where applicable).
- The practitioner uses at least one actuarial risk assessment that has been researched and demonstrated to be statistically significant in the prediction of re-offense or dangerousness on a population most similar to the offender being evaluated. [Examples of actuarial assessments include: VRAG, SORAG, HARE PCL-R, RRASOR, STATIC 99, NMSOI-4] and at least one dynamic risk assessment in the prediction of dynamic risk factors linked to sexual re-offense on a population most like the offender being evaluated. Examples of assessments include: Stable 2000/2007, Sex Offender Treatment Intervention Progress Scales (SOTIPS), Structured Risk Assessment - Forensic Version (SRA-FV), Violence Risk Scale-Sexual Offender Version (VRS-SO)
- The practitioner uses instruments with demonstrated reliability and validity that have specific relevance to evaluating persons charged with or convicted of sex offenses.
- The practitioner reviews and considers at least the following information: the criminal justice information, including the details of the current offense and documents that describe victim trauma, when available; and collateral information, including information from other sources on the client's sexual behavior.

40

SEX OFFENSE-SPECIFIC TREATMENT FOR POST-CONVICTION

- **Individual Counseling (6012)** - one (1) client;
- **Group Counseling (6022)** - two (2) or more persons under supervision but not more than ten (10);
- **Family Counseling (6032)** - client and one or more family members. The counselor may need to meet with family members without the offender present with USPO written approval. This project code is also appropriate for family members who have suffered victimization by the offender and/or to prepare family members for possible reunification

41

SEX OFFENSE-SPECIFIC TREATMENT FOR POST-CONVICTION (STAFF REQUIREMENTS)

The vendor shall ensure that

- Sex offense-specific treatment (6012, 6022, and 6032) is provided by a licensed/certified psychiatrist, psychologist, or masters or doctoral level practitioner; who meets the standards of practice established by his/her state's regulatory board and adheres to the established ethics, standards and practices of state regulatory of state sex offender management board (where applicable). The individual shall practice within the generally accepted standards of practice of the individual's mental health profession, adhere to the Code of Ethics and Practice Standards and Guidelines published by the Association for the Treatment of Sexual Abusers (ATSA), and demonstrate competency according to the individual's respective professional standards and conduct all evaluations/treatment in a manner that is consistent with the reasonably accepted standard of practice in the sex offender evaluation/treatment community
- Practitioners employ treatment methods that are supported by current professional research and practice
- Practitioners employ treatment methods that are based on a recognition of the need for long-term, comprehensive, offense-specific treatment for sex offenders. Self-help or time limited treatments shall be used only as adjuncts to long-term, comprehensive treatment.
- The content of offense-specific treatment for sex offenders (6012, 6022, and 6032) shall be designed to and include:
 - Primary Treatment Phase
 - Maintenance Treatment Phase

42

SPECIALIZED TREATMENT FOR PRETRIAL DEFENDANTS CHARGED WITH A SEX OFFENSE

- **Individual Specialized Treatment (7013)** - one (1) client and/or their family (Family is billed at individual rate);
- **Group Specialized Treatment (7023)** - two (2) or more clients but not more than ten (10).
 - Treatment interventions used to help pre-adjudicated clients with crisis intervention, coping skills, cognitive behavioral treatment, and understanding the keys to successful incarceration
 - Create and update treatment plans, and forward plans to USPPSO at least every 60 days

43

SPECIALIZED TREATMENT FOR PRETRIAL DEFENDANTS CHARGED WITH A SEX OFFENSE (STAFF REQUIREMENTS)

The vendor shall ensure that:

- Specialized Treatment Services (7013 and 7023) are provided by a licensed/certified psychiatrist, psychologist, or masters or doctoral level practitioner who meets the standards of practice established by their state's regulatory board and adheres to the established ethics, standards and practices of the state's regulatory sex offender management board (where applicable), to provide sex offense specific treatment. The individual shall practice within the generally accepted standards of practice of the individual's mental health profession, and adhere to the Code of Ethics and Practice Standards and Guidelines published by the Association for the Treatment of Sexual Abusers (ATSA).
- Questions pertaining to the instant offense or questions that compel the P.S. to make incriminating statements, or to provide information that could be used in the issue of guilt or innocence are not asked or addressed. If such information is divulged inadvertently by the client, it shall not be included on the written report or communicated to the officer.
- Practitioners employ treatment methods that are based on a recognition of the specialized needs presented by pre-adjudicated individuals by employing cognitive behavioral treatment, crisis intervention, and life skills to promote healthy coping skills
- Any factors that may increase general risk of further sex offenses shall be immediately communicated to our office

44

PHYSIOLOGICAL MEASUREMENTS

- **Penile Plethysmograph (5021)** - phallometric assessment and report of sexual arousal
- **Visual Reaction Time (VRT) Measure of Sexual Interest (5025)** - an objective method for evaluating sexual interest which is designed to determine sex offender treatment needs and risk levels
 - Examiners must adhere to ATSA ethics and standards
 - Examinations are provided by specifically trained clinicians
 - Specific consent forms must be completed by client
 - Provide a typed report to USPPSO within 10 calendar days of completion of the exam

45

PHYSIOLOGICAL MEASUREMENTS CONT.

Clinical Polygraph Examination and Report (5022) - diagnostic instrument and procedure which includes a report designed to assist in the treatment and supervision of clients by detecting deception or verifying the truth of their statements. The two types of polygraph examinations that shall be administered to clients under this code are:

Sexual History Examination **Instant Offense Examinations**

Maintenance Examination (5023) - employed to periodically investigate the client's honesty with community supervision and/or treatment. Maintenance polygraph examinations shall cover a wide variety of sexual behavior and compliance issues that may be related to victim selection, grooming behaviors, deviancy activities or high-risk behaviors. Maintenance polygraph examinations shall prioritize the investigation and monitoring of the client's involvement in any noncompliance, high-risk, and deviancy behaviors that may change over time and would signal an escalating risk level prior to re-offending

46

POLYGRAPH EXAMINERS (STAFF REQUIREMENTS)

The vendor shall ensure that polygraph examiners meet the following minimum standards (5022 and 5023) and that polygraph examinations are conducted in accordance with the following:

- **Education:** Polygraph examiners shall be graduates of a basic polygraph school accredited by the American Polygraph Association (APA). Examiners shall possess a baccalaureate or higher degree from a regionally accredited university or college or have at least five years experience as a full-time commissioned federal, state, or municipal law enforcement officer. **Certification:** Examiners shall be members of a professional organization that provides regular training on research and case management of sex offenders.
- **Experience:** Polygraph examiners shall have a minimum of two years of polygraph experience in criminal cases. Examiners are required to have specialized training or experience in the examination of sex offenders.
- **Ethics and Standards:** Polygraph examiners shall adhere to the established ethics, standards and practices of the American Polygraph Association (APA). In addition, the examiner shall demonstrate competency according to APA professional standards and conduct of polygraph examinations in a manner that is consistent with the accepted standards of practice.
- **Licensure:** Examiners shall be licensed by the State's regulatory Board (if applicable).
- All polygraph examinations are audio or video taped in their entirety (videotaping is preferred).

47

POLYGRAPH EXAMINERS (STAFF REQUIREMENTS)...

- Polygraph examiners provide a typed report **within 10 calendar days** to the USPPSO outlining findings and include the following information (if necessary to explain findings in any hearing or case evaluation conference): date and time of examination; beginning and ending times of examination; reason for examination; referring Officer; name of client; case background; instant offense and conviction; any pertinent information obtained outside the exam (colateral information if available); statement attesting to the client's suitability for polygraph testing (medical, psychiatric, developmental); list of defendant/offender's medications; date of last post-conviction examination (if known); summary of pretest and post-test interviews, including disclosures or other relevant information provided by the client; examination questions and answers; examination results; reasons for inability to complete exams (if applicable); and any additional information deemed relevant by the polygraph examiner (e.g., behavioral observations or verbal statements).
- Consent forms, specific to the polygraph procedures shall be read, signed, and dated by the client. If the defendant/offender refuses to sign the form(s) or submit to testing, the examiner shall contact the USPPSO immediately, but no later than within 24 hours of refusal. In such a case, testing will be discontinued until further instructions are received from the USPPSO.
- Polygraph examinations are subject to quality review. Polygraphs shall submit their complete records for independent quality review upon USPPSO request.
- Files shall include at a minimum, the name, date, examination location, copy of consent forms, pretest worksheet, copy of test questions, all case briefing materials, copy of charts, an examiner hand score sheet, the audio or video tape, and the polygraph results. Copies of all the material are to be forwarded to the USPPSO at the expiration of the contract, to be kept in the USPPSO file.
- Examiners shall notify the USPPSO immediately but no later than 24 hours if the client fails to report for testing, conduct violating a condition of supervision occurs, new third party risk issues arise, or any factors are identified which increase general risk of additional sex offenses. If the assigned USPPSO is not available, practitioners shall notify a supervisor or the duty officer.
- If the client refuses to submit to polygraph testing, based on a fifth amendment concern, testing shall be discontinued immediately and guidance sought from the USPPSO.

48

PSYCHOTROPIC MEDICATION

- **Medication Monitoring** (6051) - prescribe and evaluate the efficacy of psychotropic medications.
- Report the name of the authorized practitioner who provided the medication monitoring, date, service code, and comments (i.e., adjustment, responsiveness, need for change in medication, etc.) on the Monthly Treatment Report (Prob46).
- Monitoring conducted by a licensed psychiatrist, medical doctor/physician, or other qualified practitioner with current prescriptive authority.
- Prescribe generic drugs when available and seek medication pricing from a minimum of three (3) sources on an ongoing basis to occur no less than quarterly and utilize the source with the lowest cost to the judiciary.

49

COPAYMENT COLLECTION



COLLECT COPAYMENT AUTHORIZED ON THE PROGRAM PLAN (PROBATION FORM 45) AND DEDUCT ANY COLLECTED COPAYMENT FROM THE APPLICABLE INVOICE SUBMITTED TO THE JUDICIARY



PROVIDE BILLS AND RECEIPTS FOR COPAYMENTS TO CLIENTS



KEEP AN INDIVIDUALIZED RECORD OF COPAYMENT COLLECTION. MAKE IT AVAILABLE FOR THE USPPSO REVIEW, AND HAVE SYSTEMS IN PLACE TO BOTH FOLLOW-UP ON COLLECTION OF OUTSTANDING AMOUNTS AND RESOLVE ANY DISCREPANCIES IN THE AMOUNT OWED.



DOCUMENT WITHIN THE MONTHLY TREATMENT REPORT AND THE DAILY TREATMENT LOG. LOG ANY COPAYMENT RECEIVED OR WHETHER THE EXPECTED COPAYMENT WAS NOT PROVIDED, AS WELL AS THE AMOUNT OF ANY OUTSTANDING BALANCE

50

COPAYMENT COLLECTION CONT.



Inform USPPSO within 10 calendar days of a client's failure to make a total of three consecutive scheduled copayments.



Administrative Fee (1501) - a reasonable monthly fee to administer the collection of fees from clients, not exceeding five (5) percent of the monthly funds collected.

51

P\S'S RECORDS

• File Maintenance

- Maintain a secure filing system
- Segregate client files from other vendor records
 - Pretrial and post-conviction files must be separated
- Keep a separate file for each client
- Create a new file when a client is placed on post-conviction supervision and continues treatment
- Maintain files for 3 years after final payment is received
 - Closed files must remain segregated

52

DISCLOSURE



OBTAIN CLIENT'S AUTHORIZATION TO DISCLOSE CONFIDENTIAL HEALTH INFORMATION TO USPPSO



PRIOR TO DISCLOSING RECORDS UNDER 42 C.F.R. PART 2 AND 45 C.F.R. § 160.201 TO 205 AND PART 164, PLEASE ADVISE AND DISCUSS WITH USPPSO



DISCLOSE INFORMATION ON PRETRIAL SERVICES CLIENTS ONLY AFTER CONSULTING THE USPPSO AND GIVING CONSIDERATION TO THE PRETRIAL SERVICES CONFIDENTIALITY REGULATIONS



NOTIFY THE SUPERVISORY U.S. PROBATION OFFICER WITH OVERSIGHT OF AGREEMENTS OR A DEPUTY CHIEF IMMEDIATELY UPON RECEIPT OF ANY LEGAL PROCESS



DO NOT PREPARE SPECIAL SUMMARIES OR MAKE RECOMMENDATIONS TO THIRD PARTIES

53

FILE CONTENT

- Chronological Notes
- Program Plan (Probation Form 45)
- Authorization to Release Confidential Information
 - Probation Forms 118 or 11E and/or PSA Form 68 and/or 6d
- Monthly Sign-in Sheets
- Urinalysis Log / Results / Chain of Custody forms
- Quarterly Treatment Plans

54

55

UPDATED MONTHLY SIGN-IN LOG

[illegible]

56

CASE STAFFING CONFERENCE



57

VENDOR REPORTS

The vendor shall:

- Provide a report on the client's treatment progress upon USPPSO's request. Reports shall include specific/measurable goals and objectives with target completion dates that are periodically reviewed.
- Provide a written recommendation in the report to whether or not a client's treatment shall be continued or terminated.
- If the vendor recommends treatment termination, the vendor shall provide a reason for this recommendation in the written report (i.e., whether the client responded to treatment and no longer needs aftercare, or whether the client failed to respond to treatment).
- Provide a written quarterly profile on all [one report on all or one report on each] clients discharged from the program each quarter (see Attachment J.I.).

58

VENDOR TESTIMONY

The vendor, its staff, employees, and/or subcontractors shall:

- Appear or testify in legal proceedings convened by the federal court or Parole Commission only upon order of the federal court with jurisdiction, and:
 - a request by the United States Probation and/or Pretrial Services Offices, United States Attorney's Office, or United States Parole Commission; or
 - in response to a subpoena.
- Provide testimony including but not limited to a client's attendance record; drug test results; general adjustment to program; type and dosage of medication; response to treatment; test results; and treatment programs.
- Receive reimbursement for subpoenaed testimony through the Department of Justice based on its witness fee and expense schedule.
- Receive necessary consent/release forms required under federal, state or local law from the Judiciary.
- Not create, prepare, offer, or provide any opinions or reports, whether written or verbal that are not required by this statement of work and the treatment program unless such action is approved in writing by the Chief US Probation Officer or Chief US Pretrial Services Officer.

59

STAFF REQUIREMENTS & RESTRICTIONS

- After award, staff providing services to clients and having access to files must currently not be on supervision, must not be charged with or currently under investigation for a criminal act, must not have been convicted of any sexual offense, and must possess valid certifications and licenses.
- Avoid compromising relationships with clients and staff from our office.
- Do not employ, contract with, or pay any client.
- Notify our office in writing of any staff changes and provide necessary documentation (resume and copy of licenses).

60

FACILITY REQUIREMENTS

Ensure the facility(ies) has adequate access for clients with physical disabilities

Comply with all applicable state, federal, and local laws, and regulations when performing services

STATEMENT OF WORK SECTION E

Inspection and Acceptance

- Discusses the vendor's performance and the right of our office to inspect, monitor, and evaluate the services provided.

61

STATEMENT OF WORK SECTION F

Deliveries/Performance

- Provision of Services
 - Immediate placement of clients into treatment
- Refusal of treatment is only reserved for clients who pose an apparent danger to staff or clients
- Consult our office before terminating clients who violate rules and regulations; however, do take appropriate and immediate action to protect staff and clients

62

STATEMENT OF WORK SECTION G

Agreement Administration Data

- Fiscal Records
 - Treat as confidential & maintain for 3 years after final payment
- Invoices
 - Submit original with supporting documentation by the 10th day of the month for services provided during the preceding month
 - Charge for a session longer or shorter than the prescribed unit time by adjusting the charge up or down in 15 minute increments
- Reimbursement or Copayments
 - Do not request or accept payment for services either directly or indirectly from clients unless authorized

63

STATEMENT OF WORK SECTION H

Special Agreement Requirements

- Indemnification
 - Assume full responsibility for and indemnify our office against any and all losses and damages
- Our office has the right to recover any lost or damaged property, which is being used by the vendor
- Our office is liable for injury only if our office is negligent and injury is recoverable under the Federal Torts Claims Act

64

DRUG-FREE WORKPLACE



WITHIN 30 CALENDAR DAYS AFTER AWARD, NOTIFY EMPLOYEES IN WRITING OF DRUG-FREE WORKPLACE STANDARDS/PROTOCOLS.



AFTER RECEIVING NOTIFICATION AN EMPLOYEE WAS CONVICTED OF A DRUG RELATED OFFENSE, VERBALLY NOTIFY OUR OFFICE WITHIN 48 HOURS AND PROVIDE WRITTEN NOTIFICATION WITHIN 10 DAYS. TAKE ACTION WITH RESPECT TO THE EMPLOYEE WITHIN 30 DAYS.

65

STATEMENT OF WORK SECTION I

Required Clauses

- Public Use of Names of the Federal Judiciary
 - Identify our office as one of the vendor's consumers.
 - Release information about the contract only after receiving written permission from our office.
- Subcontracting
 - Prior to changing subcontractors (teaming), notify our office 30 days prior and obtain written approval.
 - Accept responsibility for ensuring that subcontractors are complying with contract requirements.
 - Subcontractors have no contractual right against our office.

66

STATEMENT OF WORK SECTION I CONT.

Required Clauses cont.

- Option to Extend the Terms of the Agreement
 - By providing 60 days notice, our office can extend the agreement for 30 days after the current expiration date.
 - The total duration of the agreement including any extension shall not exceed 5 years.
- Option to Extend Services
 - Within 30 days of agreement expiration, our office may require continued performance of any service within the limits and at the rates specified in the contract.
 - This provision may be exercised more than once; however, it can not exceed a total of 6 months.

67

STATEMENT OF WORK SECTION J

List of Attachments

J.1 - Program Discharge
Summary Profile

J.7 - Daily Travel Record
(Probation Form 17)

J.8 - Invoice & Change of
Address/Staff

J.10 - Department of Labor
Wage Determination

68

STATEMENT OF WORK SECTION K

Representations, Certifications, and Other Statements of Offerors or Quoters

- Read and provide requested information including your tax ID number

69

STATEMENT OF WORK SECTION L

Instructions, Conditions, and Notice to Offerors

- Certification of Compliance Statement (Attachment A)
 - The offeror certifies it will provide the mandatory requirements stated in Sections C, E, F and G, and comply with terms and conditions of the RFP.
- If the offeror is proposing subcontractor(s) to perform any services, the offeror shall identify the proposed subcontractor(s) and submit separate certification statements from each subcontractor certifying they will provide services in compliance with the requirements of the RFP.

70

STATEMENT OF WORK SECTION L CONT.

Attachment B – Offeror's Background Statement

- Provide copies of all monitoring reports for the previous 18 months from federal, state and local agencies.
 - If a monitoring report for the previous 18 months is not available, a federal, state, and/or local certificate or letter indicating the vendor has a satisfactory or higher rating is acceptable.
- To be considered technically acceptable a vendor must have received ratings of satisfactory or higher.
- Monitoring reports for proposed subcontractors are not required; however, onsite evaluations will be individually performed for all subcontractors.

72

Attachment A OFFEROR'S CERTIFICATION OF COMPLIANCE STATEMENT

As required in Section L.1 - Preparation of Certification of Compliance Statement, the offeror and each proposed subcontractor(s) shall complete the certification below:

I hereby certify on behalf of _____ (Name of Offeror or Subcontractor) that _____ (Name of Offeror or Subcontractor) will provide the mandatory requirements stated in Sections C, E, F and G and all services in strict compliance with requirements, terms, and conditions of the RFP. I understand that failure to perform in accordance with any of the requirements, terms, and/or conditions may result in suspension or discontinuation of referrals or termination of the contract BPA.

SIGNATURE: _____ DATE: _____

TITLE: _____

OFFICIAL: _____ OFFICIAL: _____

71

STATEMENT OF WORK SECTION L CONT.

Attachment B – Offeror's Background Statement

- State expressly each location at which the offeror and any proposed subcontractors intend to provide services in response to this solicitation.
- Include copies of all applicable business and/or operating licenses as required by state and local laws and regulations.
 - Offerors are not required to provide copies of the aforementioned documentation for proposed subcontractors; however, the offeror is responsible for ensuring proposed subcontractors have all applicable business and/or operating licenses as required by state and local laws and regulation.

73

STATEMENT OF WORK SECTION L CONT.

Attachment B – Offeror's Background Statement

- Include copies of compliance with all federal, state and local fire, safety and health codes.
 - Offerors are not required to provide copies of the aforementioned documentation for proposed subcontractors; however, the offeror is responsible for ensuring that proposed subcontractors have appropriate documentation demonstrating compliance with all federal, state and local fire, safety and health codes.
- The offeror warrants all information contained therein is correct and accurately reflects the offeror's ability to perform.

74

Attachment B OFFEROR'S BACKGROUND STATEMENT

As required in Section L.1, Preparation of the Background Statement, the offeror shall prepare a Background Statement below (attach pages as needed labeled as follows to this Attachment number):

CERTIFICATIONS (Check all that apply)

- ☐ I certify herein that all information provided in the BACKGROUND STATEMENT is accurate, complete, and correct.
- ☐ I certify herein that copies of all monitoring reports for the previous 18 months from federal, state and local agencies have been provided, or if a monitoring report for the previous 18 months is not available, a federal, state, and/or local certificate or letter substantiating the vendor has a satisfactory or higher rating has been provided.

SIGNATURE _____ DATE _____

75

STATEMENT OF WORK SECTION L CONT.

Attachment C – Offeror's Staff Qualifications

- Complete for all proposed staff members and subcontractors.
- Complete form/submit resumes, which includes the role of each staff member within your agency.
- Certify staff members are not under investigation for or charged with a criminal offense and/or under any type of supervision within the local, state, or federal systems.
- Certify staff members have not been convicted of any sexual offenses or are required under federal, state or local law to register on the Sexual Offender registry.
- If responding to a sex offender treatment RFP, certify staff members adhere to AISA's ethics, standards, and practices.

76

STAFF QUALIFICATION STATEMENT

Within three business days, the vendor shall notify the CO in writing of any staff changes. For any new staff added under the agreement, the vendor complete the certification section below:

CERTIFICATIONS

By signing below, I certify the following:

- No proposed staff members providing direct delivery of services under this contract are currently under investigation for or charged with a criminal offense and/or under arrest, probation, parole, mandatory release or supervised release (federal, state, or local).
- No proposed staff members providing direct delivery of services under this contract have been convicted of any sex offense (including but not limited to child pornography offense, child exploitation, sexual abuse, rape, or sexual assault) or are required under federal, state or local law to register as an offender/sex offender.
- Staff specified to provide services listed by project code have the required education, relevant experience and current licenses/credentials listed in Section C of the RFP.

PRINTED NAME OF VENDOR: _____

VENDOR SIGNATURE: _____ DATE: _____

Staff Name	Services performed specified by Project Code for each staff person	Education	Relevant Experience	Current Licenses/Credentials

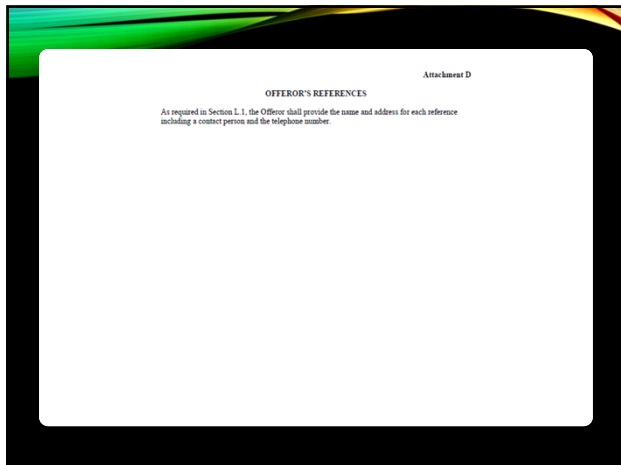
77

STATEMENT OF WORK SECTION L CONT.

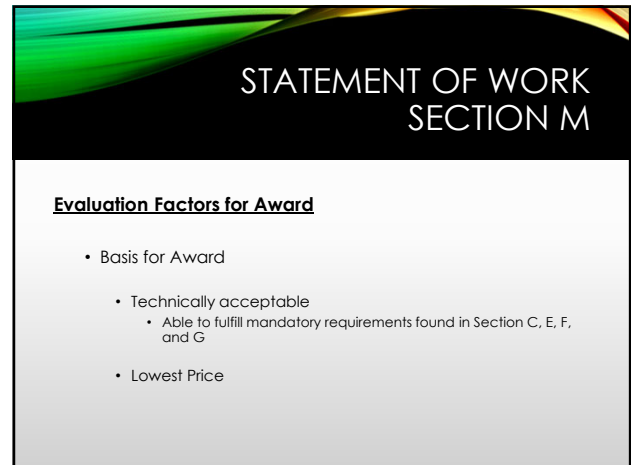
Attachment D – Offeror References

- Provide name, address, telephone number, and contact person of three references (federal, state or local government agencies and/or private organizations) your agency has provided similar treatment or other services to within the past 3 years

78



79



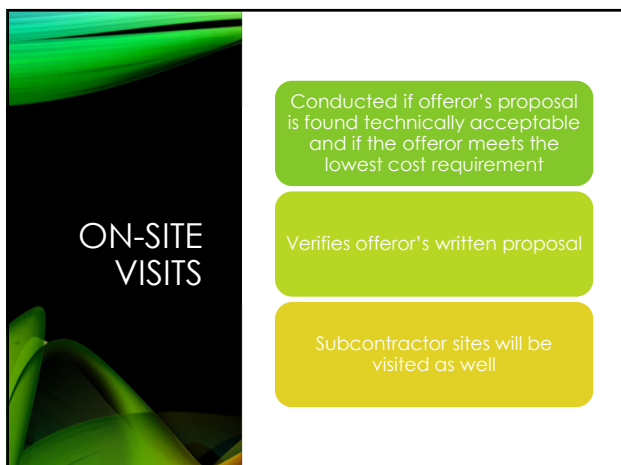
80



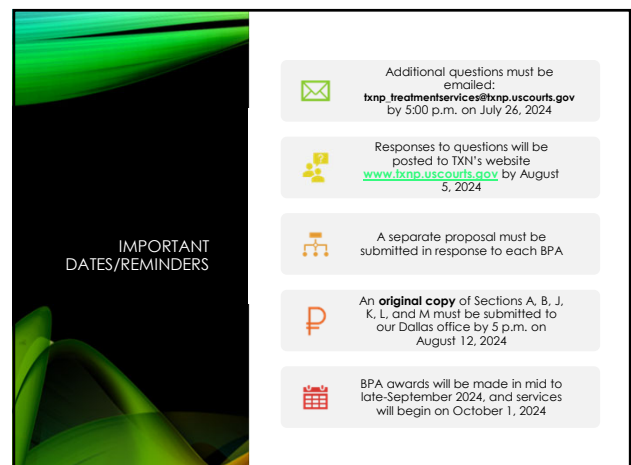
81



82



83



84



85