AO 367
(Rev. 3/24)

| SECTION A | SOLICITATION / OFFER / ACCEPTANCE |
|---|---|

| 1. Solicitation No. | 2. Date Issued | 3. Award No. |
|---|---|---|
| **113J-27-11** | **06/15/2026** | |

| 4. Issued By: | 5. E-mail Address Offer To (if other than Item 4): |
|---|---|
| **Tony Graham, Chief U.S. Probation Office**<br>**P.O. Box 8165**<br>**Savannah, GA 31401**<br>**treatment_services@gas.uscourts.gov** | **Cassandra Nichols-Barrett**<br><br>**treatment_services@gas.uscourts.gov** |

## SOLICITATION

6. Proposals for furnishing the required services listed in Section B will be received electronically via the e-mail address(es) specified in Item 4 or 5

until **04:00 PM** (*hour*) local time **07/15/2026** (*date*)

| 7. For Information call: | |
|---|---|
| a. Name **Cassandra Nichols-Barrett** | b. Telephone **(912) 650-4161** |

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## OFFER

*8. In compliance with the above, the undersigned agrees, if this offer is accepted within _____calendar days (365 calendar days unless a different period is inserted by the offeror) from the date for receipt of offers specified above, to furnish any or all items upon which prices are offered at the price set opposite each item, delivered at the designated point(s), within the time specified in the schedule.*

| 9. DISCOUNT FOR PROMPT PAYMENT *(See Section I, Clause No. 52-232-8)* | 10 CALENDAR DAYS % | 20 CALENDAR DAYS % | 30 CALENDAR DAYS % | CALENDAR DAYS % |
|---|---|---|---|---|

| 10. ACKNOWLEDGEMENT OF AMENDMENTS *(The offeror acknowledges receipt of amendments to the SOLICITATION for offerors and related documents numbered and dated:* | AMENDMENT NO. | DATE | AMENDMENT NO. | DATE |
|---|---|---|---|---|
| | | | | |
| | | | | |

11. NAME AND ADDRESS OF OFFEROR

12. Telephone No. (Include area code)

16. ☐ AWARD

Your offer on Solicitation Number _____, including the additions or changes made by you which additions or changes are set forth in full above, is hereby accepted as to the items listed above and on any continuation sheets.

13. NAME AND TITLE OF PERSON AUTHORIZED TO SIGN OFFER *(Type or print)*

17A. NAME OF CONTRACTING OFFICER

14. Signature

15. Offer Date

17B. UNITED STATES OF AMERICA

BY _____ (*Signature Of Contracting Officer*)

17C. DATE SIGNED

## SECTION B - SUPPLIES OR SERVICES AND OFFEROR'S PRICES

The United States District Court for the Southern District of Georgia is soliciting a vendor to provide substance use, mental health, and/or sex offender treatment services. A vendor must be capable of providing services within a geographic area encompassing Bulloch, Candler, Emanuel, Evans, Jenkins, and Screven Counties .

As a result of this solicitation the Government intends to enter into a Blanket Purchase Agreement (BPA). For this BPA, approximately 1 to 2 vendors are needed to provide the required services. The Government reserves the right to award to a single vendor. If the Government awards to more than one vendor, each vendor placed on the BPA will receive a share of the total quantity of Estimated Monthly Quantities stated.

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. In the event the Government has awarded to more than one vendor on a BPA, referrals will be rotated 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 four 12-month options, shall not exceed 60 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. An asterisk * indicates a requirement line item which has been modified under "Local Services." Offerors shall submit pricing and proposal information related to only the required services. Services proposed, but not required, will not be evaluated or included under any resultant agreement. Offerors failing to provide pricing on all identified project codes (with the exception of actual cost or administrative fees), will be considered technically unacceptable.

Note: the fiscal year for the federal Government begins on October 1 of one calendar year through September 30 of the next. Pricing shall include the base fiscal year, as well as pricing for each fiscal option year.

Note: Estimated Monthly Quantities (EMQs) represent the estimated total monthly quantities to be ordered per project code. However, EMQ's are estimates only and do not bind the government to meet these estimates.

**SEX OFFENSE SERVICES FOR POST CONVICTION:**

| | PROJECT CODE | REQUIRED SERVICES | ESTIMATED MONTHLY QUANTITY | | UNIT PRICE |
|---|---|---|---|---|---|
| X | 5012 | Sex Offense Evaluation | **Base Year** | 1 | |
| | | | **Option Year 1** | 1 | |
| | | | **Option Year 2** | 1 | |
| | | | **Option Year 3** | 1 | |
| | | | **Option Year 4** | 1 | |
| | | | | **Unit: per report (total price)** | |

| | PROJECT CODE | REQUIRED SERVICES | ESTIMATED MONTHLY QUANTITY | | UNIT PRICE |
|---|---|---|---|---|---|
| X * | 6012 | Sex Offense Individual Counseling | **Base Year** | 15 | |
| | | | **Option Year 1** | 15 | |
| | | | **Option Year 2** | 15 | |
| | | | **Option Year 3** | 15 | |
| | | | **Option Year 4** | 15 | |
| | | | | **Unit: per 30-minute session** | |

| | PROJECT CODE | REQUIRED SERVICES | ESTIMATED MONTHLY QUANTITY | | UNIT PRICE |
|---|---|---|---|---|---|
| X * | 6022 | Sex Offense Group Counseling | **Base Year** | 20 | |
| | | | **Option Year 1** | 20 | |
| | | | **Option Year 2** | 20 | |
| | | | **Option Year 3** | 20 | |
| | | | **Option Year 4** | 20 | |
| | | | | **Unit: per 30-minute session** | |

**REIMBURSEMENT/COPAYMENT÷**

| PROJECT CODE | REQUIRED SERVICES | ESTIMATED MONTHLY QUANTITY |
|---|---|---|

| | | | | |
|---|---|---|---|---|
| **X** | 1501 | Administrative Fee | **Base Year** | Unknown |
| | | | **Option Year 1** | Unknown |
| | | | **Option Year 2** | Unknown |
| | | | **Option Year 3** | Unknown |
| | | | **Option Year 4** | Unknown |
| | | | | **Unit: unknown** |

# SECTION C. DESCRIPTION/STATEMENT OF WORK

## PROVISION OF SERVICES

The United States Probation and Pretrial Services Office (hereafter USPO/USPSO) shall provide a Probation Form 45 for each defendant/person under supervision that authorizes the provision of services. The vendor shall provide services strictly in accordance with the Probation Form 45 for each defendant/person under supervision. The Judiciary shall not be liable for any services provided by the vendor that have not been authorized for that defendant/person under supervision on the Probation Form 45. During treatment, the United States Probation or Pretrial Services Officer may issue amended Probation Form 45's to reflect any changes in the service requirements. The USPO/USPSO will notify the vendor in writing via Probation Form 45 when services are to be terminated. The Judiciary shall not be liable for any services provided by the vendor subsequent to the written notification.

## INTRODUCTION

A. Pursuant to the authority contained in 18 U.S.C. §§ 3154 and 3672, contracts or Blanket Purchase Agreements may be awarded to provide services for defendants/persons under supervision who are drug-dependent, alcohol-dependent, and/or suffering from a psychiatric disorder. Such services may be provided to federal defendants/persons under supervision supervised by the USPO/USPSO, under the terms of this agreement. The vendor shall submit separate invoices for services provided to the referring agency (USPO or USPSO).

   **Note regarding pretrial services defendants:** The vendor shall not ask questions pertaining to the instant offense (pending charges) or ask questions or administer tests that compel the defendant to make incriminating statements or provide information that could be used in the issue of guilt or innocence. If such information is divulged as part of an evaluation or treatment, it shall not be included in the written report.

B. The services to be performed are specified in Sections B and C of this agreement. The vendor shall comply with all requirements and performance standards of this agreement to ensure the effective and efficient delivery of services. The vendor is responsible for their knowledge of the agreement and shall adhere to these standards to maintain the quality and integrity of the authorized services.

C. The judiciary will refer defendants/persons under supervision on an "as needed basis." The judiciary does not guarantee referrals for a specific quantity of services or a specific number of persons.

**DEFINITIONS**

A. **"Judiciary"** means United States Government.

B. **"Authorized representative"** means any person, persons, or board (other than the contracting officer and Chief Probation Officer/Chief Pretrial Services Officer) authorized to act for the head of the agency.

C. **"Contracting Officer"** (i.e. CO) means the duly authorized representative to execute this Agreement on the behalf of the Judiciary, and any other successor Contracting Officer who has responsibility for this agreement. The term includes, except as otherwise provided in this Agreement, the authorized representative of a Contracting Officer acting within the limits of their written authority.

D. **"Defendant/Person Under Supervision"** means any pretrial releasee, probationer, parolee, mandatory releasee, mandatory parolee, or supervised releasee receiving drug/alcohol testing and/or substance use assessment/treatment, mental health assessment/evaluation/treatment, and or sex offense specific evaluation/treatment/testing while under the supervision of the Federal Probation or Pretrial Services Office. Hereinafter, the term defendant applies to those on pretrial supervision, whereas person under supervision applies to those on post-conviction supervision.

E. **"U.S. Probation Officer"** (i.e., USPO) and **"U.S. Pretrial Services Officer"** (i.e., USPSO) means an individual appointed by the United States District Court to provide pretrial, presentence and supervision (pre and post sentence) services for the court. USPO and USPSO refers to the individual responsible for the direct supervision of a defendant/person under supervision receiving drug/alcohol testing and/or substance use assessment/treatment, mental health assessment/evaluation/treatment, sex offense specific evaluation/treatment/testing, and/or specialized treatment for pretrial defendants charged with a sex offense.

F. **"Designee"** means the person selected by the Chief Probation Officer or the Chief Pretrial Services Officer to act in their behalf in drug, alcohol, and mental health treatment matters.

G. **"Telehealth"** includes providing health care delivery, assessment, diagnosis, consultation, and treatment and the transfer of medical data through interactive audio, video, or electronic/data communications.

H. **"Clarifications"** are limited exchanges, between the Judiciary and offerors that may occur when award without discussions is contemplated. If award will be made without conducting discussions, offerors may be given the opportunity to clarify certain aspects of proposals or to resolve minor or clerical errors.

I. **"AOUSC"** refers to the Administrative Office of the U.S. Courts.

J. **"Probation Form 45"** is the referring document submitted by the USPO/USPSO per defendant/person under supervision that outlines only those services the vendor is authorized to provide and invoice to the Judiciary. It should be noted the Probation Form 45 only requires the signature of the referral agent.

K. **"Monthly Sign-In Log"** is a document the vendor will use for each defendant/person under supervision to verify services are being offered/provided per Probation Form 45 requirements. The Monthly Sign In Log includes a place for defendant/person under supervision to sign for services based on project code, with a time in/out, vendor initials, co-payment received, and comments (to

include a comment if the defendant/person under supervision failed to report, if no services were provided/received within the month, and if telehealth was provided including the means in which the session was provided (teleconference, video conference, internet). This document accompanies the monthly invoice.

L. **"Case Staffing Conference"** is a collaborative meeting involving the officer, the vendor, and when possible, the defendant/person under supervision, to exchange information, identify issues, and ensure the purpose of services is focused on targeting the identified risk and needs of the individual.

M. **"DSM"** is the Diagnostic and Statistical Manual of Mental Disorders and "**ICD**" is the International Classification of Diseases.

N. **"Co-payment"** is any payment from defendant/person under supervision.

O. **"AMO"** is the Acquisition Management Office at the Administrative Office of the U.S. Courts.

P. **"PCRA"** means the Post-Conviction Risk Assessment, which is an assessment administered by the USPO with the person under supervision used to determine risk level, identify dynamic risk factors (criminogenic needs) and criminal thinking styles. A copy of the PCRA interpretation report with the identified risk level should be provided to the treatment vendor with the referral for services.

Q. "**Criminogenic Risk"** includes factors in a person under supervision's life that are directly related to recidivism. The most significant are Cognitions, Alcohol and Drugs, Employment/Education, Social Networks and Criminal History.

R. **"PTRA"** means the Pretrial Risk Assessment, which is an assessment administered by the USPSO with the defendant used to determine failure to appear and new criminal arrests or revocations due to technical violations.

## MANDATORY REQUIREMENTS

For Project Codes in Section B, the corresponding paragraphs in this statement of work shall be considered mandatory requirements, as well as the sections listed below:

A. Defendant/Person under supervision Reimbursement and Co-payment
B. General Requirements
C. Notifying USPO/USPSO of Defendant/Person under Supervision Behavior
D. Staff Requirements and Restrictions
E. Facility Requirements
F. Local Services (if applicable)

## SEX OFFENSE SERVICES FOR POST-CONVICTION

### 1. Sex Offense Evaluation (5012)

A sex offense evaluation (also commonly known as a "psychosexual evaluation") is a comprehensive evaluation, meant to provide a written clinical evaluation of a defendant's/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 defendant/person under supervision; 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/person under supervision.

The vendor shall provide:

a. A **sex offense evaluation (5012)** for the purposes of assessing risk factors and formulating a treatment plan. A sex offense evaluation of a defendant/person under supervision shall be completed **within 30 business days** of receiving the referral, any exceptions to the time frame shall be approved by the CO and documented by the vendor (within the defendant/person under supervision's file), and shall consider the following: sexual developmental history and evaluation for sexual arousal/interest, deviance and paraphilias, 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.

b. A typed report to the USPO/USPSO **within 10 business days** after completion of evaluation. The report shall include the following:

(1) Vendor's/Evaluator's contact information, reason for referral, and/or procedures/tests administered during evaluation, and sources of information for the report.
(2) Dates of all tests administered, and date report was prepared.
(3) Description of all tests administered and results of the testing.
(4) Specific diagnostic impressions and recommendations for treatment. If treatment is not indicated, this should be clearly stated. If treatment is indicated, all interventions recommended should be detailed (i.e., group therapy, aversion therapy, medications), the level and intensity of sex offense treatment, treatment of coexisting conditions.
(5) Specific recommendations for community management, the level and intensity of behavioral monitoring needed, the types of external controls which should be considered specifically for defendant/person under supervision (e.g., controls of work environment, leisure time, or transportation; life stresses, or other issues that might increase risk and require increased supervision). This must include the level of environmental restriction recommended if results allow for such determination.
(6) Assessment of responsivity factors, including motivation, denial,

cognitive functioning, personality traits, mental health issues, ethnocultural factors, literacy, communication barriers, physical disability, trauma history, and strengths.

(7) Referral for medical/pharmacological treatment, if indicated; and

(8) Methods to lessen victim impact (if available).

The vendor shall ensure:

a. A **sex offense evaluation** is provided by a master's or doctoral level practitioner, who is licensed by their state's regulatory board, and adheres to the established ethics, standards and practices of state regulatory sex offender management boards (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 Guidelines published by Association for the Treatment and Prevention of Sexual Abuse (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.

b. The practitioner uses at least one actuarial risk assessment AND at least one stable dynamic risk assessment that has been researched and demonstrated to be statistically significant in the prediction of re-offense. Examples of actuarial risk assessment include but are not limited to: SORAG and STATIC 99R. Examples of stable dynamic risk assessments include, but are not limited to: Stable 2007, Sex Offender Treatment Intervention Progress Scales (SOTIPS), Structured Risk Assessment - Forensic Version (SRA-FV), Violence Risk Scale-Sexual Offender Version (VRS-SO). For situations in which the person under supervision does not fall under a validated risk assessment (e.g. charge/conviction of Child Sexual Abuse Material Possessor), the practitioner shall complete all content areas of the actuarial and dynamic risk assessments to determine treatment and supervision focus; however, not give a score on the assessment (note: the assessment will only be used to understand targeted areas and not used for risk prediction/recidivism).

c. The practitioner uses instruments with demonstrated reliability and validity that have specific relevance to evaluating persons charged with or convicted of sex offenses.

d. 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 defendant's/person under supervision's sexual behavior. The practitioner shall also review and consider information from any clinical polygraphs, psychological/psychiatric evaluations, Visual Reaction Time (VRT) Measure of Sexual Interest, etc., if completed by the practitioner or provided by the USPO/USPSO.

e. If the defendant/person under supervision fails to report for evaluation, the vendor shall follow notification protocols outlined in this Statement of Work under Notifying USPO/USPSO of Defendant/Person Under Supervision Behavior.

2. **Sex Offense Treatment for Post-Conviction**

Sex offense treatment is defined as treatment interventions used to help persons convicted of a sex offense accept responsibility, have an increased level of recognition, and focus on details of actual sexual behavior, arousal, fantasies, planning and rationalizations of their sexually deviant thoughts and behavior. Sex offense treatment gives priority to the safety of a person under supervision's victim(s) and the safety of potential victims and the community. Consistent treatment accessibility is essential to ensuring individuals can attend sessions without undue hardship. Additionally, vendors must provide flexible scheduling options, and if applicable, adhere to the additional requirements outlined in the Local Services Section regarding hours of operation and other identified areas of need.

The vendor shall provide treatment only as authorized on the Probation Form 45 and shall initiate services **within 10 business days** of receiving the initial or amended Probation Form 45, any time frame exceptions shall be approved by the CO and documented by the vendor (within the defendant/person under supervision file).

All the following services may be ordered on the Probation Form 45, individually or in combination:

(1) **Sex Offense Individual Counseling (6012)** to one (1) person under supervision.

(2) **Sex Offense Group Counseling (6022)** to two (2) or more persons under supervision but not more than ten (10).

The vendor shall ensure that:

a. **Sex offense treatment** is <u>provided by a master's or doctoral level practitioner</u>, who is

licensed by their 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 Guidelines published by the Association for the Treatment and Prevention of Sexual Abuse (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.

b. Practitioners employ treatment methods that are supported by current professional research and practice. Practitioners match the amount, intensity, and duration of treatment to the person under supervision's risk and needs characteristics.

c. Practitioners employ comprehensive sex offense treatment methods. Self-help treatments shall be used only as adjuncts to comprehensive treatment.

d. Treatment interventions are matched to specific problems, risk, and needs of the defendant/person under supervision considering gender, ethnicity, and culturally responsive treatment practices. Incorporate Cultural Competence skills to effectively communicate and interact with individuals from diverse backgrounds, utilizing culturally appropriate interventions and treatment plans. Employ a Person-Centered Approach that prioritizes the individual's cultural identity, ensuring their cultural values and beliefs are respected and integrated into their care. Use a Trauma Informed Approach being aware of the prevalence and impact of trauma, and how it may affect behavior and treatment engagement.

e. Practitioners shall maintain professional judgment and objectivity, regardless of personal feelings or beliefs about a defendant/person under supervision or their charge(s)/conviction(s). If a practitioner is unable to provide competent services for any reason, the practitioner shall consult with the USPO/USPSO to address the concerns.

f. In collaboration with the USPO, practitioners shall review the completed Model Sex Offense History Disclosure Polygraph Questionnaire August 26, 2023, developed and endorsed by the American Polygraph Association with the person under supervision prior to their participation in the Sexual History Polygraph examination.

g. In collaboration with the USPO, practitioners assess appropriate treatment interventions if the person under supervision offers any admissions or has deceptive/inconclusive results from a Clinical Polygraph or Maintenance Examination.

h. The content of sex offense treatment (6012, 6022, 6032 and 6090) shall be designed to and include:

**Primary Treatment Phase**:

In cooperation with the supervising officer, treatment methods should incorporate the results of the Post-Conviction Risk Assessment (PCRA) and information gained from polygraph examinations, including sexual history examinations and/or maintenance examinations.

Identify and treat persons convicted of a sex offense's stable/acute dynamic risk factors, provide effective interventions and discuss and integrate protective factors.

1) Hold person under supervision accountable for their behavior and assist them in maintaining their accountability.
2) Require person under supervision to complete a full sex history disclosure and to disclose all current sex offending behaviors.
3) Reduce person under supervision' denial and defensiveness.
4) Decrease and/or manage person under supervision' deviant sexual urges and recurrent deviant fantasies while increasing appropriate sexual thoughts.
5) Educate person under supervision about the potential for re-offending and specific risk factors.
6) Teach person under supervision self-management methods to avoid a sexual re-offense.
7) Identify and treat the person under supervision' thoughts, emotions, and behaviors that facilitate sexual re-offenses or other victimizing or assaultive behaviors.
8) Identify and treat person under supervision' cognitive distortions.
9) Educate person under supervision about non-abusive, adaptive, legal, and pro-social sexual functioning satisfying, satisfying life that is incompatible with sexual offending.
10) Educate person under supervision about the impact of sexual offending upon victims, their families, and the community.
11) Provide person under supervision with training in the development of skills needed to achieve sensitivity and empathy with victims.
12) Identify and treat person under supervision's personality traits and deficits that are related to their potential for re-offending.
13) Identify and treat the effects of trauma and past victimization of person under supervision as factors in their potential for re-offending. (It is essential that person under supervision be prevented from assuming a victim stance in order to diminish responsibility for their actions).
14) Identify social deficits and strengthen person under supervision' social and relationship skills, where applicable; develop and enhance healthy interpersonal and relationship skills, including

communication, perspective, talking and intimacy.

15) Require person under supervision to develop a written plan for preventing a re-offense; the plan should identify antecedent thoughts, feelings, circumstances, and behaviors associated with sexual offenses.
16) Provide treatment or referrals for person under supervision with co-existing treatment needs such as medical, pharmacological, psychiatric needs, substance use, domestic violence issues, or disabilities.
17) Maintain communication with other significant persons in the person under supervision's support systems to the extent possible to assist in meeting treatment goals.
18) Evaluate existing treatment needs based on developmental or physical disabilities, cultural, language, sexual orientation, and gender identity that may require different treatment arrangements.
19) Identify and treat issues of anger, power, and control; and
20) (For 6032) Educate individuals who are identified as the person under supervision's support systems about the potential for re-offending and a person under supervision's specific risk factors, in addition to requiring a person under supervision to disclose critical issues and current risk factors.

**Maintenance Treatment Phase:**

Maintenance phase treatment is defined as treatment interventions used to help persons convicted of a sex offense adhere to their relapse prevention plan and ensure the person under supervision's dynamic risks continue to be managed appropriately. Vendors may elect to have a person utilize a "risk management plan" or "success plan" in lieu of a relapse prevention plan.

In collaboration with the supervising officer, the vendor should determine if all identified stable dynamic risk factors are mitigated and the goals and objectives of primary treatment have been successfully met. If after review, the supervising officer and the vendor are in agreement that the person under supervision has obtained the skills and ability to manage their deviant thoughts, has addressed all identified stable dynamic risk factors or sex offense treatment goals and objectives, and has a relapse prevention plan in place, then transition from primary treatment to the maintenance phase should be considered. A transition to the Maintenance Phase could also result from the collaborative decision the person under supervision is unlikely to benefit substantially from further treatment in the Primary Treatment Phase.

Maintenance phase of treatment should motivate the person under supervision to avoid high risk behaviors related to increased risk for re-offense. Utilizing skills

learned through primary treatment along with their relapse prevention (or similar) plan to function successfully with a lessened quantity of treatment. In this phase, persons under supervision have successfully addressed the underlying issues in their offending behavior and have developed skills to lead a pro-social, non-offending life.

The duration and frequency of contact between the person convicted of a sex offense and the vendor, during the *Maintenance* phase, should be determined based on the risk and needs of the individual. This contact could be as frequent as the individual requires to adhere to their relapse prevention plan (for example, monthly or quarterly sessions).

Persons convicted of a sex offense may require different levels of intervention throughout their terms of supervision. The supervising officer should view sex offense treatment on a continuum of services designed to address the acute and stable dynamic risk factors presented by the individual and not as a finite process. If at any time during the maintenance phase the person under supervision, the supervising officer or the vendor assess that the person under supervision is having difficulty effectively implementing their relapse prevention (or similar) plan, they may be moved back into primary treatment until which time the risks identified have been mitigated.

i. The vendor shall follow notification protocols outlined in this Statement of Work under Notifying USPO/USPSO of Defendant/Person Under Supervision Behavior.

j. Any factors that may increase risk of further sex offenses, or identified third-party risk issues, shall be immediately communicated to the USPO or follow other notification protocols outlined by the CO.

k. Only face-to-face contacts with the person under supervision (or family) shall be invoiced, unless otherwise approved by the CO.

The vendor shall provide:

a. A typed comprehensive treatment plan, at the onset of treatment and at least **every 90 days**. The **treatment plan** shall:

(1) Provide for the protection of victims and potential victims and not cause the victim(s) to have unsafe and/or unwanted contact with the person under supervision.

(2) Be individualized to meet the person under supervision's unique needs.

(3) Identify the issues to be addressed, including multi-generational issues if indicated, the planned intervention strategies, and the goals

of treatment.

(4) Define the person under supervision's expectations of treatment, the expectations of their family (when possible) and support systems of the treatment process and address the issue of ongoing victim input (if possible).

(5) Identify short and long-term goals the person under supervision will attempt to achieve that related to the person's risk factors, needs, and responsivity.

(6) Include measurable objectives which relate to the achievement of corresponding goals and program requirements.

(7) Define the type and frequency of services to be received.

(8) Specific criteria for treatment completion and the anticipated timeframe; and

(9) **Primary Phase:** The practitioner completes at least one actuarial risk assessment (if not already completed and available) AND at least one stable dynamic risk assessment that has been researched and demonstrated to be statistically significant in the prediction of re-offense. This assessment is updated at intervals consistent with the assessment tool and used to aid in identifying sex offense treatment goals and objectives the person under supervision has completed. Examples of actuarial risk assessment include but are not limited to: SORAG and STATIC 99R. Examples of stable dynamic risk assessments include, but are not limited to: Stable 2007, Sex Offender Treatment Intervention Progress Scales (SOTIPS), Structured Risk Assessment - Forensic Version (SRA-FV), Violence Risk Scale-Sexual Offender Version (VRS-SO). For situations in which the person under supervision does not fall under a validated risk assessment (e.g. charge/conviction of Child Sexual Abuse Material Possessor), the practitioner shall complete all content areas of the actuarial and stable dynamic risk assessments to determine treatment and supervision focus; however, not give a score on the assessment (note: the assessment will only be used to understand targeted areas and not used for risk prediction/recidivism).

**Maintenance Phase:** The practitioner completes at least one stable dynamic risk assessment, if applicable (change in circumstances that would warrant a reassessment), that has been researched and demonstrated to be statistically significant in the prediction of re-offense. Examples of stable dynamic risk assessment include, but are not limited to: Stable 2007, Sex Offender Treatment Intervention Progress Scales (SOTIPS), Structured Risk Assessment – Forensic Version (SRA-FV), Violence Risk Scale - Sexual Offender Version (VRS-SO). For situations in which the person

under supervision does not fall under a validated risk assessment (e.g. charge/conviction of Child Sexual Abuse Material Possessor), the practitioner shall complete all content areas of the stable dynamic risk assessment to determine treatment and supervision focus; however, not give a score on the assessment (note: the assessment will only be used to understand targeted areas and not used for risk prediction/recidivism). This assessment is updated at intervals consistent with the assessment tool and used to aid in person under supervision has completed.

b. If the therapeutic interventions are no longer deemed necessary, a typed **transitional care plan** should be submitted to the USPO in accordance with Vendor Reports under section f (2).

3. **REIMBURSEMENT/CO-PAYMENT**

The vendor shall:

a. Collect any co-payment authorized on the Probation Form 45 and deduct any collected co-payment from the next invoice to be submitted to the judiciary. Ensure the co-payment does not exceed the cost of the service provided; however, the vendor can collect co-payment in arrears based on the rate established on the Probation Form 45. Proper documentation of the collected co-payment must be included on the invoice and supporting documentation.

b. Accept more than one co-payment type (e.g. check, credit card, cash, cashier's check, web-based transactions, etc.).

c. Provide bills and receipts for co-payments to defendants/persons under supervision at the time of payment collection. The vendor shall keep an individualized record of co-payment collection and have systems in place to both follow-up on collection of outstanding amounts and to resolve any discrepancies in the amount owed.

d. Document within the Monthly Sign-In Log any co-payment received or whether the expected co-payment was not provided.

e. In conjunction with submission of invoices, provide an outstanding co-payment due report itemizing the total amount outstanding per defendant/person under supervision. The vendor is responsible for ensuring that all records are accurate, up-to-date, and readily accessible. This includes maintaining detailed logs of all transactions and communications related to co-payment collections, providing timely updates on outstanding balances, and addressing promptly and effectively

any issues or disputes that may arise. The vendor must also ensure compliance will all relevant regulations and guidelines pertaining to financial transactions, billing insurance, Medicaid, and Medicare, as well as record-keeping. Adherence to these regulations is crucial for maintaining the integrity and legality of the billing process.

f. Reimburse the Judiciary as directed in Section G.

**Note:** The vendor may charge an **Administrative Fee (1501)** of five (5) percent of the monthly fees, which is a reasonable monthly fee, to administer the collection of fees from defendants/persons under supervision.

## 4. GENERAL REQUIREMENTS

### a. Defendant/Person under supervision Records and Conferences

(1) File Maintenance

Treatment records shall be the property of the vendors, who are responsible for maintenance, disclosure, and retention. The vendor shall:

(a) Maintain a secure filing system for all information related to defendants/persons under supervision who receive services under this agreement. If information is stored electronically, the vendor shall ensure that it is accessible for review in the format specified by the CO, e.g. paper copy, flash drive, electronic access. The vendor shall timely provide access upon request of the CO.

(b) If maintaining paper files, separate defendant/person under supervision files from other vendor records. This will facilitate monitoring and promote defendant/person under supervision confidentiality.

(c) Create a separate file when a defendant on pretrial services supervision is sentenced to probation supervision but continued in treatment with the vendor. The vendor may copy any information relevant from the pretrial services file and transfer it into the probation file, except for information covered under the Pretrial Services Confidentiality Regulations.

(d) Identify any records that disclose the identity of a defendant/person under supervision as **CONFIDENTIAL.**

(e) Maintain all records for defendants/persons under supervision for three years after receiving final payment, making them available for Judiciary inspection and review. In the event of litigation or settlement of claims arising out of the performance of this agreement, retain these records until final disposition of such appeals, litigation, or claims. This requirement is in addition to, and not a substitute for, other

local/state/federal record retention requirements.

(f) At the written request of the USPO/USPSO, at the expiration of the performance period of this agreement, the vendor shall provide the USPO/USPSO or CO a copy of all defendant/person under supervision records that have not been previously furnished.

(g) The vendor shall comply with the Health Insurance Portability and Accountability Act (HIPAA) privacy rule Security Standards for the Protection of Electronic Protected Health Information set forth at 45 C.F.R. § 164.302 to 318 with regard to electronic information. This includes implementing necessary administrative, physical, and technical safeguards to ensure the confidentiality, integrity, and availability of all electronic protected health information (ePHI) that the vendor creates, receives, maintains, or transmits.

b. **Vendor Obligations for Disclosure of Information**

The vendor shall:

(1) Be responsible for ensuring compliance with all applicable federal, state and local laws and regulations regarding the confidentiality and safeguarding of protected information. As a covered entity this includes adherence to HIPAA.

(2) Protect **CONFIDENTIAL** records from disclosure except in accordance with item number b. (3), (4), (5), (6), (7), and (8) below.

(3) Using an agency specific release of information form, obtain defendant's/person under supervision's written informed consent to disclose confidential health information to the USPO/USPSO, except where permitted or required by law. The vendor, as the covered entity, shall be responsible for determining the appropriateness of personal health information disclosure. If the vendor is unable to obtain this disclosure, the vendor shall notify the USPO/USPSO immediately.

(4) Disclose defendant/person under supervision records upon request of the USPO/USPSO or designee to the USPO/USPSO or designee.

(5) Make its staff available to the USPO/USPSO to discuss treatment of a defendant/person under supervision.

(6) Disclose defendant/person under supervision records only in accordance with 42 C.F.R. Part 2, and 45 C.F.R. § 160.201 to 205 and Part 164, even if the vendor is not otherwise subject to these regulations. Note that the Judiciary is not a covered entity under these regulations. Should the vendor disclose records to someone other than the person receiving services, the vendor shall promptly notify the USPO/USPSO of the request and disclosure. Additionally, the vendor must inform the USPO/USPSO of any exceptions to the disclosure of, or an individual's right of access to, treatment or protected health information that might

apply.

(7) Not disclose "pretrial services information" concerning pretrial services defendants. "Pretrial services information," as defined by the "Pretrial Services Confidentiality Regulations," is "any information, whether recorded or not, that is obtained or developed by a pretrial services officer (or a probation officer performing pretrial services duties) in the course of performing pretrial services." Pretrial Services Confidentiality Regulations, §2.A. Generally, any information developed by an officer performing pretrial services that is shared with the vendor will be confidential pretrial services information. Only a judicial officer or a Chief USPO/USPSO may authorize disclosure of pretrial services information to a third party pursuant to the Pretrial Services Confidentiality Regulations. Any doubts about whether a potential disclosure concerns pretrial services information must be resolved by consultation with the USPO/USPSO.

(8) The vendor and its subcontractors are authorized to access criminal history information available in pretrial services or probation records that have been provided by the USPO/USPSO. This information is provided solely for the purpose of providing services under this contract. Any unauthorized re-disclosure of this information may result in termination of this contract and the imposition of civil penalties. The vendor must ensure that all personnel accessing this information understand the confidentiality requirements and strictly adhere to them to avoid any breaches.

(9) Ensure that all persons having access to or custody of defendant/person under supervision records follow the disclosure and confidentiality requirements of this agreement and federal law.

(10) Notify the CO immediately upon receipt of a subpoena requiring disclosure of defendant/person under supervision records maintained in accordance with this agreement.

(11) As a covered entity, the vendor is responsible for adhering to HIPAA requirements and providing and updating any necessary consent forms that federal, state or local law requires.

c. **File Content**

The vendor's file on each defendant/person under supervision shall contain the following records:

(1) **Chronological Notes** that:

(a) Timely document all significant contacts with the defendant/person under supervision, including those with the USPO/USPSO and others, whether in person, by telephone, or through any other form of protected electronic

communication. These records shall clearly document all notifications of absences and any apparent conduct violating programmatic rules and/or seen or unforeseen risk to the individual and/or the public.

(b) Are in accordance with the professional standards of the individual disciplines and with the respective state law on health care records.

(c) Include a signed disclosure and permission form from the defendant/person under supervision if Artificial Intelligence (AI) will be used for documentation. The consent form shall include a clear explanation of the purpose of AI, how AI works in the delivery of treatment services, the security measures in place, and the defendant's/person under supervision's right to withdraw consent for the use of AI at any time. AI technology shall be HIPAA compliant, secure, and confidential.

(d) Ensure a thorough and accurate record of the defendant's/person under supervision's treatment and progress and should include the following information: sessions attended; topics covered during each session; the defendant's/person under supervision's level of participation and motivation; clinical goals of treatment; methodologies and types of therapy applied any changes made to the treatment plan; the defendant's/person under supervision's observed progress, or lack thereof, toward reaching the goals; specific achievements; instances of failure to attend sessions without prior notice and approval; any failed assignments; programmatic rule violations; and consequences for noted violations.

(e) Are created in English, current and available for review by the USPO/USPSO or CO and by the Probation and Pretrial Services Office (PPSO) at the Administrative Office.

(f) Chronological notes shall be legible, dated and signed/electronically certified by the practitioner, to include the practitioner's licensure/credentials.

(2) Probation Form 45 and **Amended Probation Form 45** that:

(a) The USPO/USPSO prepares which identifies the vendor services to be provided to the defendant/person under supervision, as well as any required co-payments. These services are billed to the Judiciary under the terms of agreement. The Judiciary is not obligated to reimburse for any services that were not authorized on the Probation Form 45, nor for any services provided in excess of services authorized. Discretion for payments rests with the CO.

(b) The USPO/USPSO shall amend the Probation Form 45 when there are changes to the services the vendor shall perform, their frequency, or other

administrative changes (e.g., co-payment amounts). Additionally, the USPO/USPSO will terminate the Probation Form 45 upon termination of services. This ensures the vendor obligations and authorizations are current and accurately documented, reflecting any modifications to the original Probation Form 45.

(3) **Authorization to Release Confidential Information** that:

(a) The defendant/person under supervision and USPO/USPSO and/or other witness sign prior to the defendant's/person under supervision's first appointment with the vendor. This Judiciary-based release of confidential information form is generally submitted with the initial referral packet.
(b) The vendor is responsible for ensuring HIPAA compliant informed consent is obtained and maintained in all files. This includes documenting informed consent in accordance with HIPAA regulations; ensuring all necessary defendant/person under supervision information is securely stored and accessible only to authorized personnel. The vendor shall obtain a signed release of information before releasing any information regarding the defendant/person under supervision or the defendant's/person under supervision's treatment and progress to the USPO/USPSO**.**
(c) The vendor must regularly review and update consent forms and procedures to remain compliant with current HIPAA guidelines.

(4) **Monthly Sign-In Log**

(a) Submitted with the monthly invoice for the corresponding month with one Monthly Sign-In Log per defendant/person under supervision.
(b) Includes all defendant's/person under supervision's scheduled contacts for the month (per project code) and includes vendor comments indicating failure to report on scheduled dates, or noting if a service was provided via telehealth.
(c) Defendant/person under supervision shall sign-in upon arrival to include the time in and time out of service with the vendor initialing to verify accuracy of time in/time out.
(d) Documents any co-payment collected, and
(e) Used by the USPO/USPSO or designee to certify the monthly invoice.
(f) For residential placements, only required to obtain defendant/person under supervision signature on first and last day of placement.

**NOTE:** Allowing anyone undergoing treatment to see the names or signatures of other defendants/person under supervision violates federal confidentiality

regulations regarding treatment records.

(5) **Urinalysis Testing Log** (if applicable) that:

(a) Along with the monthly invoice, is submitted for the month for which the vendor is invoicing.
(b) Shall record all collected urinalysis specimens and has all applicable sections completed:
    1. Defendant's/person under supervision's name and PACTS number
    2. Vendor name and agreement #
    3. Month/Year
    4. Collection Date
    5. Defendant's/person under supervision's signature
    6. Collector's initials
    7. Bar Code number (if applicable)
    8. Special tests requested (if applicable)
    9. Drugs or medication taken
    10. Test Results (if applicable)
    11. Co-pay collected (if applicable)
(c) The vendor shall submit for CO approval if vendor Urinalysis Testing Log form differs from the sample form.
(d) The vendor shall ensure that a defendant/person under supervision signing or initialing an entry Urinalysis Log cannot see the names or signatures of other defendants/person under supervision.

**NOTE:** Allowing participants to see the names or signatures of other defendants/person under supervision violates federal confidentiality regulations regarding treatment records.

d. **Telehealth**

Telehealth may be authorized on a case-by-case basis to provide services outlined within this Statement of Work. The use of telehealth is authorized only after the vendor and the USPO/USPSO review the individual defendant's/person under supervision's case, determine they are appropriate for treatment via telehealth, identify which specific services are suitable for telehealth, and obtain approval from the district's contracting officer or designee. The vendor shall ensure the quality and availability of services remain consistent, whether provided via telehealth or in-person, adhering to all guidelines, and maintaining the highest standards of care.

NOTE: The use of telehealth is intended for the benefit of the Judiciary, not the convenience of the vendor. Telehealth services do not replace the vendor's ability

to provide services in-person when appropriate. This requirement does not override the provisions that mandate the vendor (and any proposed subcontractor) to maintain an acceptable facility located within the defined catchment area.

(1) The vendor is authorized to provide specified services via telehealth, which includes providing health care delivery, assessment, 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 telehealth. The vendor shall also obtain consent of the defendant/person under supervision before the delivery of telehealth services and shall include documentation of the same in the individual's treatment record.

(2) When participants attend sessions, each must confirm their sole presence ensuring no one other than group participants are listening. Each participant will also enter into a confidentiality agreement before being allowed to participate in treatment.

(3) To verify that services were performed, the vendor shall complete the Monthly Sign- In Log with all necessary information; however, the vendor shall print the defendant's/person under supervision's name within the signature field, and the comment section shall reflect the means in which the session was conducted (i.e. teleconference, video conference, internet).

(4) For de-escalation, if an emotionally charged topic was discussed or the defendant/person under supervision appears emotionally agitated, the vendor shall follow up with additional contact later in the day to ensure that the defendant/person under supervision has successfully de-escalated. The vendor shall also remind the defendant/person under supervision to reach out to their social support system at any time.

e. **Case Staffing Conference**

The vendor shall participate in case staffing conferences and document the chronological notes regarding the content of the conference:

(1) Case staffing with the USPO/USPSO can be conducted in person, by telephone, or any other form of protected electronic communication. When applicable, the case staffing may include the vendor, the defendant/person under supervision, and the officer to clearly define expectations and clinical treatment goals. Communication with the officer should be driven by risk, needs, and responsivity specific to the defendant/person under supervision. Additionally, case staffing shall occur:

a) A minimum of **every 30 days** for PCRA high and moderate risk referrals;
b) A minimum of **every 30 days**, regardless of risk level, for residential treatment placements;
c) A minimum of **every 90 days** for all other clinical services referrals; and
d) As requested by the USPO/USPSO.

(2) Case staffing should include, but is not limited to, the following:

a) The defendant's/person under supervision's motivation for treatment.
b) Appropriate type and frequency of treatment.
c) Treatment related goals that are specific, measurable, achievable, relevant and time-bound (SMART goals).
d) PCRA dynamic risk factors and elevated thinking styles (for USPO referrals).
e) Responsivity, cultural considerations for service delivery.
f) Non-compliance with supervision and/or treatment.
g) Community observation, collateral supports, officer delivered interventions.

**NOTE:** The price of case staffing conferences and consultations are included in the prices in Section B.

f. **Vendor Reports (Substance Use, Mental Health, and Sex Offense Treatment Reports)**

The vendor shall submit to the USPO/USPSO, and maintain in the defendant's/person under supervision's file, the following:

(1) A typed **Treatment Plan**, created with the defendant/person under supervision, is submitted **at least every 90 days** that outlines the following:

a) Treatment related goals that are specific, measurable, achievable, relevant and time-bound (SMART) goals,
b) Action steps for the defendant/person under supervision to accomplish the identified treatment goals, to include appropriate type and frequency of treatment,
c) The defendant's/person under supervision's supportive social networks (e.g. family, friends, peer support, co-workers, etc.),
d) Medication management plan (when applicable),
e) Collaboration and coordination for community-based services (when applicable),
f) Skills to assist in managing known risk and symptoms,
g) Adaptable skills for self-management,

h) Recommendation/justification for continued treatment services, and
i) Signed and dated by the vendor and defendant/person under supervision.

(2) A typed **Transitional Care Plan**, created with the defendant/person under supervision, when possible, that is submitted at the conclusion of contract treatment services, but no later than **15 business days** after treatment is terminated.

a. The community is best served when the person under supervision remains drug free, employed, and invested in healthy relationships beyond the period of supervision. Transitioning is defined as the process of moving a person under supervision from contract treatment services to a community-based aftercare program that is managed by the person under supervision. Transitioning from treatment occurs throughout the treatment process to ensure that the person under supervision possesses the tools and community resources necessary to function under decreasing levels of supervision which is monitored by the officer.

b. The typed transitional care plan shall outline the following:

1) the reason for concluding contract treatment services, to include unsuccessful discharge and the reasons why unsuccessful,
2) the defendant's/person under supervision's supportive social networks (e.g. family, friends, peer support, co-workers, etc.),
3) medication management plan (when applicable),
4) collaboration and coordination for community-based services (when applicable),
5) acquired skills to assist in managing known risk and symptoms,
6) adaptable skills for self-management,
7) diagnosis and prognosis, and
8) signed and dated by the vendor, and the defendant/person under supervision when possible.

g. **Vendor Testimony**

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

1) 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. a request by the United States Probation and/or Pretrial Services Offices, United States Attorney's Offices, or United States Parole Commission, or
b. in response to a subpoena.

2) Provide testimony including but not limited to a defendant's/person under supervision's: attendance record; drug test results; general adjustment to program rules; type and dosage of medication; response to treatment; test results; and treatment programs.
3) Receive reimbursement for subpoenaed testimony through the Department of Justice based on its witness fee and expense schedule.
4) Obtain the necessary consent/release forms required under federal, state or local law.
5) Not create, prepare, offer, or provide any opinions or reports related to legal proceedings of the federal court or Parole Commission, whether written or verbal that are not required by the treatment services statement of work or approved in writing by the Chief U.S. Probation Officer or Chief U.S. Pretrial Services Officer in the respective office where the information is requested.

h. **Emergency Services and Contact Procedures**

At the onset of services, the vendor shall establish and make available to all defendants/persons under supervision, emergency contact procedures that are accessible 24 hours a day, 7 days a week. This includes provisions for crisis intervention, schedule changes, local hotlines, and/or situations requiring immediate attention. Furthermore, the vendor shall ensure the availability of emergency services, such as after-hours staff phone numbers and local hotlines, for times when practitioners are not readily available.

i. **Monitoring**

The vendor shall participate in scheduled or unannounced monitoring which shall include:

1. Site inspection which includes the physical inspection of the vendor's facility where services are provided to defendants/persons under supervision to ensure it meets the required regulations and state determined standards.
2. Review of paper or electronic files for content, HIPAA compliant release of information forms, emergency services, case staffing conferences, reports, non-compliance notification, interactions with defendants/persons under supervision, etc.
3. Interviews with vendor/staff providing services under the agreement.
4. Interviews with defendants/persons under supervision receiving services.
5. Interviews with USPO/USPSO referring defendants/persons under

supervision for services.

6. Observation of group counseling or other services under agreement which allows judiciary employees to gather feedback from direct observation to identify areas for improvement in service delivery, enhance understanding of information provided to defendants/persons under supervision, and make informed decisions about the vendor's adherence to the requirements of the agreement. Prior to the group observation, the vendor is responsible for obtaining appropriate, HIPAA- compliant informed consent from all non-federal group participants. The consent should be documented. The vendor is encouraged to have the group observer review and sign a vendor created privacy and confidentiality waiver to ensure the confidentiality and privacy of the participants' during and after the group observation; and
7. Review of invoices submitted under the agreement.

**Within 180 days** of awarding the agreement, or within 180 days of exercising an option to extend the agreement, the vendor shall receive a typed monitoring report from the CO. The monitoring report (see Section J attachments for monitoring report template) will contain a rating of Satisfactory (during the monitoring period, the vendor meets the requirements of the Statement of Work and operated within the terms and conditions of the agreement or there are few deficiencies with the vendor's performance) or Unsatisfactory (during the monitoring period, there are patterns of deficiencies with the performance of the vendor as to the requirements of the Statement of Work that must be corrected.

In the event of an Unsatisfactory rating, the vendor will be provided a timeframe in which they must complete their Corrective Action Plan. **Within five (5) business days** of receipt of the monitoring report, the vendor must submit a Corrective Action Plan outlining in detail how the vendor intends to correct the deficiencies within the time frame provided. Upon expiration of the Corrective Action time frame, the CO will complete a memo or letter documenting the vendor's compliance or noncompliance with the required corrective action plan. It should be noted the vendor must be performing at a Satisfactory rating (or a memo of compliance with Corrective Action Plan), in order to exercise an option to renew the agreement. Unsatisfactory performance can result in discontinued use of a vendor.

## 5. NOTIFYING USPO/USPSO OF DEFENDANT/PERSON UNDER SUPERVISION BEHAVIOR

The vendor shall notify the USPO/USPSO, or follow other notification protocol outlined by the CO, **within 24 hours** or as specified in writing by the CO of defendant/person under supervision behavior including but not limited to:

1) Positive drug or alcohol test results.
2) Attempts to adulterate a urine specimen and/or compromise any drug detection methodology to determine illicit drug usage.
3) Attempts or offers of bribery that involve any actions or suggestions made by the defendant/person under supervision to provide something of value to influence the actions, decisions, or behaviors of another person in an official role. This includes any direct or indirect attempts to offer money, gifts, or other incentives to obtain an unlawful advantage.
4) Attempts at deception and/or failure to produce a urine specimen for testing, including but not limited to stalling tactics, withholding a specimen, or failure to produce a specimen of sufficient quantity for testing. These actions indicate deliberate efforts to avoid or interfere with the testing process, compromising the integrity of the results. This also includes the use of adulterated specimens or other fake devices designed to manipulate or falsify test results.
5) Failure to appear as directed for any court-ordered authorized service on the Probation Form 45, including but not limited to, drug testing including urine collection, alcohol testing, and sweat patch testing, evaluation, assessment, counseling sessions, polygraph testing, medication appointments.
6) Failure to follow vendor staff direction.
7) Apparent failure to comply with programmatic rules or conditions of supervision, including but not limited to using drugs or admitting to the use of drugs, association with other persons under supervision or convicted felons, or engaging in criminal conduct. Additionally, this includes any actions that indicate non-compliance with the established guidelines and expectations of the treatment program.
8) Any behavior that might increase the risk of the defendant/person under supervision to the community or any specific third party. Behaviors under this subsection shall be immediately reported to the USPO/USPSO and CO.

**Note:** Vendor shall report any information from any source regarding a defendant's/person under supervision's apparent failure to comply with conditions of supervision. It is the responsibility of the vendor to be familiar with the court-ordered requirements of the defendant/person under supervision, as outlined in the referral packet and/or discussed during case staffing conferences with the assigned officer.

## 6. STAFF REQUIREMENTS AND RESTRICTIONS

The vendor shall ensure that:

a. No staff member providing direct delivery of services under this contract are currently charged with or under investigation for a criminal offense and/or under

current pretrial, probation, parole, mandatory release or supervised release (federal, state, or local). Additionally, such individuals shall not have access to any files of defendants/persons under supervision files.

b. Persons convicted of any sexual offense (including but not limited to, child pornography offenses, child exploitation, sexual abuse, rape or sexual assault) or required under federal, state, or local law to register on the Sexual Offender registry shall not perform direct services under this agreement nor shall they have access to defendant/person under supervision files unless approved in writing by the CO after consultation with Office of General Counsel and AMO.

c. Persons providing direct delivery of services under this contract with any current disciplinary investigation, restrictions on their licenses, certifications or practice (or those who voluntarily agree to such a restriction) based on negotiations or proceedings with any licensing authority, or whose license has expired, shall not perform services under this agreement nor shall they have access to defendant/person under supervision files unless approved in writing by the CO after consultation with Office of General Counsel and AMO.

d. The vendors and its employees shall:

    1) Adhere to ethical responsibilities as outlined by the professional standards. This includes but is not limited to, avoiding compromising relationships or sexual relationships with defendants/persons under supervision and probation or pretrial services staff, avoiding conflicts of interest, maintaining privacy and confidentiality, ensuring proper access and disclosure of confidential records, preventing sexual harassment, and refraining from derogatory language. Additionally, it encompasses the obligation to uphold ethical conduct in all interactions and situations, ensuring the highest standards of professional behavior are maintained.
    2) Not employ, contract, or pay any defendant/person under active supervision, the defendant's/person under supervision's owned firm or business, or currently employed Judiciary employees to perform any work for the vendor related to consultation or services delivered as part of this agreement. This includes all work performed at the vendor's facilities or at locations of personal interest to the vendor.
    3) Report any such improprieties or the appearance thereof immediately to the USPO/USPSO or designee.

e. Report to the USPO/USPSO any investigations, pending charges, arrests and/or convictions related to a criminal offense, any restrictions on staff licenses or certifications, whether imposed or voluntary, involving any staff performing services under this agreement within 48 hours of obtaining knowledge.

f. **Within three business days**, the vendor shall notify the CO in writing of any staff changes. For any new staff, the vendor shall submit a Staff Qualifications Statement (Section J Attachment) for each new staff member added under the agreement.

g. Failure to comply with the above terms and conditions could result in termination

of this agreement.

7. **FACILITY REQUIREMENTS**

The vendor shall ensure that its facility(ies) has adequate access for defendants/person under supervision with physical disabilities.

Should a vendor and/or subcontractor choose to relocate a facility or add an additional site within the catchment area, the vendor shall provide the CO written notification **no less than 30 days prior** and submit a Change or Addition of Performance Site (Section J Attachment). On site visits will be conducted to verify that the offeror's facility complies with the requirements of the RFP. Upon approval of the site, the CO will send an SF-30, Modification of Contract, for mutual agreement of the parties to accept the revision.

8. **VENDOR COMPLIANCE**

The vendor shall comply with all applicable state, federal and local laws and regulations when performing services required under this contract or agreement. Failure to do so may result in immediate termination and subject the vendor to civil and/or criminal penalties.

9. **LOCAL SERVICES**

**NOTE:** When an asterisk (*) is indicated in Section B for a project code, the vendor shall comply with additional requirements as outlined below.

SEX OFFENSE SERVICES FOR POST CONVICTION

* 6012

In addition to the standard requirements, the vendor shall provide services until 7:00pm one night per week or Saturday mornings from 9:00am to 12:00pm.

* 6022

In addition to the standard requirements, the vendor shall provide services until 7:00pm one night per week or Saturday mornings from 9:00am to 12:00pm.

## SECTION D. PACKAGING AND MARKING

NOT APPLICABLE

# SECTION E - INSPECTION AND ACCEPTANCE

## E.1 Vendors Performance (Mandatory Requirement)

The vendor and subcontractor shall:

(a) Maintain a physical facility, within the identified catchment area, that meets all applicable federal, state and local regulations (e.g., building codes). In the event the physical facility does not provide adequate access for defendants/persons under supervision with physical disabilities (e.g. no elevator access to second floor office space, etc.), the vendor shall have access to an alternate facility/space within the identified catchment area that meets the requirements.

(b) Not endanger the health and safety of employees, clients and the community.

(c) Provide physical facilities that preserve both the integrity of the confidential relationship and the personal dignity of the client.

## E.2 Clause B-5 Clauses Incorporated by Reference (SEP 2010)

This contract incorporates one or more clauses by reference, with the same force and effect as if they were given in full text. Upon request, the contracting officer will make their full text available. Also, the full text of a clause may be accessed electronically at this address: **http://www.uscourts.gov/procurement.aspx**

**The clauses listed below are applicable to Agreements and Contracts at any value.**

| | |
|---|---|
| **Clause 2-5A Inspection of Products** | **(APR 2013)** |
| **Clause 2-5B Inspection of Services** | **(APR 2013)** |

# SECTION F - DELIVERIES OR PERFORMANCE

**F.1 Provision of Services to Federal Defendants and Persons Under Supervision (Mandatory Requirements)**

a. In an effort to protect the community by providing outpatient treatment services, the vendor shall have the capability to immediately place Federal defendants/persons under supervision in outpatient assessment/testing/evaluation/treatment or drug/alcohol testing without regard to any placement backlog or waiting lists.

b. Recognizing the problems of limited bed space, vendors shall place referrals for residential placements in the first available bed space, recognizing priority placement above other referrals.

c. The vendor shall not unilaterally refuse services to any defendant/person under supervision referred by the Judiciary, except where the defendant/person under supervision poses an apparent danger to the vendor's staff or other clients. The vendor shall not deny access to services solely based on the defendant's/person under supervision's current participation in medication-assisted treatment (MAT), medical condition, disability, religion, ethnic origins or criminal record. The vendor shall not refuse service without approval of the Judiciary.

d. Termination of defendants/persons under supervision from treatment or other authorized services, based upon a violation of the vendor's program rules and regulations shall not be made without the approval of the Judiciary. When necessary, the vendor may take appropriate and immediate action to protect staff and clients.

e. The vendor shall not tell defendants/persons under supervision to misrepresent or withhold information regarding the treatment provider or the treatment services received in response to questions posed by the USPO/USPSO or other government or law enforcement agencies authorized to make such inquiries.

**F.2** The vendor shall perform and comply with the mandatory requirements set forth in Sections C, E, F, G, H and I of this contract or agreement. A vendor's noncompliance or failure to do so shall be the basis for termination of the contract or agreement.

# SECTION G - AGREEMENT ADMINISTRATION DATA

## G.1 Contact Point for Assistance

a. Contact the person listed in block 7 on the form **Solicitation/Offer/Acceptance**, in Section A, p. 1 of the Request for Proposals (RFP).

## G.2 Fiscal Records (Mandatory Requirement)

The vendor shall:

a. Maintain its fiscal records according to generally accepted accounting principles.

b. Keep and identify all financial records, that disclose the identity of any defendant/offender as **CONFIDENTIAL**.

c. Keep all defendant/person under supervision records associated with the agreement for three (3) years after the final payment date under the agreement, for Government inspection and review, except that the vendor shall keep defendant/person under supervision records relating to litigation or settlement of claims arising out of the performance of this agreement, until final disposition of such appeals, litigation, or claims. Note: this requirement is not in lieu of the vendor following other local/state/federal record retention requirements.

## G.3. Invoices (Mandatory Requirement)

The vendor shall:

a. Submit an original copy of the invoice to the address listed in block 7 of the **Solicitation/Offer/Acceptance** in SECTION A, of the AO367. Additionally, the **Monthly Sign-In Logs, Drug Testing Logs,** documentation of any vendor related travel, and documentation of medication or transportation receipts (if applicable) shall be submitted to the CO or other authorized designee. NOTE: documentation submitted with the invoice is not forwarded to the USPO/USPSO; therefore, all required reports, evaluations, treatment plans, etc. shall be submitted in accordance with Section C requirements.

b. Submit invoices monthly to arrive no later than the tenth (10th) day of the month for services provided during the preceding month.

c. Use the invoice template (Parts A and B) as provided by the CO (any substitute invoice template requires approval of the CO), indicating:

(1) Individual defendant/person under supervision names and identifying numbers,

(2) Charges for each service, identified by its project code, as described in **SECTION C - STATEMENT OF WORK**, of this document, and

(3) Receipt of all co-payments.

**Note:** The Administrative Office encourages computer generated billing and will accept a vendor's invoice in an Excel format. The vendor shall only submit invoices electronically in a manner approved by the CO and in compliance with 45 C.F.R. § 164.302 to 164.318.

d. Submit with the invoice a certification by an authorized official of the vendor that the invoice, said signature can be electronic or physical:

(1) Is correct and accurate to the best of their knowledge, and

(2) Includes only charges for services actually provided to defendants/persons under supervision.

e. The vendor shall submit separate invoices for services provided to U.S. Pretrial Services defendants and services provided to U.S. Probation Office persons under supervision.

f. When formulating pricing for services, the vendor should consider incorporating the cost of "No-shows" into the unit price charged. A "No-show" occurs when a defendant/person under supervision does not report for scheduled services and/or does not cancel with at least 24 hours advance notice. It should be noted the vendor shall not invoice the Judiciary or receive reimbursement from the defendant/person under supervision for any no-shows. -

g. The vendor shall charge for a session longer or shorter than the prescribed unit time (when the unit price is based on a prescribed unit of time) by adjusting the charge up or down in fifteen-minute increments. If circumstances necessitate adjustment of the charge based on the example below in section (i), the vendor shall contact the CO for approval. Sessions lasting less than 16 minutes shall be treated as a "no show" for the purposes of billing.

h. The vendor shall include on the monthly invoice the item number and the fractional part of the session for which the vendor is billing the Judiciary.

i. **Example**:

Assume that the rate of service is $10.00 per half hour.

| Time Spent (in minutes) | Charge |
|---|---|
| 0 - 15 | $ 0.00 |
| 16 - 30 | $10.00 |
| 31 - 45 | $15.00 |
| 46 - 60 | $20.00 |
| 61-75 | $25.00 |
| 76-90 | $30.00 |

j. The vendor shall include the cost of written reports and case staffing conferences with the USPO/USPSO in the prices for defendant/person under supervision services unless the Probation Form 45 authorizes them as part of a specific service (e.g., Intake Assessment and Report (2011), Psychological Evaluation and Report (5010)).

k. The vendor shall include the cost of telephone contacts, e-mails, texting, etc. with defendants/persons under supervision in the unit price for the services and shall not bill separately for these contacts.

l. For project codes 1010, 1011, and 1012, that are untestable in accordance with the no-test policy or failure to follow the required collection guidelines, the vendor shall not invoice the district. The USPO/USPSO will provide notification to the vendor of untestable specimens.

**G.4 Reimbursements or Copayments (Mandatory Requirement)**

a. The vendor shall not request or accept payment either directly or indirectly from the defendant/person under supervision for services under this agreement unless the USPO/USPSO authorizes on the Probation Form 45 a co-payment for partial or total payment by the defendant/person under supervision.

b. The vendor shall not submit invoices to the Judiciary for services under this agreement where the vendor already has submitted invoices or received payment for the same services from other sources (e.g. state funding, private insurance, Medicaid, Medicare, etc.). Note: if the vendor submitted invoices and received payment for the same services from other sources, the vendor is not authorized to collect an administrative fee for receipt of payment and/or co-payment paid to other sources.

c. If the vendor has received any payments from insurance programs or other sources (e.g., state or local public assistance programs) for services for which the vendor has received payment from the Judiciary under this agreement, the vendor shall reimburse the Judiciary for these services.

(1) The USPO/USPSO may order reimbursement in the form of deductions from subsequent invoices according to USPO/USPSO instruction and the terms and conditions of this solicitation document.

(2) According to 18 USC 3672, the vendor may be required to reimburse the Director of the Administrative Office of the U. S. Courts in lieu of deducting payments from subsequent invoices.

(3) The vendor shall not accept reimbursement or co-payment for services in an amount that exceeds the amount authorized in the contract/agreement with the Judiciary, or that exceeds the actual cost of the service.

# SECTION H - SPECIAL AGREEMENT REQUIREMENTS

## H.1 Clause 7-25, Indemnification (AUG 2004)

(a) The contractor assumes full responsibility for and shall indemnify the judiciary against any and all losses or damage of whatsoever kind and nature to any and all judiciary property, including any equipment, products, accessories, or parts furnished, while in its custody and care for storage, repairs, or service to be performed under the terms of this contract, resulting in whole or in part from the negligent acts or omissions of the contractor, any subcontractor, or any employee, agent or representative of the contractor or subcontractor.

(b) If due to the fault, negligent acts (whether of commission or omission) and/or dishonesty of the contractor or its employees, any judiciary-owned or controlled property is lost or damaged as a result of the contractor's performance of this contract, the contractor shall be responsible to the judiciary for such loss or damage, and the judiciary, at its option, may, in lieu of requiring reimbursement therefor, require the contractor to replace at its own expense, all property lost or damaged.

(c) *Hold Harmless and Indemnification Agreement* The contractor shall save and hold harmless and indemnify the judiciary against any and all liability claims and cost of whatsoever kind and nature for injury to or death of any person or persons and for loss or damage to any contractor property or property owned by a third party occurring in connection with or in any way incident to or arising out of the occupancy, use, service, operation, or performance of work under the terms of this contract, resulting in whole or in part from the acts or omissions of the contractor, any subcontractor, or any employee, agent, or representative of the contractor or subcontractor.

(d) The contractor shall indemnify and hold the judiciary, its employees, and others acting on its behalf harmless against any and all loss, liability, or damage arising out of the negligence, failure to act, fraud, embezzlement, or other misconduct by the contractor, its employees, subcontractors, agents, or representatives of the contractor or subcontractor.

(e) *Judiciary's Right of Recovery* Nothing in the above paragraphs will be considered to preclude the judiciary from receiving the benefits of any insurance/bonds the contractor may carry which provides for the indemnification of any loss or destruction of, or damages to, property in the custody and care of the contractor where such loss, destruction or damage is to judiciary property. The contractor shall do nothing to prejudice the judiciary's right to recover against third parties for any loss, destruction of, or damage to, judiciary property, and upon the request of the contracting officer will, at the judiciary's expense, furnish to the judiciary all reasonable assistance and cooperation (including assistance in the prosecution of suit and the execution of instruments of assignment in favor of the judiciary) in obtaining recovery.

(f) *Judiciary Liability* The judiciary will not be liable for any injury to the contractor's personnel or damage to the contractor's property unless such injury or damage is due to negligence on the part of the judiciary and is recoverable under the Federal Torts Claims Act, or pursuant to other statutory authority applicable to the judiciary.

## H.2 DRUG-FREE WORKPLACE - JAN 2003

(a) Definitions. As used in this clause,

"**Controlled Substance**" means a controlled substance in schedules I through V of Section 202 of the Controlled Substances Act (21 U.S.C. 812) and as further defined in regulation at 21 CFR 1308.11-1308.15.

"**Conviction**" means a finding of guilt (including a plea of nolo contendere) or imposition of sentence, or both, by any judicial body charged with the responsibility to determine violations of the Federal or State criminal drug statutes.

"**Criminal drug statute**" means a Federal or non-Federal criminal statute involving the manufacture, distribution, dispensing, possession or use of any controlled substance.

"**Drug-free workplace**" means a site for the performance of work done in connection with a specific contract at which the employees of the Contractor are prohibited from engaging in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance.

"**Employee**" means an employee of a Contractor directly engaged in the performance of work under a Government contract. "Directly Engaged" is defined to include all direct cost employees and any other Contractor employee who has other than a minimal impact or involvement in contract performance.

"**Individual**" means an offeror/contractor that has no more than one employee including the offeror/contractor.

(b) The Contractor, if other than an individual, shall--within 30 calendar days after award (unless a longer period is agreed to in writing for contracts of 30 calendar days or more performance duration), or as soon as possible for contracts of less than 30 calendar days performance duration--

(1) Publish a statement notifying such employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the Contractor's workplace and specifying the actions that will be taken against employees for violations of such prohibition;

(2) Establish an ongoing drug-free awareness program to inform such employees about-

(i) The dangers of drug abuse in the workplace;

(ii) The Contractor's policy of maintaining a drug-free workplace;

(iii) Any available drug counseling, rehabilitation, and employee assistance programs; and

(iv) The penalties that may be imposed upon employees from drug abuse violations occurring in the workplace;

(3) Provide all employees engaged in performance of the contract with a copy of the statement required by subparagraph (b)(l) of this clause;

(4) Notify such employees in writing in the statement required by subparagraph (b)(l) of this clause, that as a condition of continued employment on the contract resulting from this solicitation, the employee will-

(i) Abide by the terms of the statement; and

(ii) Notify the employer in writing of the employee's conviction under a criminal drug statute for a violation occurring in the workplace no later than five (5) days after such conviction;

(5) Notify the contracting officer within ten (l0) days after receiving notice under subdivision (b)(4)(ii) of this clause, from an employee or otherwise receiving actual notice of such conviction. The notice shall include the position title of the employee;

(6) Within 30 days after receiving notice under subparagraph (a)(4)(ii) of this clause of a conviction, take one of the following actions with respect to any employee who is convicted of a drug abuse violation occurring in the workplace:

(i) Taking appropriate personnel action against such employee, up to and including termination; or

(ii) Require such employee to satisfactorily participate in a drug abuse assistance or rehabilitation program approved for such purposes by a Federal, State, or local health, law enforcement, or other appropriate agency.

(7) Make a good faith effort to maintain a drug-free workplace through implementation of subparagraphs (b)(l) through (b)(6) of this provision.

(c) The Contractor, if an individual, agrees by award of the contract or acceptance of a purchase order, not to engage in the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance in the performance of the contract resulting from the contract.

(d) In addition to other remedies available to the Government, the Contractor's failure to comply with the requirements of paragraphs (b) and (c) of this clause may, render the Contractor subject to suspension of contract payments, termination of the contract for default, and suspension of debarment.

**H.3 Government Furnished Property - (JAN 2003)**

No material, labor, or facilities will be furnished by the Government unless otherwise provided for in this solicitation.

The Chief Probation Officer or Chief Pretrial Services Officer may furnish Government-owned telephone answering equipment, fax machines, and/or onsite drug-detection devices called non-instrumented drug tests to a contractor if such equipment will improve the frequency of urine collection in the district. The equipment shall be used only for a random urine collection program.

# SECTION I - REQUIRED CLAUSES

## I.1 Clause 7-30, Public Use of the Name of the Federal Judiciary - (JUN 2014)

(a) The contractor shall not refer to the judiciary, or to any court or other organizational entities existing thereunder (hereinafter referred to as "the judiciary"), in advertising, news releases, brochures, catalogs, television and radio advertising, letters of reference, web sites, or any other media used generally by the vendor in its commercial marketing initiatives, in such a way that it represents or implies that the judiciary prefers or endorses the products or services offered by the contractor. This provision will not be construed as limiting the contractor's ability to refer to the judiciary as one of its customers when providing past performance information as part of a proposal submission, as opposed to general public marketing.

(b) No public release of information pertaining to this contract will be made without prior judiciary written approval, as appropriate, and then only with written approval of the contracting officer.

## I.2 Subcontracting

Services the vendor proposes to refer to other service providers shall be considered subcontracting. The vendor (prime contractor) may subcontract the provision of treatment services to other service providers (subcontractors). After award, any proposed subcontractor arrangements or changes to the existing subcontractor arrangements are subject to the Contracting Officer’s approval and shall be submitted in writing to the Contracting Officer at least 30 days in advance of the proposed subcontracting arrangement or change. The Contracting Officer will respond promptly with written approval or disapproval. The prime contractor shall not refer defendants/persons under supervision to any other vendor that has not been approved by the Contracting Officer in writing. The government reserves the right to revoke approval of any subcontractor at any time that does not meet the requirements of this contract.

The prime contractor is responsible to the judiciary for overall performance of the services required under this contract. If any services are subcontracted, the prime contractor shall ensure that the subcontractor is complying with the requirements of this contract, including the qualifications of any personnel providing services; the possession and maintenance of all appropriate state and local licenses in compliance with state and local regulations; and the appropriate documentation demonstrating compliance with all federal, state and local fire, safety and health codes. The prime contractor shall ensure that subcontractors are not debarred, suspended, or ineligible to perform under federal contracts.

A subcontractor has no contractual rights, known as privity of contract, against the judiciary. However, the subcontractor may have rights against the prime contractor.

Upon contract termination, the contractor must, except as otherwise directed by the CO, terminate all subcontracts to the extent that they relate to performance of the work terminated.

## I.3. Clause 2-90D, Option to Extend the Term of the Contract - (APR 2013)

(a) The judiciary may extend the term of this contract by written notice to the contractor no later than 30 calendar days prior to the contract's expiration date; provided that the judiciary gives the contractor a preliminary written notice of its intent to extend at least 60 calendar days before the contract expires. The preliminary notice does not commit the judiciary to an extension.

(b) If the judiciary exercises this option, the extended contract shall be considered to include this option clause.

(c) The total duration of this contract, including the exercise of any options under this clause, shall not exceed 5 years.

## I.4 Clause 2-90C, Option to Extend Services - (APR 2013)

The judiciary may require continued performance of any services within the limits and at the rates specified in the contract. These rates may be adjusted only as a result of revisions to prevailing labor rates provided by the Secretary of Labor. The option provision may be exercised more than once, but the total extension of performance hereunder shall not exceed 6 months. The contracting officer may exercise the option by written notice to the contractor no later than 30 calendar days prior to contract's current expiration date.

## I.5 Clause 2-57 Protecting, Reporting, and Responding to Incidents Involving Sensitive Information - (JUN 2024)

(a) Definitions. As used in this clause —

"Breach" means the loss of control, compromise, unauthorized disclosure, unauthorized acquisition, or any similar occurrence where an unauthorized person accesses or potentially accesses Sensitive Information, or an authorized user accesses Sensitive Information for an unauthorized purpose.

"Incident" means an occurrence that—

(1) Actually or imminently jeopardizes, without lawful authority, the integrity, confidentiality, or availability of information or an information system; or

(2) Constitutes a violation, or imminent threat of violation, of law, security policies, security procedures, or acceptable use policies.

"Information System" means a discrete set of information resources organized for the collection, processing, maintenance, use, sharing, dissemination, or disposition of information.

"Personally Identifiable Information (PII)" means information that can identify an individual, when used alone or with other relevant data. PII may contain direct identifiers (e.g., Social Security numbers) that can identify a person uniquely or quasi-identifiers (e.g., date of birth) that can be combined with other quasiidentifiers to successfully recognize an individual. The definition of PII is not anchored to any single category of information or technology. Examples of stand-alone PII that are particularly sensitive include: Social Security numbers (SSNs), driver's license or State identification numbers, Alien Registration Numbers (A-numbers), financial account numbers, and biometric identifiers.

"Privacy Information" means both PII and Sensitive Personally Identifiable Information (SPII).

"Sensitive Information" means any data or other information for which public disclosure, or disclosure to users without a need to know to perform their jobs, can harm individuals, the U.S. government, or private organizations. Sensitive Information includes Privacy Information and the following types of information:

(1) Agreement Information. Information received by judiciary organizations, according to agreements with other federal, state, local, tribal, territorial, or private sector partners, that is required to be protected under the agreement with that partner or other applicable laws.

(2) Procurement Information. Information related to procurements that is considered sensitive and is not normally shared with the public outside official processes. This includes internal information and documents related to procurements, source selection information, vendor proposals, and submitted information marked as proprietary or sensitive. This does not include the contractor's own proposal(s) or contract(s) with the judiciary.

(3) Information Systems Vulnerability Information (ISVI).

- (A) Information technology (IT) systems data (e.g., systems inventories, enterprise architecture models) that reveal infrastructure used for servers, desktops, and networks; application name, version, and release; switching, router, and gateway information; interconnections and access methods; and mission or business use or need.
- (B) Information about developing or current technology, the release of which could hinder judiciary objectives, compromise a technological advantage or countermeasure, cause a denial of service, or provide an adversary with sufficient information to clone, counterfeit, or circumvent a process or system.
- (C) System vulnerability or weakness information that could be used to compromise the confidentiality, integrity, or availability of an information system.

(4) Personnel Security Information. Information that could result in physical risk to judiciary personnel.

(5) Physical Security Information. Information related to the protection of judiciary buildings, grounds, or property, including reviews or reports that illustrate or disclose facility infrastructure or security vulnerabilities. Examples include threat assessments, system security plans, security diagrams for judiciary buildings, contingency plans, risk management plans, business impact analysis studies, and certification and accreditation documentation.

(6) Court Related Information. Sealed cases, sealed documents or other information marked as sensitive by a court. This includes Highly Sensitive Documents (HSD), which are documents or other materials that contain sensitive, but unclassified, information that warrants exceptional handling and storage procedures to prevent significant consequences from unauthorized access or disclosure.

(7) Privileged/confidential Information. Information protected through recognized confidential relationships.

(8) Official Business Information. Proposed budgets, draft plans or policies, other information intended only for consideration by internal decision makers or other confidential audiences.

"Sensitive Personally Identifiable Information (SPII)" is a subset of PII that if lost, compromised, or disclosed without authorization, could result in substantial harm, embarrassment, inconvenience, or unfairness to an individual.

(1) Multiple pieces of information, when combined, may pose an increased risk of harm to the individual. SPII may consist of any grouping of information that contains an individual's name or other unique identifier, plus one or more of the following elements:
(A) Truncated SSN (e.g., last four digits);
(B) Birthdate (month, day, and year);
(C) Citizenship or immigration status;
(D) Ethnic or religious affiliation;
(E) Sexual orientation;
(F) Criminal history;
(G) Medical information; and
(H) System authentication information (e.g., mother's birth name, account passwords, personal identification numbers (PINs)).

(2) Other PII (e.g., list of employees and their performance ratings, unlisted home address, unlisted phone number) that may present an increased risk of harm to the individual depending on its context. The context includes the purpose for which the PII was collected, maintained, and used. The same information in different contexts can reveal additional information about the impacted individual.

(b) Accessing and Protecting Sensitive Information

(1) Contractor roles and responsibilities regarding Sensitive Information. Before the contractor shall have access to Sensitive Information, the contractor shall coordinate with the contracting officer's representative (COR) about the contractor's roles and responsibilities regarding the Sensitive Information, and how an incident or suspected incident will be handled consistent with this clause and judiciary policies and procedures. Before they may access the Sensitive Information, the contractor, their staff, and subcontractors shall complete all forms, trainings, and briefings as may be necessary for security or other reasons.

(2) Training. Contractors that have access to Sensitive Information as part of this contract shall provide their staff with training before they access Sensitive Information, and then at least annually thereafter. The training shall comply with this clause and the training shall cover how to properly handle and safeguard judiciary Sensitive Information and how to identify and report incidents or suspected incidents regarding judiciary Sensitive Information consistent with this clause. The contractor shall provide an initial report, and then an annual report each year after that, to the COR that shows that contractor staff and any subcontractor staff working on the contract have all successfully completed such training. The Contractor shall also provide the COR confirmation that any new staff or subcontractor staff that join the contract after the contract has begun have also successfully completed such training.

(3) Access. Contractor shall have access only to those areas of judiciary Sensitive Information resources explicitly stated in this contract or approved by the contracting officer or COR in writing, as necessary for performance of the work under this contract. Any attempts by contractor personnel to gain access to any information resources not expressly authorized by the terms and conditions in this contract, or as approved in writing by the contracting officer or COR, are strictly prohibited. If this clause is violated, the

judiciary will take appropriate actions regarding the contract and the individual(s) involved.

(4) Protection Requirements

(A) Contractor shall safeguard all Sensitive Information and shall take reasonable measures to prevent the unauthorized use, disclosure, or loss of Sensitive Information. This includes Sensitive Information in any medium or form, including electronic, oral, or paper.

(B) Contractor and their subcontractors shall safeguard Sensitive Information whether it resides on judiciary owned and operated information systems, judiciary owned and contractor-operated information systems, contractor-owned and/or operated information systems operating on behalf of the judiciary, and any situation where contractor and/or subcontractor employees may have access to Sensitive Information because of their relationship with the judiciary.

(C) Sensitive Information shall not be stored on a mobile device or portable electronic media and shall be handled with awareness of the surroundings, so that the Sensitive Information is not disclosed to unauthorized individuals. Sensitive Information shall be secured when unattended or not in use. If performance of the contract requires the contractor to access Sensitive Information on a mobile device or portable electronic media, they shall notify the contracting officer and COR and provide details on the use case required and how such use will comply with this clause and all other applicable policies and guidelines. The COR will work with the contractor and determine if such a use case is acceptable. The contractor shall not use or store Sensitive Information on a mobile device or portable electronic media until the contracting officer provides acceptance of the use case.

(D) Contractor shall encrypt Sensitive Information if the Sensitive Information is in transit or is stored outside of judiciary networks. This includes any Sensitive Information that may reside on, or transit contractor-owned or operated information systems.

(E) All Sensitive Information must be appropriately labeled, secured, and be properly returned, disposed of, or sanitized when no longer needed or at the end of the contract. See section (e) of this clause for more guidance on returning, sanitizing, and disposing of judiciary Sensitive Information.

(F) Removal. The contracting officer may require the contractor to prohibit individuals from working on the contract if the judiciary deems their initial or continued employment on the contract contrary to the public interest for any reason, including, but not limited to, carelessness, insubordination, incompetence, or security concerns.

(c) Incident Reporting Requirements

(1) Contractors and subcontractors shall report all known or suspected incidents to the Security Operations Center (SOC), which is staffed 24 hours per day, seven days per week.

(A) When reporting incidents to the SOC, contractors and subcontractors shall submit the report by:

(i) email to soc@ao.uscourts.gov with courtesy copy to the contracting officer and COR using the contact information identified in the contract, or

(ii) phone call to 202-502-4370, in which case the contractor must notify the contracting officer and COR immediately after reporting to the SOC.

(B) Contractors and subcontractors shall report all known or suspected incidents involving PII or SPII within one hour of discovery. All other incidents shall be reported within eight hours of discovery.

(C) Subcontractors shall notify the prime contractor if they have reported a known or suspected incident to the SOC. Lower tier subcontractors shall also notify their higher tier subcontractor, until the prime contractor is reached.

(2) The judiciary will determine whether information exposed in an unauthorized disclosure or security breach of information under the contractor's control or in an information system under the contractor's control at the time of the incident is Sensitive Information, PII, or SPII by performing an assessment of the specific risk that an individual could be identified using the exposed information with other information that is linked or linkable to the individual. Information that is not PII when considered alone can become PII or SPII whenever additional information becomes available, in any medium or from any source, that would make it possible to identify an individual. Certain data elements are particularly sensitive and may alone present an increased risk of harm to an individual. Final determination of the categorization of exposed information as Sensitive Information, PII, or SPII will be made in writing by the contracting officer.

(3) Sensitive Information transmitted via email shall be protected by encryption. When using regular email channels, contractors and subcontractors shall not include any Sensitive Information in the subject or body of any email. The Sensitive Information shall be included as a password-protected attachment with the password provided under separate cover, including as a separate email. Recipients of Sensitive Information shall comply with any email restrictions imposed by the originator.

(4) No incident may, by itself, be interpreted as evidence that the contractor or subcontractor has failed to provide adequate information security safeguards for Sensitive Information or has otherwise failed to meet the requirements of the contract.

(5) If an incident involves PII or SPII, contractors and subcontractors shall also provide as many of the following data elements that are available at the time the incident is reported, with any remaining data elements provided within 24 hours of submission of the initial incident report:
(A) Unique Entity Identifier (UEI);
(B) Contract numbers affected, unless all contracts by the company are affected;
(C) Facility CAGE code, if the location of the event is different than the prime contractor location;
(D) Point of contact (POC), if different than the POC recorded in the System for Award Management (address, position, telephone, and email);
(E) Contracting officer POC (address, telephone, and email);
(F) Contract clearance level;
(G) Name of subcontractor and CAGE code, if this was an incident on a subcontractor network;
(H) Government programs, platforms, or systems involved;
(I) Location(s) of incident;
(J) Date and time the incident was discovered;
(K) Server names where Privacy Information resided at the time of the incident, both at the

contractor and subcontractor level;
(L) Description of the government PII or SPII contained within the system; and
(M) Any additional information relevant to the incident.

(d) Incident Response Requirements

(1) All determinations by the judiciary related to incidents, including response activities, will be made in writing by the contracting officer.

(2) The contractor shall provide full access and cooperation for all activities determined by the government to be required to ensure an effective incident response, including providing all requested images, log files, and event information to facilitate rapid resolution of incidents.

(3) Incident response activities determined to be required by the government may include, but are not limited to, the following:
(A) Inspections;
(B) Investigations;
(C) Forensic reviews;
(D) Data analyses and processing; and
(E) Revocation of the Authority to Operate (ATO), if applicable.

(4) The contractor shall immediately preserve and protect images of known affected information systems and all available monitoring or packet capture data. The monitoring or packet capture data shall be retained for at least 180 days from submission of the incident report to allow the judiciary to request the media or decline interest.

(5) The judiciary, at its sole discretion, may obtain assistance from other Federal agencies and/or third-party firms to aid in incident response activities.

(e) Certificate of Sanitization of Government and Government-Activity-Related Files and Information

Upon the conclusion of the contract by expiration, termination, cancellation, or as otherwise indicated in the contract, the contractor shall return all Sensitive Information to the judiciary and/or destroy it physically and/or logically as identified in the contract, unless the contract states that return and/or destruction of Sensitive Information is not required. Destruction shall conform to the guidelines for media sanitization contained in NIST SP 800–88, Guidelines for Media Sanitization. The contractor shall certify and confirm the sanitization of all government and government-activity related files and information. The contractor shall submit the certification to the COR and contracting officer following the template provided in NIST SP 800–88, Guidelines for Media Sanitization, Appendix G.

(f) Other Reporting Requirements

Incident reporting required by this clause does not rescind the contractor's responsibility for other incident reporting pertaining to its information systems under other clauses that may apply to its contract(s), or as a result of other applicable statutory or regulatory requirements, or other government requirements.

(g) PII and SPII Incident Notification Requirements

(1) All determinations by the judiciary related to notifications to affected individuals and/or federal agencies and related services (e.g., credit monitoring) will be made in writing by the contracting officer.

(2) No later than five business days after being directed by the contracting officer, or as otherwise required by applicable law, the contractor shall notify any individual whose PII or SPII was either under the control of the contractor or resided in an information system under control of the contractor at the time the incident occurred. The method and content of any notification by the contractor shall be coordinated with, and subject to prior written approval by, the contracting officer. The contractor shall not proceed with notification unless directed in writing by the contracting officer.

(3) Subject to government analysis of the incident and direction to the contractor regarding any resulting notification, the notification method may consist of letters to affected individuals sent by first-class mail, electronic means, or general public notice, as approved by the contracting officer. Notification may require the contractor's use of address verification and/or address location services. At a minimum, the notification shall include:

(A) A brief description of the incident;
(B) A description of the types of PII or SPII involved;
(C) A statement as to whether the PII or SPII was encrypted or protected by other means;
(D) Steps individuals may take to protect themselves;
(E) What the contractor and/or the government are doing to investigate the incident, mitigate the incident, and protect against any future incidents; and
(F) Information identifying who individuals may contact for additional information.

(h) Credit Monitoring Requirements

The contracting officer may direct the contractor to:

(1) Provide notification to affected individuals, as described in paragraph (g)(2).

(2) Provide credit monitoring services to individuals whose PII or SPII was under the control of the contractor or resided in the information system at the time of the incident for a period beginning the date of the incident and extending not less than 18 months from the date the individual is notified. Credit monitoring services shall be provided from a company with which the contractor has no affiliation. At a minimum, credit monitoring services shall include:

(A) Triple credit bureau monitoring;
(B) Daily customer service;
(C) Alerts provided to the individual for changes and fraud; and
(D) Assistance to the individual with enrollment in the services and the use of fraud alerts.

(3) Establish a dedicated call center. Call center services shall include:
(A) A dedicated telephone number to contact customer service within a fixed period;
(B) Information necessary for enrollees to access credit reports and credit

scores;

(C) Escalation of calls that cannot be handled by call center staff, to call center management or AOUSC, as appropriate;

(D) Weekly reports on call center volume, issue escalation, and other key metrics;

(E) Customized frequently asked questions, approved in writing by the contracting officer in coordination with the Judiciary Breach Response Team (BRT); and

(F) Information for enrollees to contact customer service and fraud resolution representatives for credit monitoring assistance.

(i) Subcontracts

(1) The contractor shall insert this clause in all subcontracts and require subcontractors to include this clause in all lower tier subcontracts when subcontractor employees will:

(A) have access to Sensitive Information;
(B) have access to or handle systems containing Sensitive Information;
(C) collect or maintain Sensitive Information on behalf of the Judiciary; or
(D) use a subcontractor information system(s) to process, store, or transmit Sensitive Information.

(2) Any violation by a subcontractor of any of the provisions established in this clause will be attributed to the contractor.

(3) Any breach or incident, as defined in paragraph (a) (Definitions) of this clause, experienced by a subcontractor will be attributed to the contractor for the purpose of triggering contractor compliance with the requirements in paragraphs (c) (Incident Reporting Requirements), (d) (Incident Response Requirements), (f) (Other Reporting Requirements), (g) (PII and SPII Incident Notification Requirements), and (h) (Credit Monitoring Requirements) of this clause.

**I.6 Clause B-5 Clauses Incorporated by Reference - (SEP 2010)**

This contract incorporates one or more clauses by reference, with the same force and effect as if they were given in full text. Upon request, the contracting officer will make their full text available. Also, the full text of a clause may be accessed electronically at this address: **http://www.uscourts.gov/procurement.aspx**

**The clauses listed below are applicable to Agreements and Contracts at any value.**

| | | |
|---|---|---|
| Clause 1-15 | Disclosure of Contractor Information to the Public | AUG 2004 |
| Clause 3-25 | Protecting the Judiciary's Interest When Subcontracting with Contractors Debarred, Suspended, or Proposed for Debarment | MAR 2019 |
| Clause 3-160 | Service Contract Labor Standards | MAR 2019 |
| Clause 3-205 | Protest After Award | JAN 2003 |

Clause 3-210 Protests JUN 2014

Clause 3-300 Registration in the System for Award Management OCT 2023

(a) Definitions. As used in this clause –

"System for Award Management (SAM)" means the federal government owned and operated free website that replaced the Central Contractor Registration (CCR) and is the primary government repository for contractor information required for the conduct of business with the government.

Unique entity identifier (UEI) means a number or other identifier used to identify a specific commercial, nonprofit, or Government entity. See www.sam.gov for the designated entity for establishing UEI.

"Registered in the SAM database" means that –

(1) The contractor has entered all mandatory information, including the UEI, into the SAM database; and
(2) The government has validated all mandatory data fields, to include validation of the Taxpayer Identification Number (TIN) with the Internal Revenue Service (IRS), and has marked the record "Active". The contractor will be required to provide consent for TIN validation to the government as a part of the SAM registration process.

(b) (1) By submission of an offer, the offeror acknowledges the requirement that a Prospective awardee shall be registered in the SAM database prior to award, during performance, and through final payment of any contract, basic agreement, basic ordering agreement, or blanket purchasing agreement resulting from this solicitation.
(2) The offeror shall enter, in the block with its name and address on the cover page of its offer, the annotation "Unique Entity Identifier" followed by the UEI that identifies the offeror's name and address exactly as stated in the offer. The UEI will be used by the contracting officer to verify that the offeror is registered in the SAM database.

(c) If the offeror does not have a UEI, it may obtain one at SAM.gov. The offeror should be prepared to provide the following information:
(1) company legal business name;
(2) tradestyle, doing business, or other name by which your entity is commonly recognized;
(3) company physical street address, city, state and ZIP code;
(4) company mailing address, city, state and ZIP code (if different from physical);
(5) company telephone number;
(6) date the company was started;
(7) number of employees at your location;
(8) chief executive officer/key manager;
(9) line of business (industry);
(10) company headquarters name and address (reporting relationship within your entity).

(d) If the offeror does not become registered in the SAM database within the time prescribed by the contracting officer, the contracting officer will proceed to award to the next otherwise successful registered offeror.

(e) Processing time, which normally takes 48 hours, should be taken into consideration when registering. Offerors who are not registered should consider applying for registration immediately upon receipt of this solicitation.

(f) The contractor is responsible for the accuracy and completeness of the data within the SAM database, and for any liability resulting from the government's reliance on inaccurate or incomplete data. To remain registered in the SAM database after the initial registration, the contractor is required to review and update on an annual basis from the date of initial registration or subsequent updates its information in the SAM database to ensure it is current, accurate and complete. Updating information in the SAM does not alter the terms and conditions of this contract and is not a substitute for a properly executed contractual document.

(g) Change of Name and Novation Agreements:

(1) If a contractor has legally changed its business name, "doing business as" name, or division name (whichever is shown on the contract), or has transferred the assets used in performing the contract, but has not completed the necessary requirements regarding novation and change-of name agreements, the contractor shall provide the responsible contracting officer a minimum of one business day's written notification of its intention to:

i. Change the name in the SAM database;
ii. comply with the requirements of Guide to Judiciary Policy, Vol. 14, § 745.55; and
iii. agree in writing to the timeline and procedures specified by the responsible contracting officer. The contractor must provide with the notification sufficient documentation to support the legally changed name.

(2) If the contractor fails to comply with the requirements of paragraph (g)(1) of this clause, or fails to perform the agreement at paragraph (g)(1)(iii) of this clause, and, in the absence of a properly executed novation or change-of-name agreement, the SAM information showing the contractor to be other than the contractor indicated in the contract will be considered to be incorrect information within the meaning of the "Suspension of Payment" paragraph of the electronic funds transfer (EFT) clause of this contract.

(h) Assignment of Claims The contractor shall not change the name or address for EFT payments or manual payments, as appropriate, in the SAM record to reflect an assignee for the purpose of assignment of claims. Assignees shall be separately registered in the SAM database. Information provided to the contractor's SAM record that indicates payments, including those made by EFT, to an ultimate recipient other than the contractor will be considered to be incorrect information within the meaning of the "Suspension of payment" paragraph of the EFT clause of this contract.

(i) Offerors and contractors may obtain information on registration and annual confirmation requirements via the internet at http://www.SAM.gov or by calling 1-866-606-8220 or at http://www.FSD.gov.

| | | |
|---|---|---|
| Clause 7-35 | Disclosure or Use of Information | APR 2013 |
| Clause 7-70 | Judiciary Property Furnished "As Is" | APR 2013 |
| Clause 7-85 | Examination of Records | JAN 2003 |
| Clause 7-115 | Availability of Funds | JAN 2003 |
| Clause 7-135 | Payments | APR 2013 |
| Clause 7-140 | Discounts for Prompt Payment | JAN 2003 |
| Clause 7-150 | Extras | JAN 2003 |
| Clause 7-175 | Assignment of Claims | JAN 2003 |
| Clause 7-185 | Changes | APR 2013 |
| Clause 7-215 | Notification of Ownership Changes | JAN 2003 |
| Clause 7-223 | Termination for the Convenience of the Judiciary (Short Form) | AUG 2004 |
| Clause 7-230 | Termination for Default (Fixed Price - | JAN 2003 |
| Clause 7-235 | Disputes | JAN 2003 |

**IN ADDITION TO THE CLAUSES LISTED ABOVE, IF THIS AGREEMENT IS IN EXCESS OF $100,000, THE CONTRACTOR AGREES TO COMPLY WITH THE FOLLOWING CLAUSE, INCORPORATED BY REFERENCE.**

| | | |
|---|---|---|
| Clause 1-5 | Conflict of Interest | |
| Clause 1-10 | Gratuities or Gifts | JAN 2010 |
| Clause 3-35 | Covenant Against Contingent Fees | |
| Clause 3-40 | Restrictions on Subcontractor Sales to the Government | |
| Clause 3-45 | Anti-Kickback Procedures | |
| Clause 3-50 | Cancellation, Rescission, and Recovery of Funds for Illegal or Improper Activity | |
| Clause 3-55 | Price or Fee Adjustment for Illegal or | |

| | |
|---|---|
| | Improper Activity |
| Clause 3-105 | Audit and Records |
| Clause 3-120 | Order of Precedence |
| Clause 7-20 | Security Requirements |
| Clause 7-25 | Indemnification |
| Clause 7-100B | Limitation of Liability (Services) |
| Clause 7-110 | Bankruptcy |
| Clause 7-130 | Interest (Prompt Payment) |
| Clause 7-210 | Payment of Emergency Closures |
| Clause 7-215 | Notification of Ownership Changes |

# SECTION J - LIST OF ATTACHMENTS

J.1 SAMPLE PROGRAM PLAN

J.2 MONTHLY SIGN IN LOG

J.3 REMOVED

J.4 INVOICE TEMPLATE

J.5 TESTING LOGS (URINALYSIS, SWEAT PATCH, BREATHALYZER)

J.6 APA MODEL SEX HISTORY DISCLOSURE POLYGRAPH QUESTIONNAIRE (disclaimer: this content contains sensitive subject matter that may be offensive to the reader) – MAY BE REMOVED FROM SOLICITATION DOCUMENTS WHEN NOT APPLICABLE

J.7 STAFF QUALIFICATION STATEMENT

J.8 CHANGE OR ADDITION OF PERFORMANCE SITE(S)

J.9 MONITORING REPORT TEMPLATE

J.10 DEPARTMENT OF LABOR WAGE DETERMINATION
(As required by the Service Contract Act, when applicable.)

Attachment J.1

Prob. Form 45

Today's Date:

**Client Identifying Information**

| | |
|---|---|
| Client: | PACTS#: |
| Address: | Pretrial/Post Conviction: |
| Officer: | Client Phone: |
| Officer Phone: | DOB: |

Photo Not Available

**Provider Information**

Provider:
Provider Location:
Attn:
Location Address:

Phone:
Fax:

Procurement No:
Effective Date:
Termination Date:

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**Authorized Services**

Your agency is authorized to provide the following services beginning on the plan effective date indicated above. Any services provided outside of those listed below and/or outside the Effective and Termination Dates of the Plan will not be authorized for payment.

**Services Ordered**

| Project Code | Description Of Services | Phase | Frequency (Units) | Interval | Copay Amount (per unit) |
|---|---|---|---|---|---|
| 2010 | Individual Substance Abuse Counseling | | 1.0 | Weekly | $0.00 |
| 2020 | Group Substance Counseling | | 2.0 | Monthly | $0.00 |

**Instructions to Provider Regarding Client Needs and Goals of Treatment**

_____ Officer:

_____ Referral Agent:

_____ Client:

Revised 5-2023

# MONTHLY SIGN IN LOG

**Complete one form per person per month. Include all scheduled contacts. In the event the person does not attend a scheduled service, indicate "no show" in the comment column. In the event the person does not attend any services within the month, include a comment noting why no services were provided/received. If telemedicine is provided, print the defendant's/person under supervision's name within the signature field, and the comment section shall reflect the means in which the session was provided (i.e. teleconference, video conference, internet).**

**Vendor:**

**Agreement #:**

**Defendant/Person Under Supervision:**

**PACTS #:** ☐ Pretrial ☐ Post-Conviction

**Service Month/Year:**

**Required co-payment (if applicable):**

| Date | Defendant/Person under Supervision signature | Project Code | Time In | Time Out | Vendor Initials | Co-pay Received | Comments (i.e., no show, delivery method of telemedicine, no services) |
|---|---|---|---|---|---|---|---|
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Additional Page

Defendant/Person Under Supervision Name:

| Date | Defendant/Person under Supervision signature | Project Code | Time In | Time Out | Vendor Initials | Co-pay Received | Comments (i.e., no show, delivery method of telemedicine, no services) |
|---|---|---|---|---|---|---|---|
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Date _____ Page _____ of _____

**ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS**
**TREATMENT SERVICES INVOICE**

**(PART A)**

1. Judicial District _____
2. Vendor _____
   a. Address: _____
   _____
   _____
   b. Telephone: _____
3. P.O./B.P.A.# _____
4. Service Delivery: From _____ To _____
5. Total # of Individuals Served: _____

Vendor's Certification: I certify that **all** expenditures and requests for reimbursement in this voucher are accurate and correct to the best of my knowledge and include only charges for services actually rendered to clients under the terms of the agreement and for which no other compensation has been received from sources other than the United States District Court.

_____
Authorized Administrator

| 6. Project Code | 7. Quantity | 8. Unit Price | 9. Total Price |
|---|---|---|---|
| | | | |

Date _____ Page _____ of _____

**ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS**
**TREATMENT SERVICES INVOICE**

**(PART B)**

Subtotal all costs for each client listed below:

| 1. Client Name | 2. Client Number | 3. Dates of Service | 4. Service Rendered | 5. Quantity (Units) | 6. Unit Price | 7. Cost |
|---|---|---|---|---|---|---|
| | | | | | | |

# BREATHALYZER INSTRUMENT LOG

**Vendor Name _____**

| Instrument Serial Number | Requirements for Calibration | Dates of Calibration | Date of Next Calibration | Signature of Person Conducting the Calibration |
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Attachment J.5

# BREATHALYZER LOG

COMPLETE ONE FORM PER CLIENT PER MONTH

Client Name_____ PACTS #_____ Month/Year_____

| Date | Client's Signature/Initials | Collector's Initials | Reason Tested | Test Results | Refusal |
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| Comments (please note any unusual occurrences): |
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# SWEAT PATCH TESTING LOG

COMPLETE ONE FORM PER CLIENT PER MONTH - to be used for project code 1012
COMPLETE THE FIRST FIVE COLUMNS UPON APPLICATION, AND THE LAST FOUR UPON REMOVAL (bill only upon removal)

**Client Name** _____ **PACTS #** _____ **Month/Year**_____

| Application Date | Client's Signature/Initials | Chain of Custody Bar Code Number | Medications Taken | Collector's Initials | Removal Date | Client's Initials | Collector's Initials | Test Results/Date | Co-Pay Collected |
|---|---|---|---|---|---|---|---|---|---|
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| **Comments (please note any unusual occurrences):** |
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# Urinalysis Testing Log

Complete one form per person per month - to be used for project codes 1010 and 1011

**Defendant/Person Under Supervision Name:**

**PACTS #:**

**Vendor Name & BPA #:**

**Month/Year:**

| Date Collected | Defendant/Person Under Supervision Signature | Collector initials | Bar Code # (for 1010) | Special test (for 1010) | Meds taken | Test Result (for 1011 only) | Co-pay collected |
|---|---|---|---|---|---|---|---|
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# Form Disclosure

This Model Sex History Disclosure Polygraph Questionnaire ("Model Policy Questionnaire") was prepared by the American Polygraph Association's (APA) Post Conviction Sex Offender Committee (PCSOT Committee) and approved by the APA Board of Directors on August 26, 2023. The PCSOT Committee endeavored to incorporate in this Model Policy Questionnaire the most current information and contemporary professional judgment on this issue. However, no "model" policy or "model" questionnaire can meet all the needs of any given agency, polygraph examiner, or other sex offender team member (sex offender team). While this Model Policy is provided to assist in standardizing and promoting the effectiveness of the Sexual History Exam each sex offender team operates in a unique environment of federal court rulings, state laws and court rulings, local ordinances, regulations, and administrative decisions. In addition to these considerations, the formulation of specific sex offender team policies and questionnaires should consider local political and community perspectives and customs, prerogatives and demands; divergent strategies and philosophies; and the impact of varied resource capabilities, unique circumstances of the sex offender, among other factors.

This Model Policy Questionnaire is informational and not intended as professional, legal, or other advice or as a substitute for advice from a professional or attorney. If you require professional, legal, or other advice about the subject of this Model Policy Questionnaire, you should seek the services of a professional or attorney in your jurisdiction.

The APA disclaims all liability to any party for any direct, indirect, implied, punitive, special, incidental, or other consequential damages arising directly or indirectly from any use of this Model Policy Questionnaire.

# American Polygraph Association
# Model Sexual History Disclosure Polygraph Questionnaire
**August 26, 2023**

## Information for Treatment and Supervision Team Members

This Model Sex History Disclosure Polygraph Questionnaire is provided to assist convicted persons, treatment providers, supervising officers and polygraph professionals to increase the standardization and effectiveness of the Sexual History Exam (SHE), as described in the APA Model Policy for Post Conviction Sex Offender Testing. The SHE is a screening polygraph used to investigate the veracity of a convicted persons' self-reported history of involvement, in uncharged or unreported sexual offense behaviors and sexual behaviors that may be indicators of sexual compulsivity, sexual pre-occupation, or sexual deviancy. The SHE should be used when a referring professional wants to investigate a convicted person's lifetime history of uncharged/unreported sexual offense behaviors. The SHE is conducted on persons convicted of sexual offenses, in the absence of any allegation or incident other than the crime of conviction or other known historical convictions. Polygraph testing via the SHE is not intended to investigate reportable crime information and should not be interpreted as deterministic or infallible. Instead, test results can be thought of as categorical conclusions based on the probabilistic strength of information or margin of uncertainty along with the stated tolerance for risk of error.

Behavioral targets should be selected in collaboration with the referring professional for their operational relevance to risk assessment, risk management and treatment planning. Target questions may include behaviors related to the selection of, access to, control or silencing of, and impact on abused persons. Target issues may also include non-contact sexual offense behaviors, as well as behaviors related to grooming, manipulation, use of violence, physical force, restraint, threats of harm, and building or exploiting relationships as a means of gaining access to others for sexual abuse. Target issues may also provide information about involvement or non-involvement in behaviors that may be indicative of sexual compulsivity or preoccupation. Although it is unrealistic to attempt to test and fully resolve every possible sex history target, or to assume that it is possible to know everything about a convicted person's entire lifetime of sexual behavior, the SHE commonly addresses a range of different target behaviors that are interpreted with an assumption of independence. In other words, the SHE is a multiple issue test, subject to the advantages and limitations of omnibus analysis. The SHE can also be conducted as a narrowly focused single-issue exam, or as a series of single-issue exams. Validated polygraph test formats can be used with two to four relevant target issues.

Examiners should familiarize themselves with the types of sexual behavior that play an important role in sex offense risk assessment and sex offense treatment. Some sexual behaviors, for example, may be indicative of sexual compulsivity or preoccupation for which the actual number of incidents, for those who admit these behaviors, may not add additional information – though such test questions may be useful with convicted persons who substantially deny any involvement in those behaviors.

Information and results from these examinations are intended to assist in risk assessment, risk management and treatment planning. The goal of these polygraph examinations is not to identify prosecutable crimes, but to obtain information about an individual's sexual attitudes and behaviors, and to help clarify whether a person has a history of acting on particular sexual interests, desires, or patterns of problematic sexual behavior. For persons who have not engaged in particular behaviors, the goal is to establish a basis of evidence to support professional conclusions to accept the veracity of the individual's statements. Information and results from these examinations should be reported only to the professional members of the supervision or treatment team unless otherwise directed by law.

## Information for Examinees

Information requested in this Sex History Disclosure Polygraph Questionnaire is intended to help your treatment and supervision team members with treatment planning, risk assessment tasks, and risk management goals. *Do not provide any identifying information of uncharged sexual behavior such as; dates, location, relationship, or any other information that reveals the identity of another person.* Something that is "uncharged" is a behavior you have not been convicted of. Examples of this may include (but are not limited to) a sexual behavior where you plead to a non-sexually related crime, a sexual behavior that led to a violation instead of a new conviction, the sexual behavior qualified for youthful offender status, and/or deferred sentencing such as accelerated rehabilitation. However, you are requested to be truthful and honest about your history of sexual behavior patterns. The information and forms in this Sexual History document are designed to help you to be truthful and successful. Refer to the included Operational Definitions and talk to your treatment and supervision team members for information if you have any difficulty understanding the information or these instructions. Truthfulness about your sexual history may be viewed as a milestone or indicator of engagement and progress in treatment.

Directions:

1. Complete every page (every form) even if you have nothing to report. If you have nothing to report about a particular behavioral question simply state that on the form, or cross out the form, and then sign and date the form. If someone assisted you in completing each form, have them write their name at the bottom of each form.

2. ***Do not*** include personal identifying information for any other person. This includes:
   a. Their name,
   b. Relationship to you (such as identifying children, nieces, grandparents, etc.).
   c. The exact dates of a behavior or incident,
   d. The exact location or jurisdiction where a behavior or incident occurred, and
   e. Other identifying information.

3. When completing the forms, please include only the information requested (i.e., age of the other person, gender of the other person, if they were related to you or not, if you knew the person more or less than 24 hours, etc.)

4. If you do not understand any information requested, you may write or indicate that on the form. Then sign and date the form.

5. If you prefer to discuss the information with your treatment provider or with your supervising officer before completing each form, or during the polygraph interview you may write or indicate that on the form. Then sign and date the form.

6. The timeframe of interest to your Sex History Polygraph is your entire lifetime. However, your treatment and/or supervision team member may provide you with individualized instruction or guidance about how to complete the Sex History Disclosure Polygraph Questionnaire which may include a different time frame.

7. Complete all of the sexual behavior forms first. *Again, do not put any other person's personal identifying information on these forms*. There are four sections in the Sexual History Document: Personal Sexual History, Sexual Offense Behaviors, Non-Contact Sexual Offense Behaviors, and Viewing Nudity/Pornography/Erotica/Sexual Stimulating Image.

8. Complete the summary forms for the first 2 after you have completed the sexual behavior forms.

***Please talk with your treatment and supervision team member if you have any difficulty understanding the information. You are not required to provide identifying and reportable information about unknown crimes.***

# Operational Definitions

**From Section 6.0 of the Post Conviction Sex Offender Testing (PCSOT) Model Policy**

Every behavior of concern to the multi-disciplinary supervision and treatment team is anchored by an operational definition. *Experience has shown that all of these behaviors can be discussed without disclosing personally identifiable or reportable information.*

**A.** **Physical sexual contact:** refers to rubbing or touching another person's sexual organs (i.e., breasts, buttocks, genitalia) whether over or under clothing, for the purpose of sexual arousal, sexual gratification, sexual stimulation or sexual "curiosity." This includes having, allowing, or causing another person to rub or touch one's own sexual organs, whether over or under clothing. This does not include medical care with adults or children, or parental contact with children's private areas in the form of diapering, wiping, bathing, dressing, or changing, unless done for the purpose of sexual arousal or stimulation.

**B.** **Non-contact sexual behavior:** refers to sexual behaviors such as exhibitionism, voyeurism, public masturbation, child pornography, or other sexual behaviors that are unlawful but do not involve physical contact.

**C.** **Sexual contact:** any form of contact with an individual for the purpose of sexual arousal, sexual gratification, sexual stimulation or sexual "curiosity."

**D.** **Force (real or implied violence):** any form of real or implied violence, including for sexual arousal, physical restraint to prevent a victim from leaving, escaping, or moving away from the assault, or threats of harm to a victim's family members or pets. Force/restraint may also include alcohol or drug use in a manner that deprives a person of an ability to consent.

**E.** **Coercion (non-violent):** any non-violent means to gain compliance of a victim who expresses his or her reluctance to comply (e.g., bribery, threats to embarrass or end a relationship, etc.). Coercion may also include using or providing alcohol or drugs in a manner that influences a person's thoughts, choices and behavior in ways that would differ from those when not under the influence.

**F.** **Grooming (child grooming):** any means of building trust or exploiting a relationship; this could include befriending family members to gain access to a child which could allow the victim to surmise a perception of complicity, this also applies to internet-based behaviors.

**G.** **Manipulation:** any means of trickery to gain the compliance of a victim who is unaware of the sexual motives of the offender (e.g., wrestling, horseplay, tickling and similar behaviors).

**H.** **Relative (family member):** any person related by blood, marriage, or adoption, or where a relationship has a legal status. Also include persons for whom there was the appearance of a family relationship (e.g., dating or live-in relationship with the person(s) natural, step or adoptive parent).

**I.** **Minor, child, youth, and underage person:** includes any person defined by local laws and legislature as being below the age of consent to engage in sexual behavior.

**J.** **Incidental contact:** refers to any brief, unanticipated or unplanned contact, greeting (e.g., waving, or smiling), interaction (i.e., verbal), or incidental physical contact (e.g., shaking hands, hugging, patting the head, bumping into, exchanging money or merchandise, etc.).

**K.** **Physical contact:** includes shaking hands, hugging, patting the back or head, bumping into, exchanging money or merchandise along with other forms of physical contact including sitting on one's lap, holding, wrestling or athletic activities, etc.

**L.** **Unapproved contact with minors:** any contact or activity with minors that goes against the examinee's agreement with treatment, probation, or parole (whether state or federal). This may include a variety of restricted behaviors that vary for individuals, including being alone with a minor, non-sexual physical contact, and/or other interactions.

**M.** **Alone/unsupervised contact with minors:** interaction, activity or contact with minors in any context which takes place in the absence of someone approved by treatment and/or supervision to supervise this contact.

**N.** **Approved Supervisor:** an individual who the supervision and/or treatment team has agreed can supervise contact between the examinee and a minor.

**O.** **Pornography:** the explicit depiction of sexual subject matter for the purpose of sexually arousing the viewer, sometimes referred to as X-rated or XXX material, though there is no formal rating system.

**P.** **Child Sexually Explicit Material (CSEM)/Indecent Images of Children (IIOC):** any visual depiction of sexually explicit conduct involving a minor (someone under 18). May include videos, digital or computer-generated images indistinguishable from an actual minor, and images created, adapted, or modified, but appear to depict an identifiable, actual minor. Undeveloped film or videotape, and electronically stored data that can be converted into a visual image. (USCC.Gov, 2021)

**Q.** **Sexually stimulating materials/erotica:** the use of sexually arousing imagery, especially for masturbation purposes.

**R.** **Sexual thought:** thoughts or patterns of thoughts, often in the form of mental imagery with the goal of creating or enhancing sexual arousal or sexual feelings.

**S.** **Sexual Fantasy/Erotic fantasy:** can be a developed or spontaneous story, or a short mental flash of sexual imagery. This differs from a sexual thought by length and narrative complexity. Short sexual thoughts often lead into a sexual fantasy.

**T.** **Masturbation:** refers to sexual stimulation of one's genitals, often, though not always, to the point of orgasm. Stimulation can be over or under clothing, either manually or through other types of bodily contact, through the use of objects or devices, or through a combination of these methods. Although masturbation with a partner is not uncommon, masturbation for the purpose of this Model Policy refers to self-masturbation.

**Additional Definitions (not included in the PCSOT Model Policy)**

**A.** **Use of technology for sexual purposes:** refers to smart-phones, tablets, computers, gaming devices, smart TVs, computers and other electronic devices that were used for sexual purposes including masturbation or contacting/interacting with other persons for sexual purposes.

**B.** **Uncharged Sexual Behavior:** refers to behavior you have not been convicted of. Examples of this may include (but are not limited to) a sexual behavior where you plead to a non-sexually related crime, a sexual behavior that led to a violation instead of a new conviction, the sexual behavior qualified for youthful offender status, and/or deferred sentencing such as accelerated rehabilitation.

## Section 1: Personal Sex History Form

The following information is requested because it may help your treatment provider and supervising officer to understand your case and your individual circumstances more fully.

*Do not provide any identifying information of uncharged sexual behavior such as; dates, location, relationship, or any other information that reveals the identity of another person.*

1. With how many people have you engaged in a sexual relationship (non-abusive or lawful) - whether committed, dating, long term or casual?

   _____

   _____

2. With how many persons have you engaged in sexual contact where you had no ongoing intimate, romantic, dating, or long-term relationship?

   _____

   _____

3. With how many persons have you engaged in acts of sexual infidelity during a long-term marital or dating relationship?

   _____

   _____

4. With how many sexual or intimate partners have you engaged in escalated and physical conflicts, regardless of whether or not police were called to the scene?

   _____

   _____

5. Do you recall ever being sexually abused or sexually victimized by others?

   _____

   _____

6. How many times have you paid others for sexual contact or had others pay you for sexual contact?

   _____

   _____

7. How many times have you visited or frequented adult entertainment businesses such as topless bars or strip-clubs?

   _____

   _____

8. How old were you when you first viewed pornographic materials?

   _____

   _____

9. How many times have you engaged in sex chats or sexually-based web-cam activities via an internet-connected app on a phone, tablet, computer, gaming device, or smart TV or other electronic device?

_____

_____

10. With how many people have you engaged in sexual contact whom you first met online?

_____

_____

11. How many times have you engaged in sexual contact in an institutional setting? (i.e., hospitals, jails, detention centers, group homes, treatment centers, etc.)

_____

_____

12. How many times have you engaged in group sex activities?

_____

_____

13. How many times have you used non-human objects such as sex-toys or other objects for masturbation or sexual activities with others?

_____

_____

14. How many times have you engaged in online group-sex activities via an app on a phone, tablet, computer, gaming device, smart TV or other internet connected device?

_____

_____

15. Please list any other sexual behavior - not already included in this sex history document - that you think your treatment provider or supervision officer would consider important to discuss with them (i.e., other paraphilic activities such as sadism, masochism, fetishism).

_____

_____

Printed Name: _____

Signature: _____ Date: _____

Name of person who assisted filling out this form: _____

## Section 2: Sexual Offense Behaviors

**(Section 8.2 in PCSOT Model Policy)**

*Directions:* Complete the following sexual behavior forms before completing the summary form. Talk with your treatment and supervision team member if you have any difficulty understanding the information.

***A. In-person sexual contact with underage persons***, as defined by local laws/statutes regarding the legal age of majority and consent, while you were legally an adult.

*Do not provide any identifying information of uncharged sexual behavior such as; dates, location, relationship, or any other information that reveals the identity of another person.*

| Person's Identifier | Please Circle Relation Below | Please Circle Person's Gender | Please Circle Age Range of Person at Time | Your Age(s) at Time | Max # Sexual Contacts | First Sexual Contact (Year) | Last Sexual Contact (Year) | Type of Sexual Contact |
|---|---|---|---|---|---|---|---|---|
| A | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| B | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| C | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| D | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| E | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| F | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| G | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |

Printed Name: _____

Signature: _____ Date: _____

Name of person who assisted filling out this form: _____

***B. Sexual contact with relatives***, whether by blood, marriage, adoption, or where a relationship has a legal meaning or is in effect a family relationship (e.g., a dating or live-in relationship with the person(s) natural, step or adoptive parent).

*Do not provide any identifying information of uncharged sexual behavior such as; dates, location, relationship, or any other information that reveals the identity of another person.*

| Person's Identifier | Please Circle Relation Below | Please Circle Person's Gender | Please Circle Age Range of Person at Time | Your Age(s) at Time | Max # Sexual Contacts | First Sexual Contact (Year) | Last Sexual Contact (Year) | Type of Sexual Contact |
|---|---|---|---|---|---|---|---|---|
| A | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| B | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| C | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| D | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| E | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| F | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| G | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| H | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |

Printed Name: _____

Signature: _____ Date: _____

Name of person who assisted filling out this form: _____

***C. Use of violence to engage in sexual contact,*** including any real or implied violence, physical force, restraint, or threats of harm toward an abused person or their family members, possibly including pets. This may include the use of a weapon or any physical or verbal means of violence.

*Do not provide any identifying information of uncharged sexual behavior such as; dates, location, relationship, or any other information that reveals the identity of another person.*

| Person's Identifier | Please Circle Relation Below | Please Circle Person's Gender | Please Circle Age Range of Person at Time | Your Age(s) at Time | Max # Sexual Contacts | First Sexual Contact (Year) | Last Sexual Contact (Year) | Type of Sexual Contact |
|---|---|---|---|---|---|---|---|---|
| A | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| B | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| C | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| D | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| E | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| F | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| G | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| H | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |

Printed Name: _____

Signature: _____ Date: _____

Name of person who assisted filling out this form: _____

***D. Sexual contact with persons who appeared to be unconscious, asleep, or incapacitated*** with drugs or alcohol, or who were mentally or physically helpless for other reasons. The defining characteristic of this type of abuse is that an abused person appeared to be asleep or unconscious at the time of an abuse as no one except the abused person can know for certain if they were actually asleep/unconscious or feigning sleep or unconsciousness at the time.

*Do not provide any identifying information of uncharged sexual behavior such as; dates, location, relationship, or any other information that reveals the identity of another person.*

| Person's Identifier | Please Circle Relation Below | Please Circle Person's Gender | Please Circle Age Range of Person at Time | Your Age(s) at Time | Max # Sexual Contacts | First Sexual Contact (Year) | Last Sexual Contact (Year) | Type of Sexual Contact |
|---|---|---|---|---|---|---|---|---|
| A | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| B | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| C | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| D | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| E | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| F | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| G | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| H | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |

Printed Name: _____

Signature: _____ Date: _____

Name of person who assisted filling out this form: _____

***H. Frottage/sexual rubbing***, including genitally rubbing against or touching a non-consenting person without their knowledge or permission, by standing or walking too close in public locations (e.g., work, stores, school, or other crowded places).

*Do not provide any identifying information of uncharged sexual behavior such as; dates, location, relationship, or any other information that reveals the identity of another person.*

| Person's Identifier | Please Circle Relation Below | Please Circle Person's Gender | Please Circle Age Range of Person at Time | Your Age(s) at Time | Max # Sexual Contacts | First Sexual Contact (Year) | Last Sexual Contact (Year) | Type of Sexual Contact |
|---|---|---|---|---|---|---|---|---|
| A | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| B | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| C | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| D | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| E | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| F | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| G | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| H | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |

Printed Name: _____

Signature: _____ Date: _____

Name of person who assisted filling out this form: _____

***J. Sexual contact with animals***, refers to all sexual behaviors (including attempts) involving pets, (whether belonging to the person filling out this form or others), domesticated (farm/ranch) animals, or wild animals, whether living or deceased, and whether whole or dismembered. This is often referred to as bestiality.

*Do not provide any identifying information of uncharged sexual behavior such as; dates, location, relationship, or any other information that reveals the identity of another person.*

| Animal's Identifier | Type of Animal | Please Circle Animal's Gender | Age of Animal | Your Age(s) at Time | Max # Sexual Contacts | First Sexual Contact (Year) | Last Sexual Contact (Year) | Type of Sexual Contact |
|---|---|---|---|---|---|---|---|---|
| A | | Female<br>Male<br>Unknown | | | | | | |
| B | | Female<br>Male<br>Unknown | | | | | | |
| C | | Female<br>Male<br>Unknown | | | | | | |
| D | | Female<br>Male<br>Unknown | | | | | | |
| E | | Female<br>Male<br>Unknown | | | | | | |
| F | | Female<br>Male<br>Unknown | | | | | | |
| G | | Female<br>Male<br>Unknown | | | | | | |
| H | | Female<br>Male<br>Unknown | | | | | | |
| I | | Female<br>Male<br>Unknown | | | | | | |

Printed Name: _____

Signature: _____ Date: _____

Name of person who assisted filling out this form: _____

***L. Use of a computer to solicit minors for sexual activities***, including ever using the internet, or any electronic communication device in an attempt to solicit and/or engage an underage person for sexual contact. It also includes engaging in online sex-chats or cyber-sex activities with minor-aged persons via internet relay chat, instant messaging, web chat, social media applications, dating/ "meet up" apps (applications), email and/or any other electronic method. For the purpose of this worksheet, and all online sex activities, minor age refers to any person under age 18.

*Do not provide any identifying information of uncharged sexual behavior such as; dates, location, relationship, or any other information that reveals the identity of another person.*

| Person's Identifier | Please Circle Relation Below | Please Circle Person's Gender | Please Circle Age Range of Person at Time | Your Age(s) at Time | Max # Sexual Contacts | First Sexual Contact (Year) | Last Sexual Contact (Year) | Type of Sexual Contact |
|---|---|---|---|---|---|---|---|---|
| A | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| B | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| C | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| D | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| E | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| F | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| G | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| H | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |

Printed Name: _____

Signature: _____ Date: _____

Name of person who assisted filling out this form: _____

## Section 2 Summary

*Directions:* Summarize the information on the preceding worksheets.

*Do not provide any identifying information of uncharged sexual behavior such as; dates, location, relationship, or any other information that reveals the identity of another person*

| Behavior: | Answer |
|---|---|
| Sexual contact with persons who were legally underage while you were an adult. | How many different males: |
| | How many different females: |
| | |
| Sexual contact with persons who were related to you. | How many different males: |
| | How many different females: |
| | |
| Used any form of verbal threat of harm or physical force for sexual contact: | How many different males: |
| | How many different females: |
| | How many different minors: |
| | |
| Sexual contact with persons who were unconscious/unaware/asleep/incapacitated. | How many different males: |
| | How many different females: |
| | How many different minors: |
| | |
| Sexual contact with someone who could not consent due to a mental or cognitive disability. | How many different males: |
| | How many different females: |
| | How many different minors: |
| | |
| Used a position of authority to have sexual contact with a person.<br>• Boss<br>• Teacher<br>• Coach<br>• Volunteer<br>• Medical Professional<br>• Rabbi/Priest/Minister/Faith Leader<br>• Mental Health Professional | How many different males: |
| | How many different females: |
| | How many different minors: |

| | |
|---|---|
| Rubbed against someone for sexual gratification who was unaware of you doing it. | How many different males: |
| | How many different females: |
| | How many different minors: |
| Had sexual contact with an animal: | If yes, what did you do: |
| | |
| | |
| Use of a computer to solicit and/or engage minors for sexual contact: | How many different males: |
| | How many different females: |
| | How many different minors: |

Printed Name: _____

Signature: _____ Date: _____

Name of person who assisted filling out this form: _____

## Section 3: Non-Contact Sexual Offense Behaviors

*Directions*: Complete the following sexual behavior forms before completing the summary form. Talk with your treatment and supervision team member if you have any difficulty understanding the information.

***E. Voyeurism/sexual peeping activities***, including attempts to view someone naked, undressing/dressing, or engaging in sexual acts without their permission or knowledge. This includes the use or creation of a hole or opening to view others for sexual arousal, the use of optical technology or optical devices (e.g., cameras, mirrors, binoculars, or telescope) to view others for sexual purposes, and the use of cell phones to take pictures or videos of persons without their permission (e.g., up the skirt, under a bathroom stall, by hacking into or setting up a video camera or internet-connected optical device).

*Do not provide any identifying information of uncharged sexual behavior such as; dates, location, relationship, or any other information that reveals the identity of another person*

| Person's Identifier | Please Circle Relation Below | Please Circle Person's Gender | Please Circle Age Range of Person at Time | Your Age(s) at Time | Max # Sexual Contacts | First Sexual Contact (Year) | Last Sexual Contact (Year) | Type of Sexual Contact |
|---|---|---|---|---|---|---|---|---|
| A | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| B | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| C | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| D | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| E | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| F | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| G | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |

Printed Name: _____

Signature: _____ Date: _____

Name of person who assisted filling out this form: _____

***F. Exhibitionism/indecent exposure***, including all attempts to intentionally or to appear to have "accidentally" exposed one's private parts to unsuspecting persons in public places, including the wearing of loose or baggy clothing for the purpose of enabling the sexual organs to become exposed to others for sexual purposes. Also include use of any camera or internet connected optical device to expose oneself to others for sexual purposes either "accidentally" or purposefully.

*Do not provide any identifying information of uncharged sexual behavior such as; dates, location, relationship, or any other information that reveals the identity of another person*

| Person's Identifier | Please Circle Relation Below | Please Circle Person's Gender | Please Circle Age Range of Person at Time | Your Age(s) at Time | Max # Sexual Contacts | First Sexual Contact (Year) | Last Sexual Contact (Year) | Type of Sexual Contact |
|---|---|---|---|---|---|---|---|---|
| A | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| B | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| C | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| D | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| E | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| F | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| G | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| H | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |

Printed Name: _____

Signature: _____ Date: _____

Name of person who assisted filling out this form: _____

***G. Theft or use of underwear/undergarments for sexual arousal or masturbation***, including taking or keeping undergarments (including other personal property or "trophies") from relatives, friends, sexual partners, acquaintances, or strangers for masturbation or sexual arousal. This may also include incidents of wearing another person's underwear or undergarments without that person's knowledge or permission, in addition to incidents in which underwear, undergarments, or personal property was returned after use for masturbation or other use for sexual arousal.

*Do not provide any identifying information of uncharged sexual behavior such as; dates, location, relationship, or any other information that reveals the identity of another person*

| Person's Identifier | Please Circle Relation Below | Please Circle Person's Gender | Please Circle Age Range of Person at Time | Your Age(s) at Time | Max # Sexual Contacts | First Sexual Contact (Year) | Last Sexual Contact (Year) | Type of Sexual Contact |
|---|---|---|---|---|---|---|---|---|
| A | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| B | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| C | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| D | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| E | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| F | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| G | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| H | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |

Printed Name: _____

Signature: _____ Date: _____

Name of person who assisted filling out this form: _____

***I. Child pornography (Child Sex Exploitation Material)***, including any history of viewing, possessing, producing, using, or distributing indecent images of minors in sexually provocative poses, with or without clothes, or engaging in sexual acts either alone or with others.

*Do not provide any identifying information of uncharged sexual behavior such as; dates, location, relationship, or any other information that reveals the identity of another person*

| Person's Identifier | Please Circle Relation Below | Please Circle Person's Gender | Please Circle Age Range of Person at Time | Your Age(s) at Time | Max # Sexual Contacts | First Sexual Contact (Year) | Last Sexual Contact (Year) | Type of Sexual Contact |
|---|---|---|---|---|---|---|---|---|
| A | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| B | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| C | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| D | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| E | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| F | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| G | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| H | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |

Printed Name: _____

Signature: _____ Date: _____

Name of person who assisted filling out this form: _____

***K. Stalking/following behaviors***, including all incidents of following, tracking, or observing someone for sexual or aggressive/angry reasons. It also includes all other efforts to monitor or observe another person's behavior in person, electronically or by using a surrogate, without that person's knowledge or permission. Also includes online stalking behaviors.

*Do not provide any identifying information of uncharged sexual behavior such as; dates, location, relationship, or any other information that reveals the identity of another person*

| Person's Identifier | Please Circle Relation Below | Please Circle Person's Gender | Please Circle Age Range of Person at Time | Your Age(s) at Time | Max # Sexual Contacts | First Sexual Contact (Year) | Last Sexual Contact (Year) | Type of Sexual Contact |
|---|---|---|---|---|---|---|---|---|
| A | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| B | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| C | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| D | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| E | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| F | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| G | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| H | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |

Printed Name: _____

Signature: _____ Date: _____

Name of person who assisted filling out this form: _____

***M. Masturbation or sexual acts in public places*** where one could be seen by others such as in workplace/school locations, public restrooms, or adult entertainment businesses. Although not a public place, masturbating at home in front of a window in order to be seen by others is also relevant.

*Do not provide any identifying information of uncharged sexual behavior such as; dates, location, relationship, or any other information that reveals the identity of another person*

| Person's Identifier | Please Circle Relation Below | Please Circle Person's Gender | Please Circle Age Range of Person at Time | Your Age(s) at Time | Max # Sexual Contacts | First Sexual Contact (Year) | Last Sexual Contact (Year) | Type of Sexual Contact |
|---|---|---|---|---|---|---|---|---|
| A | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| B | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| C | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| D | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| E | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| F | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| G | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| H | Related<br>Unrelated | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |

Printed Name: _____

Signature: _____ Date: _____

Name of person who assisted filling out this form: _____

***N. Online sex activities***, including sex-chat, sex-games, and web-cam sex activities, as well as online masturbation and/or virtual activities.

I. Describe how you attempted to seek sexual contacts/interactions on the computer or electronic devices (including frequency & time frames):

_____

_____

_____

_____

_____

II. List all persons with whom you had in-person or face-to-face contact as a result of meeting through a cellphone app, tablet, computer, gaming device, smart TV, other electronic device or similar means.

| Person's Identifier | Please Circle Person's Gender | Please Circle Age Range of Person at Time | Your Age(s) at Time | Where did you meet or attempt to meet | Number of Face-to-Face Contacts | Number of Sexual Contacts | Type of Sexual Contact |
|---|---|---|---|---|---|---|---|
| A | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| B | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| C | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| D | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| E | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |
| F | Female<br>Male<br>Nonbinary | Infant<br>Child<br>Teenager<br>Adult | | | | | |

Printed Name: _____

Signature: _____ Date: _____

Name of person who assisted filling out this form: _____

## Section 3 Summary

*Directions:* Summarize the information on the preceding worksheets.

*Do not provide any identifying information of uncharged sexual behavior such as; dates, location, relationship, or any other information that reveals the identity of another person*

| Behavior | Answer |
|---|---|
| Exposed your sexual body part to some-one who could not or did not consent either online (via internet or electronic means) or in person (e.g. flashing). | *How many different males:* |
| | |
| | *How many different females:* |
| | |
| | *How many different minors:* |
| | |
| | |
| Masturbated in an area where another could have seen either online (via internet or electronic means) or in person. | *If yes, approximately how many times:* |
| | |
| | |
| | |
| | |
| Secretly watched another person for a sexual purpose either online (via internet or electronic means) or in person (e.g. peeping or voyeuring). | *If yes, approximately how many times:* |
| | |
| | |
| | |
| | |
| | |
| | |
| Viewed some form of pornography that included children under the age of 18. | *If yes, approximately how many times:* |
| | |
| | |
| | |
| | |
| Sexually communicated by phone, text, social media or over the internet with someone below the age of 18 when you were over the age of 18. | *If yes, approximately how many times:* |
| | |
| | |
| | |
| | |
| | |
| | |

| | |
|---|---|
| Sent or received nude images through the mail, over the internet, social media or text of someone who was below the age of 18 when you were over the age of 18. | *If yes, approximately how many times:* |
| | *Explain:* |
| | |
| | |
| | |
| | |
| | |
| | |
| Stolen anything for a sexual purpose. | *If yes, how many times:* |
| | *List items:* |
| | |
| | |
| | |
| | |
| | |
| | |
| Visited or used the dark web. | *If yes, how many times:* |
| | *List search topics:* |
| | |
| | |
| | |
| | |
| | |
| | |
| Viewed any form of pornography that included the use of force (such as rape). | *If yes, explain:* |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| Used the internet to stalk someone. | *If yes, explain:* |
| | |
| | |
| | |
| | |
| | |

| | |
|---|---|
| Used the internet to research a fetish. | *If yes, explain:* |
| | |
| | |
| | |
| | |
| | |
| | |
| Used the internet to find information on sadism or masochism. | *If yes, explain:* |
| | |
| | |
| | |
| | |
| | |
| | |
| Had sexual contact with a dead person either online (via internet or electronic means) or in person. | *If yes, explain:* |
| | |
| | |
| | |
| | |
| | |
| | |

Printed Name: _____

Signature: _____ Date: _____

Name of person who assisted filling out this form: _____

## Section 4: Viewing Nudity/Pornography/Erotica/Sexual Stimulating Images

*Directions*: Please answer the following questions about sexual behavior that involved viewing nudity.

*Do not provide any identifying information of uncharged sexual behavior such as; dates, location, relationship, or any other information that reveals the identity of another person*

| Behavior | Answer |
|---|---|
| How old were you when you first saw pornography? | |
| | |
| | |
| | |
| How did you initially access pornography? | |
| | |
| | |
| | |
| | |
| Is there a point in your life when pornography became a daily habit? | *At what age?* |
| | *How long did this last?* |
| | |
| | |
| | |
| At what time in your life did you view pornography the most? | |
| | |
| | |
| | |
| | |
| What is the largest collection of pornography you've ever had at one time? | |
| | |
| | |
| | |
| | |
| | |
| How did you organize and maintain your collection? | |
| | |
| | |
| | |
| | |

| | |
|---|---|
| How much and how often did you access, use or interact with your pornography collection? | |
| | |
| | |
| | |
| | |
| Have you ever lost nights of sleep or been unable to go to work the next day due to your pornography habits? | *If yes, explain:* |
| | |
| | |
| | |
| | |
| Did you ever produce any pornographic videos? | *If yes, explain:* |
| | |
| | |
| | |
| | |
| What was your preferred medium? (downloaded still images, videos, magazines, etc.) | |
| | |
| | |
| | |
| | |
| When is the last time you have seen anything pornographic? | |
| | |
| | |
| | |
| | |

Printed Name: _____

Signature: _____ Date: _____

Name of person who assisted filling out this form: _____

**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 shall 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 pretrial, 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 sexual abuse material/pornography offenses, child exploitation, sexual abuse, rape, or sexual assault) or are required under federal, state or local law to register on sex offender registries.
- 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: _____

| **Name** of each staff person providing direct service delivery | Identify by **Project Code** all services each staff person will provide | Include the **Educational Background** of each staff person providing direct service delivery | Include all **Relevant Experience** based on the service delivery provided by the staff person | List **Current Licensure, Credentials, Certifications**, etc. to verify each person meets the staff qualifications related to the service delivery they are providing (*if applicable*) |
|---|---|---|---|---|
| | | | | |
| | | | | |

## CHANGE OR ADDITION OF PERFORMANCE SITE(S)

Should a vendor and/or subcontractor choose to relocate a facility or add an additional site within the catchment area, the vendor shall complete the below outlining the changes. Said notification shall be provided no less than 30 days prior and include the facility address. On site visits will be conducted to verify that the offeror's facility complies with the requirements of the RFP. Upon approval of the site, the CO will send an SF-30, Modification of Contract, for mutual agreement of the parties to accept the revision.

1. Full address where services will be provided.

2. Identify whether this is a vendor change in site location or a subcontractor change in site location.

3. Indicate whether this is an additional site location or a complete change of location.

4. Indicate which project codes or services will be provided at the site:

CERTIFICATIONS

By signing below, I certify that our agency and any subcontractor(s) will maintain compliance with all applicable business and/or operating licenses as required by state and local laws and regulations, and maintain compliance with all federal, state and local fire, safety and health codes.

PRINTED NAME OF OFFEROR : _____

SIGNATURE: _____ DATE: _____

# MONITORING REPORT

| | | |
|---|---|---|
| **District:**<br>Click or tap here to enter text. | | **Procurement Number:**<br>Click or tap here to enter text. |
| **Vendor:**<br>Click or tap here to enter text. | | **Reviewed By:**<br>Click or tap here to enter text. |
| **Date of Visit:**<br>Click or tap to enter a date. | **Date of Report:**<br>Click or tap to enter a date. | **Monitoring Period Covered:**<br>Click or tap here to enter text. |
| **Number of Open Plans:**<br>Click or tap here to enter text. | | **Number of Files Reviewed:**<br>Click or tap here to enter text. |
| **Final Overall Rating:**<br>☐Satisfactory ☐Unsatisfactory | | **Corrective Action Plan:**<br>☐Not Required ☐ Required within 5 business days |

## RATING CRITERIA

| Rating | Description |
|---|---|
| **Satisfactory (S)** | During the monitoring period, the vendor meets the requirements of the Statement of Work and operated within the terms and conditions of the agreement or there are few deficiencies with the vendor's performance. |
| **Unsatisfactory (U)** | During the monitoring period, there are patterns of deficiencies with the performance of the vendor as to the requirements of the Statement of Work that must be corrected. |

| Records, Conferences, Disclosures and Emergency Procedures | S | U | N/A |
|---|---|---|---|
| 1. File Content & Maintenance *(Section C. General Requirements, Subsection A&C)*<br>• The vendor's file contains chronological notes reflecting all significant contacts, topics covered during sessions, and modalities of therapies used.<br>• The vendor's file contains the Confidential Release of Information, the Program Plan 45 (all Amended or Terminated Program Plan 45), initial and updated Treatment Plans (every 90 days), Monthly Sign In Logs, Transitional Care Plans, Drug Testing Log (if applicable), and/or Assessments and Evaluations/Reports.<br>• The vendor's file contains prior approval for telemedicine. | ☐ | ☐ | ☐ |

| | | | |
|---|---|---|---|
| 2. Disclosure *(See Section C. General Requirements, Subsection B)*<br><br>• The vendor protects persons under supervision information including pretrial records.<br>• The vendor notifies the officer upon receipt of legal process requiring disclosure of defendant/person under supervision records. | ☐ | ☐ | ☐ |
| 3. Vendor Testimony *(See Section C., General Requirements, Subsection G)*<br><br>• The vendor does not create, prepare, offer, or provide any opinions, reports or testimony that is not outlined by this statement of work. | ☐ | ☐ | ☐ |
| 4. Emergency Services and Contact Procedures *(See Section C, General Requirements, Subsection H)* | ☐ | ☐ | ☐ |
| **Comments and Positive Feedback:**<br><br>Click or tap here to enter text. | | | |
| **Deficiencies:**<br><br>Click or tap here to enter text. | | | |

| **Provision of Services** | **S** | **U** | **N/A** |
|---|---|---|---|
| 1. Case Staffing Conference *(See Section C. General Requirements, Subsection E.)*<br><br>• The vendor is communicating with the USPO/USPSO at the following frequency:<br>- *PCRA High and Moderate* – Minimum of every 30 Days<br>- *All Residential Treatment Placements* – Minimum of every 30 Days<br>- *All Other Referrals* – Minimum of every 90 Days<br>- *Upon request of USPO/USPSO*<br>- *Pretrial PTRA 3, 4, 5* – Minimum of every 30 days<br>- *Pretrial PTRA 1, 2* – Minimum of every 90 days<br>- *Pretrial SO* – ongoing<br>- *Post-Conviction SO* – Minimum of every 30 days<br>• The vendor's staff conferences with the USPO/USPSO include the defendant's/person under supervision's motivation for treatment, modality and frequency of treatment, SMART goals (specific – not vague and tied to presenting problem; measurable – quantifiable; achievable – realistic; relevant – treatment related; and time-bound – start, incremental and attainable), PCRA Risk Factors (post-conviction only), responsivity factors, cultural considerations for service delivery factors, noncompliance with supervision or treatment, community observations, collateral supports, and/or officer delivered interventions. | ☐ | ☐ | ☐ |

| | | | |
|---|---|---|---|
| 2. Vendor Reports *(See Section C., General Requirements, Subsection F.)*<br><br>• The Treatment Plan must be signed by the vendor and defendant/person under supervision, and must include information regarding SMART goals, actions steps, support networks, medication management, community-based services, skills developed to manage risk, self-management skills, target completion dates, recommendations and justifications for continued treatment (where applicable).<br>- *Treatment Plans* are sent initially and every 90 days thereafter.<br>• The Transitional Care Plan must include the reason for concluding contract treatment, the supportive social networks, medication management, community-based services, skills developed to manage risk, self-management skills, and diagnosis and prognosis.<br>- *Transitional Care Plans* are sent at the conclusion of contract services, but no later than 15 days after treatment is terminated. | ☐ | ☐ | ☐ |
| 3. Notifying USPO/USPSO of Defendant/Person Under Supervision Behavior<br><br>• The vendor provides notification in writing within 24 hours of any violation behaviors including no-shows, positive drug tests or drug testing violations, behavior that may increase risk, and or/not following staff direction. *(See Section C., Notifying USPO/USPSO of Defendant/Person under Supervision Behavior)* | ☐ | ☐ | ☐ |
| 4. Interactions with defendant/person under supervision *(See Section C.)*<br><br>• Interactions include the use of cognitive and behavioral techniques, including but not limited to cognitive restructuring, skill building using a structured learning approach (including modeling, role rehearsal and feedback), and teaching the skill of problem solving to change thought patterns while teaching pro-social skills.<br>• Interventions address risk and needs as defined in the treatment plan. | ☐ | ☐ | ☐ |
| **Comments and Positive Feedback:**<br><br>Click or tap here to enter text. | | | |
| **Deficiencies:**<br><br>Click or tap here to enter text. | | | |

| **Staff, Facility, and Invoice Requirements** | **S** | **U** | **N/A** |
|---|---|---|---|
| 1. Invoicing *(See Section G)*<br><br>• The vendor submits invoices on time (no later than the 10th of the month), correct, and complete. | ☐ | ☐ | ☐ |
| 2. Vendor's compliance with Sections E, F, G, and H of the Statement of Work<br><br>• Physical location in catchment area.<br>• Office space preserves confidentiality.<br>• Immediate placement of federal clients.<br>• All requests to terminate treatment for a defendant/person under supervision must be approved and Prob45 completed. | ☐ | ☐ | ☐ |
| **Comments and Positive Feedback:**<br><br>Click or tap here to enter text. | | | |
| **Deficiencies:**<br><br>Click or tap here to enter text. | | | |

| **Interviews/Observations** | |
|---|---|
| **1. Defendant/Person Under Supervision -** A representative sample of defendants/persons under supervision will be interviewed using a minimum of the following questions:<br><br>1. I feel understood, supported, or reassured by my counselor. Not at All, Somewhat, or Very Much<br>2. I have a clear understanding of the problems I need to work on in treatment. Not at All, Somewhat, or Very Much<br>3. I understand and agree with my treatment goals. Not at All, Somewhat, or Very Much<br>4. I have improved my skills and learned new strategies to cope with my problems. Not at All, Somewhat, or Very Much<br>5. I am personally invested in my treatment and what I need to do to achieve my goals. Not at All, Somewhat, or Very Much<br>6. What recommendations do you have for program improvement?<br>7. What else is important for us to know? | |
| **Number of Interviews:** | Click or tap here to enter text. |
| **Summary of Responses:**<br><br>Click or tap here to enter text. | |

| |
|---|
| **2. USPO/USPSO –** A representative sample of officers will be interviewed using a minimum of the following questions:<br><br>1. Do officers have a collaborative working relationship with the person providing service delivery?<br>2. What is going well?<br>3. What recommendations do you have for program improvement?<br>4. What else is important for us to know? |

| | |
|---|---|
| **Number of Interviews** | Click or tap here to enter text. |

| |
|---|
| **Summary of Responses:**<br><br>Click or tap here to enter text. |
| **3. Vendor** – A representative sample of those providing service delivery will be interviewed using a minimum of the following questions:<br><br>1. Does the person providing service delivery have a collaborative working relationship with officers?<br>2. Describe the clinical interventions used to address risk factors. (If applicable)<br>3. What is going well?<br>4. What else is important for us to know? |

| | |
|---|---|
| **Number of Interviews** | Click or tap here to enter text. |

| |
|---|
| **Summary of Responses:**<br><br>Click or tap here to enter text. |
| **4. Group Observation** (if applicable) |
| **Number of Observations:** Click or tap here to enter text. |
| **Summary of Treatment Services Observation Form(s):**<br><br>Click or tap here to enter text. |
| **Summary of Participant Group Therapy Questionnaires:**<br><br>Click or tap here to enter text. |

| **Rating** | |
|---|---|
| **Satisfactory:** ☐ | **Unsatisfactory** ☐ |
| **Justification:**<br><br>Click or tap here to enter text. | |
| **Deficiencies Requiring Corrective Action Plans (if applicable):**<br><br>Click or tap here to enter text. | |

# SECTION K - REPRESENTATIONS, CERTIFICATIONS, AND OTHER STATEMENTS OF OFFERORS OR QUOTERS

## K.1 Provision 3-130, Authorized Negotiators - (Jan 2003)

The offeror represents that the following persons are authorized to negotiate on its behalf with the judiciary in connection with this solicitation *(offeror lists names, titles, and telephone numbers of the authorized negotiators*).

Name: _____
Titles: _____
Telephone: _____
Fax: _____
Email: _____

## K.2 Provision 3-5, Taxpayer Identification and Other Offeror Information - (APR 2011)

(a) Definitions.

"Taxpayer Identification (TIN)," as used in this provision, means the number required by the Internal Revenue Service (IRS) to be used by the offeror in reporting income tax and other returns. The TIN may be either a social security number or an employer identification number.

(b) All offerors shall submit the information required in paragraphs (d) and (e) of this provision to comply with debt collection requirements of 31 U.S.C. §§ 7701(c) and 3325(d), reporting requirements of 26 U.S.C. §§ 6041, 6041A, and implementing regulations issued by the IRS. If the resulting contract is subject to the payment reporting requirements, the failure or refusal by the offeror to furnish the information may result in a 31 percent reduction of payments otherwise due under the contract.

(c) The TIN may be used by the government to collect and report on any delinquent amounts arising out of the offeror's relationship with the government (31 U.S.C. § 7701(c)(3)). If the resulting contract is subject to payment recording requirements, the TIN provided hereunder may be matched with IRS records to verify the accuracy of the offeror's TIN.

(d) Taxpayer Identification Number (TIN): _____

[]TIN has been applied for.

[]TIN is not required, because:

[]Offeror is a nonresident alien, foreign corporation or foreign partnership that does not have income effectively connected with the conduct of a trade or business in the United States and does not have an office or place of business or a fiscal paying agent in the United States;

[]Offeror is an agency or instrumentality of a foreign government;

[]Offeror is an agency or instrumentality of the federal government.

(e) Type of Organization:

[]sole proprietorship;

[]partnership;

[]corporate entity (not tax-exempt);

[]corporate entity (tax-exempt);

[]government entity (federal, state or local);

[]foreign government;

[]international organization per 26 CFR 1.6049-4;

[]other

(f) Contractor representations.

The offeror represents as part of its offer that it is [___], is not [___] 51% owned and the management and daily operations are controlled by one or more members of the selected socio-economic group(s) below:

[]Women Owned Business

[]Minority Owned Business (if selected then one sub-type is required)

[]Black American Owned

[]Hispanic American Owned

[]Native American Owned (American Indians, Eskimos, Aleuts, or Native Hawaiians)
[]Asian-Pacific American Owned (persons with origins from Burma, Thailand, Malaysia, Indonesia, Singapore, Brunei, Japan, China, Taiwan, Laos, Cambodia (Kampuchea), Vietnam, Korea, The Philippines, U.S. Trust Territory of the Pacific Islands (Republic of Palau), Republic of the Marshall Islands, Federated States of Micronesia, the Commonwealth of the Northern Mariana Islands, Guam, Samoa, Macao, Hong Kong, Fiji, Tonga, Kiribati, Tuvalu, or Nauru)

[]Subcontinent Asian (Asian-Indian) American Owned (persons with origins from India, Pakistan, Bangladesh, Sri Lanka, Bhutan, the Maldives Islands, or Nepal)
[]Individual/concern, other than one of the preceding.

# SECTION L - INSTRUCTIONS, CONDITIONS, AND NOTICE TO OFFERORS

## L.1. GENERAL INSTRUCTIONS FOR PROPOSALS

**Request for Proposals**

This Request for Proposal consists of Sections A through M.

**Section A - Solicitation/Offer/Acceptance Form, AO 367**

In Section A, page 1 is the **Solicitation/Offer/Acceptance.** The Offeror must fill out the following blocks on the form:

(1) Block 8, as instructed on the form.
(2) Block 10, acknowledgment of amendments.
(3) Block 11, name and address of Offeror.
(4) Block 12, telephone number.
(5) Block 13, name and title of person authorized to sign the offer.
(6) Block 14, signature of Offeror (this shall be signed by a representative authorized to commit the Offeror to contractual obligations. Signature can be electronic or physical.).
(7) Block 15, date signed.

**Section B - Submission of Prices**

(1) **Services**

The Offeror must provide a price for each identified project code (with the exception of actual cost or administrative fees).

(2) **Prices**

The prices submitted must reflect the requirements of the Statement of Work for each project code requested as well as all terms and conditions of the contract that relate to that service item. Note: the fiscal year for the federal Government begins on October 1 of one calendar year through September 30 of the next. Pricing shall include the base fiscal year, as well as pricing for each fiscal option year.

(3) **Acceptable Responses**

(a) **Unit Price**

Sliding price scales will not be accepted by the Government. The price will reflect the unit as defined in Section B and the Statement of Work for each project code.

(b) **"N/C" = No Charge**

For any item that the Offeror will provide without charge or without additional charge, the Offeror shall insert "N/C" in the Unit Price column of Section B.

(c) **Subcontracting**

For project codes the Offeror will be subcontracting, the Offeror shall insert the letter "S" following the price inserted in the Unit Price column. Subcontracting includes all services outsourced in order to fulfill the requirements of the agreement.

(d) **Prices and "No Shows"**

The Judiciary does not reimburse vendors for defendant/person under supervision no-shows. When formulating pricing for services, the Offeror should consider incorporating the cost of “No-shows” into the proposed unit price. A “No-show” occurs when a defendant/person under supervision does not report for scheduled services and/or does not cancel with at least 24 hours advance notice.

(4) **Estimated Monthly Quantity**

The figures provided in the Estimated Monthly Quantity column of Section B are estimates of the frequency that the services will be required. Estimated Monthly Quantities are based on the specific unit indicated within the project code. (For example, if one unit is equal to thirty minutes at a unit rate of $10, but the service provided is ninety minutes, that would equate to three units of the service for a total cost of $30. Within Section B, the Offeror shall include the pricing based on the unit indicated). *These figures are estimates only and the government is not bound to meet these estimates.* Note that if the government awards to multiple Offerors, the Estimated Monthly Quantities would be spread amongst the multiple Offerors; however, the government is not required to award to multiple Offerors, even if indicated in Section B. An Offeror should be prepared to provide the full amount of Estimated Monthly Quantities reflected. If the Offeror is unable to provide the full amount of Estimated Monthly Quantities, the Offeror must expressly state this within its proposal and provide the reasoning behind it, as well as indicate the volume of services the Offeror would be capable of providing.

**Proposal Submission**

Proposals are due by the Date and Time specified in Section A Block 6 of the Solicitation/Offer/Acceptance. *Proposals shall be e-mailed to the person designated in Block 4 and/or 5 of Section A, Solicitation/Offer/Acceptance.* All e-mail submissions must reference in the subject line, the Solicitation # indicated in Section A, Block 1 of the Solicitation/Offer/Acceptance. Hard copies will not be accepted, unless otherwise noted. It is the responsibility of the offeror to confirm the government's receipt of the proposal.

By submission of a signed proposal (including the submission of the Certification of Compliance (Attachment A) described below), the Offeror is agreeing to comply with all requirements, terms, and conditions of this solicitation and any resultant agreement or contract. **Note: The Offeror shall not submit solicitation sections C, D, E, F, G, H, I, and J as part of its proposal.**

**Section I – Required Clauses**

The Offeror shall register in the System for Award Management (www.sam.gov) at the time an offer is submitted. Note: if awarded, the Offeror shall maintain registration in www.sam.gov. Failure to do so could result in delay in payments. Registration in www.sam.gov is not used in determining technical acceptability.

**Section K - Representations, Certifications, and Other Statements of Offeror**

The Offeror must check or complete all applicable boxes or blocks in the paragraphs under Section K of the Solicitation Document and submit the full section as that of the Proposal. Completion of Section K is not used in determining technical acceptability.

The Offeror's Statements, Qualifications, and References (if applicable) contained in Attachments A through D to this solicitation document shall be completed and submitted as follows:

**Preparation of Certification of Compliance Statement (Attachment A)**

1. Each Offeror shall prepare and submit as part of its offer one **CERTIFICATION OF COMPLIANCE STATEMENT** in which the Offeror certifies that it will provide the mandatory requirements stated in Sections C, E, F, G, H, and I 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) on the Certification of Compliance Statement and certify they will provide services in compliance with the requirements of the RFP. Do not submit separate compliance statements for each subcontractor but shall write in on Attachment A all subcontractors that will be performing services. If the Offeror is not utilizing any subcontractor(s) to perform services, the Offeror shall notate this in writing.

**Preparation of Background Disclosure (Attachment B)**

1. Each Offeror shall prepare and submit as part of its offer a **BACKGROUND DISCLOSURE** addressing the requirements in paragraphs 2.a. through d below. (See Attachment B). The Offeror shall identify and clearly label all required documents included in the submitted proposal. If the Offeror is proposing any subcontractors to perform services, the Offeror also shall comply with the requirements in paragraphs 2 a. through d pertaining to each proposed subcontractor.

2. In the **BACKGROUND DISCLOSURE** the Offeror shall:

   a. Identify in writing all agencies (to include federal, state, and local agencies) that have conducted monitoring/compliance/audits/performance reports for the previous five (5) years, indicate the types of services provided, indicate the date(s) of the auditing period and the rating and/or findings from each audit report, and attach a copy of each report. The government reserves the right to review past performance information from other sources. To be considered technically acceptable, an Offeror must have received ratings of in compliance (or have remedied any unsatisfactory rating and provided documentation of same).

      Offerors who are currently awarded an agreement are not required to provide copies of monitoring reports of the USPO/USPSO conducting the solicitation but shall provide copies of monitoring reports from other USPO/USPSO agreements.

      If the Offeror does not have any monitoring/compliance/audit/performance reports, or other certification of compliance reports (e.g. private practice), to be considered technically acceptable, the Offeror shall explicitly note this in writing within its proposal with an explanation of why no such reports exist.

      Monitoring/compliance/audit/performance reports for proposed subcontractors are not required.

   b. specifically identify each performance site at which the Offeror and all proposed subcontractors intend to provide services in response to this solicitation. Offeror and subcontractor sites shall be located within the solicitation's identified catchment area and shall be operational sites at the time of the RFP submission. Onsite evaluations will be individually performed at Offeror and subcontractor sites.

   c. maintain compliance with all applicable business and/or operating licenses as required by state and local laws and regulations. The Offeror is responsible for ensuring that proposed subcontractors have all applicable business and/or operating licenses as required by state and local laws and regulations.

d. maintain compliance with all federal, state and local fire, safety and health codes. 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.

3. By submitting the **BACKGROUND DISCLOSURE** the Offeror certifies that all information contained therein is correct and accurately reflects the Offeror's ability to perform.

**Preparation of Staff Qualifications - (Attachment C)**

The Offeror shall prepare and submit the **OFFEROR'S STAFF QUALIFICATION FORM** (see Attachment C) for all staff, including subcontractor(s), providing direct delivery of services under any resultant contract. The Offeror shall include the name of each staff person providing direct service delivery, identify by project code all services each staff person will provide, include the educational background on each staff person providing direct service delivery, include all relevant experience based on the service delivery provided by the staff person, and list current licensure, credentials, certifications, etc. to verify each person meets the staff qualifications related to the service delivery they are providing.–

Note: the Offeror is not required to provide documentation of the education, credentials, licenses, and certification of staff members; however, the Offeror is responsible for verifying the information is accurate and that any required licenses or certifications are current and remain current throughout the agreement.

In addition, the Offeror shall certify that no proposed staff members are currently under investigation for or charged with a criminal offense and/or no proposed staff members are currently under pretrial, probation, parole, mandatory release or supervised release (federal, state, or local).

The Offeror shall also certify that no proposed staff members have been convicted of any sexual offense (including but not limited to child sexual abuse material/pornography offenses, child exploitation, sexual abuse, rape, or sexual assault) or are required under federal, state or local law to register on the Sexual Offender registry. Attachment C shall also be prepared for all proposed subcontractor staff performing services.

**Preparation of Offeror's References - (Attachment D)**

The Offeror shall provide three references (Federal, State, or local government agencies and/or private organizations), using Attachment D, for whom the Offeror has provided the same or similar type of treatment and other services identified in this RFP within the past 3 years. Offerors who are currently awarded an agreement with the USPO/USPSO agency soliciting these services, are not required to provide references. Agreements with other federal agencies, even if for same or similar type of services, are required to provide references. Note: references should not include current USPO/USPSO employees, or other U.S. Courts employees. Provide the name, agency and title, phone number and e-mail address for the contact person. It is the responsibility of the Offeror to notify references the government reserves the right to contact any reference and

consider the information provided as part of its responsibility determination.

**Sections L - Instructions, Conditions and Notices to Offerors, and M - Evaluation Criteria**

Sections K, L and M contain information and instructions and do not become part of any resultant agreement.

**L.2 Provision 3-100, Instructions to Offerors - (APR 2013)**

(a) *Definitions* As used in this provision:
"Discussions" are negotiations that occur after establishment of the competitive range that may, at the contracting officer's discretion, result in the Offeror being allowed to revise its offer.
In writing," "writing," or "written" means any worded or numbered expression that can be read, reproduced, and later communicated, and includes electronically transmitted and stored information.
"Offer modification" is a change made to an offer before the solicitation's closing date and time, or made in response to an amendment, or made to correct a mistake at any time before award.
"Offer revision" is a change to an offer made after the solicitation closing date, at the request of or as allowed by a contracting officer as the result of negotiations.
"Time," if stated as a number of days, is calculated using calendar days, unless otherwise specified, and will include Saturdays, Sundays, and legal holidays. However, if the last day falls on a Saturday, Sunday, or legal holiday, then the period will include the next working day.

(b) *Amendments to solicitations* If this solicitation is amended, all terms and conditions that are not amended remain unchanged. Offerors shall acknowledge receipt of any amendment to this solicitation by the date and time specified in the amendment(s). An Offeror's failure to acknowledge amendments affecting price, quantity, quality or delivery may result in the Offeror's proposal being determined unacceptable where award is made without discussions.

(c) *Submission, modification, revision, and withdrawal of offers*
(1) The first page of the offer shall show:
(i) the solicitation number;
(ii) the name, address, and telephone and facsimile numbers of the Offeror (and electronic address if available);
(iii) a statement specifying the extent of agreement with all terms, conditions, and provisions included in the solicitation and agreement to furnish any or all items upon which prices are offered at the price set opposite each item;
(iv) names, titles, and telephone and facsimile numbers (and electronic addresses if available) of persons authorized to negotiate on the Offeror's behalf with the judiciary in connection with this solicitation; and
(v) name, title, and signature of person authorized to sign the offer. Offers signed by an agent shall be accompanied by evidence of that agent's authority, unless that evidence has been previously furnished to the issuing

office.

(2) *Submission, modification, revision, and withdrawal of offers*

(i) Offerors are responsible for submitting offers, and any modifications or revisions, so as to reach the judiciary office designated in the solicitation by the time specified in the solicitation. If no time is specified in the solicitation, the time for receipt is 4:30 p.m., local time, for the designated judiciary office on the date that offer or revision is due.

(ii) (A) Any offer, modification, or revision received at the judiciary office designated in the solicitation after the exact time specified for receipt of offers is "late" and will not be considered unless it is received before award is made, the contracting officer determines it's in the judiciary's best interest, the contracting officer determines that accepting the late offer would not unduly delay the procurement, and:

(1) if it was transmitted through an electronic commerce method authorized by the solicitation, it was received at the initial point of entry to the judiciary infrastructure not later than 5:00 p.m. one working day prior to the date specified for receipt of offers; or

(2) there is acceptable evidence to establish that it was received at the judiciary installation designated for receipt of offers and was under the judiciary's control prior to the time set for receipt of offers; or

(3) it is the only offer received.

(ii) (B) However, a late modification of an otherwise successful offer that makes its terms more favorable to the judiciary, will be considered at any time it is received and may be accepted.

(iii) Acceptable evidence to establish the time of receipt at the judiciary installation includes the time/date stamp of that installation on the offer wrapper, other documentary evidence of receipt maintained by the installation, or oral testimony or statements of judiciary personnel.

(iv) If an emergency or unanticipated event interrupts normal judiciary processes so that offers cannot be received at the office designated for receipt of offers by the exact time specified in the solicitation, and urgent judiciary requirements preclude amendment of the solicitation, the time specified for receipt of offers will be deemed to be extended to the same time of day specified in the solicitation on the first work day on which normal judiciary processes resume.

(v) Offers may be withdrawn by written notice received at any time before award. Oral offers in response to oral solicitations may be withdrawn orally. If the solicitation authorizes facsimile offers, offers may be withdrawn via facsimile received at any time before award, subject to the conditions specified in Provision 3-115, "Facsimile Offers." Offers may be withdrawn in person by an Offeror or an authorized representative, if the identity of the person requesting withdrawal is established and the person signs a receipt for the offer before award.

(3) Offerors shall submit offers in response to this solicitation in English and in U.S. dollars.

(4) Offerors may submit modifications to their offers at any time before the solicitation closing date and time, and may submit modifications in response to an amendment, or to correct a mistake at any time before award.

(5) Offerors may submit revised offers only if requested or allowed by the contracting officer.

(6) Offers may be withdrawn at any time before award. Withdrawals are effective upon receipt of notice by the contracting officer.

(d) *Offer expiration date* Offers in response to this solicitation will be valid for the number of days specified on the solicitation cover sheet (unless a different period is proposed by the Offeror).

(e) *Restriction on disclosure and use of data* Offerors that include in their offers data that they do not want disclosed to the public for any purpose, or used by the judiciary except for evaluation purposes, shall:

(1) mark the title page with the following legend:

This offer includes data that shall not be disclosed outside the judiciary and shall not be duplicated, used, or disclosed-in whole or in part-for any purpose other than to evaluate this offer. If, however, a contract is awarded to this Offeror as a result of-or in connection with-the submission of this data, the judiciary shall have the right to duplicate, use, or disclose the data to the extent provided in the resulting contract. This restriction does not limit the judiciary's right to use information contained in this data if it is obtained from another source without restriction. The data subject to this restriction are contained in sheets [*insert numbers or other identification of sheets*]; and

(2) mark each sheet of data it wishes to restrict with the following legend:

Use or disclosure of data contained on this sheet is subject to the restriction on the title page of this offer.

(f) *Contract award*

(1) The judiciary intends to award a contract or contracts resulting from this solicitation to the responsible Offeror(s) whose offer(s) represents the best value after evaluation in accordance with the factors and subfactors in the solicitation.

(2) The judiciary may reject any or all offers if such action is in the judiciary's interest.

(3) The judiciary may waive informalities and minor irregularities in offers received.

(4) The judiciary intends to evaluate offers and award a contract without discussions with Offerors (except clarifications). Therefore, the offeror's initial offer shall contain the Offeror's best terms from a price or price and technical standpoint. The judiciary reserves the right to conduct discussions if the contracting officer later determines them to be necessary. If the contracting officer determines that the number of offers that would otherwise be in the competitive range exceeds the number at which an efficient competition can be conducted, the contracting officer may limit the number of offers in the competitive range to the greatest number that will permit an efficient competition among the most highly rated offers.

(5) The judiciary reserves the right to make an award on any item for a quantity less than the quantity offered, at the unit price or prices offered, unless the Offeror specifies otherwise in the offer.

(6) The judiciary reserves the right to make multiple awards if, after considering the additional administrative prices, it is in the judiciary's best interest to do so.

(7) Exchanges with Offerors after receipt of an offer do not constitute a rejection or counteroffer by the judiciary.

(8) The judiciary may determine that an offer is unacceptable if the prices proposed are materially unbalanced between line items or sub-line items. Unbalanced pricing exists when, despite an acceptable total evaluated price, the price of one or more contract line items is significantly overstated or understated as indicated by the application of price or price analysis techniques. An offer may be rejected if the contracting officer determines that the lack of balance poses an unacceptable risk to the judiciary.

(9) If a price realism analysis is performed, price realism may be considered by the source selection authority in evaluating performance or schedule risk.

(10) A written award or acceptance of offer mailed or otherwise furnished to the successful Offeror within the time specified in the offer shall result in a binding contract without further action by either party.

(11) The judiciary may disclose the following information in post-award debriefings to other Offerors:

(i) the Overall evaluated price or price and technical rating of the successful Offeror;

(ii) the overall ranking of all Offerors, when any ranking was developed by the judiciary during source selection;
(iii) a summary of the rationale for award; and
(iv) for procurements of commercial items, the make and model of the item to be delivered by the successful Offeror.

**Attachment A**

## OFFEROR'S CERTIFICATION OF COMPLIANCE STATEMENT

As required in Section L.1, Preparation of Certification of Compliance Statement, the Offeror shall complete the certification below.

I, the Offeror, hereby certify I will provide the mandatory requirements stated in Sections C, E, F, G, H and I 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.

I, the Offeror, hereby certify all the below listed subcontractor(s) (if applicable) will provide the mandatory requirements stated in Sections C, E, F, G, H and I 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.

Include below the names of all subcontractor(s) OR ☐: check box to indicate no subcontractor(s) utilized in the agreement.

PRINTED NAME OF OFFEROR: _____

SIGNATURE OF OFFEROR: _____ DATE: _____

TITLE:_____

**Attachment B**

## OFFEROR'S BACKGROUND DISCLOSURE

As required in Section L.1, Preparation of the Background Disclosure, the Offeror shall complete and sign the Background Disclosure below (attach pages as needed labeled as subsets of this Attachment number).

Identify in writing all agencies (to include federal, state, and local agencies) that have conducted monitoring/compliance/audits/performance reports for the previous five (5) years, indicate the types of services provided, indicate the date(s) of the auditing period and the rating and/or findings from each audit report, and attach a copy of each report (with the exception of providing reports from the USPO/USPSO conducting the solicitation). If the Offeror does not have any monitoring/compliance/audit/performance reports, or other certification of compliance reports (e.g. private practice), the Offeror shall explicitly note this in writing with an explanation of why no such reports exist.

List below the full address(es) of each performance site where services will be provided (as well as all performance sites a subcontractor will utilize) and, if utilizing multiple performance sites, specify which project codes or services will be provided at each site:

CERTIFICATIONS

By signing below, I certify that all information provided in the BACKGROUND DISCLOSURE is accurate, complete, and correct.

I certify the offeror and any subcontractors maintain compliance with all applicable business and/or operating licenses as required by state and local laws and regulations.

I certify the offeror and any subcontractors maintain compliance with all federal, state and local fire, safety and health codes.

PRINTED NAME OF OFFEROR: _____

SIGNATURE: _____ DATE: _____

**Attachment C**

## OFFEROR'S STAFF QUALIFICATIONS

As required in Section L.1, Preparation of Staff Qualifications, the Offeror shall prepare and submit below, (attach pages as needed labeled as subsets of this attachment number), for all staff providing direct delivery of services under any resultant Agreement. The Offeror shall complete the certification section below.

## CERTIFICATIONS

By signing below, I, the Offeror, 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 pretrial, 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 sexual abuse material/pornography offenses, child exploitation, sexual abuse, rape, or sexual assault) or are required under federal, state or local law to register on sex offender registries.

- 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 OFFEROR: _____

SIGNATURE: _____ DATE: _____

**Attachment C**

**OFFEROR'S STAFF QUALIFICATIONS**
(add additional pages as needed)

| **Name** of each staff person providing direct service delivery | Identify by **Project Code** all services each staff person will provide | Include the **Educational Background** of each staff person providing direct service delivery | Include all **Relevant Experience** based on the service delivery provided by the staff person | List **Current Licensure, Credentials, Certifications, etc.** to verify each person meets the staff qualifications related to the service delivery they are providing (if applicable) |
|---|---|---|---|---|
| | | | | |
| | | | | |
| | | | | |
| | | | | |

**Attachment D**

## OFFEROR'S REFERENCES

As required in Section L.1, the new Offerors shall provide three (3) references below:

Reference #1

Name and Title:

Agency Name and Physical Address:

Phone Number:

Email Address:

Reference #2

Name and Title:

Agency Name and Physical Address:

Phone Number:

Email Address:

Reference #3

Name and Title:

Agency Name and Physical Address:

Phone Number:

Email Address:

# SECTION M - EVALUATION FACTORS FOR AWARD

## M.1 Basis for Award

Selection of vendors with whom the Probation/Pretrial Services Office will establish BPA's will be based on technical acceptability and the lowest price to the Government. If the solicitation document identifies that BPA's will be established with a specified number of vendors, the selection of technically acceptable vendors shall be based on price. For example, if a solicitation document identifies that 1 to 2 vendors are needed to provide services and 3 vendors are determined to be technically acceptable, awards will be made to no more than 2 of the lowest priced vendors.

## M.2 Evaluation of Proposals

a. To be acceptable and eligible for evaluation, proposals shall be prepared in accordance with the instructions given in Sections B and L of this solicitation document.

b. By submission of a proposal, the offeror accepts all the terms and conditions of the RFP. Proposals that take exception to the terms and conditions will be determined technically unacceptable and the offeror will be so advised.

c. Proposals will be evaluated to be considered Technically Acceptable using the following Pass/Fail Criteria. To determine that the offeror has met the following criteria, each proposal shall be evaluated to determine that every individual requirement has been met.

## MI.3 Pass-Fail Criteria

The following criteria address the offeror's ability to perform and comply with all the mandatory service requirements set forth in the Request for Proposals. **Offerors who do not meet these requirements will be deemed to be technically unacceptable and will receive no further consideration**. In the event all offeror proposals are deemed technically unacceptable, all offerors will be provided the opportunity to correct deficiencies and resubmit a technically acceptable proposal. The offeror(s) will be so advised. Proposed subcontractor personnel qualifications and facilities will be evaluated and considered in the determination of the offeror's technical acceptability. The review of the criteria shall be based on the Offeror's Technical Proposal, which contains the Offeror's Certification of Compliance, Offeror's Background, and the Offeror's Staff Qualifications. Each of these shall demonstrate how the offeror will perform/meet the requirements of the RFP.

**SECTION A – SOLICITATION / OFFER / ACCEPTANCE FORM (AO 367)**

Offeror completed Blocks 8, 10, 11, 12, 13, 14 and 15 of the Solicitation/Offer/Acceptance Form (AO 367)

YES or NO

Proposal was electronically (unless otherwise noted) submitted within the designated date/time indicated in Section A

YES or NO

**SECTION B – SUBMISSION OF PRICES**

Offeror provided pricing for every identified project code (with the exception of actual cost or administrative fees).

YES or NO

**SECTION I – REQUIRED CLAUSES**

The Offeror has registered in the System for Award Management (www.sam.gov)? Must be completed prior to award but it is not used in determining technical acceptability.

YES or NO

**SECTION K – REPRESENTATIONS, CERTIFICATIONS, AND OTHER STATEMENTS OF OFFERORS OR QUOTERS**

Offeror checked or completed all applicable boxes or blocks in the paragraphs under Section K of the Solicitation Document and resubmitted the full section with the Proposal. (Required but not used in determining technical acceptability).

YES or NO

**SECTION L – CERTIFICATION OF COMPLIANCE STATEMENT**

Offeror signed and submitted Attachment A, OFFEROR'S CERTIFICATION OF COMPLIANCE STATEMENT.

YES or NO

Offeror identified all subcontractors in the OFFEROR'S CERTIFICATION OF COMPLIANCE STATEMENT or indicated no subcontractors to be used.

YES or NO

**SECTION L – BACKGROUND DISCLOSURE**

Offeror identified all agencies (to include federal, state, and local agencies) that have conducted monitoring/compliance/audits/performance reports for the previous five (5) years, to include the types of services provided and the date(s) of the auditing period and the rating and/or findings from each audit report.

YES or NO

The Offeror provided a copy of each monitoring/compliance/audit/ performance report from the previous five (5) years.

Offerors who are currently awarded an agreement are not required to provide copies of monitoring reports of the USPO/USPSO conducting the solicitation but shall provide copies of monitoring reports from other USPO/USPSO agreements.

YES or NO or N/A

Offeror *expressly stated in its proposal* that it does not have any monitoring/compliance/audit/performance reports, or other certification of compliance and provided an explanation as to why no such reports exist.

YES or NO or N/A

Monitoring/compliance/audit/performance report have a rating of in compliance (or have remedied any unsatisfactory rating and provided documentation of same)

YES or NO or N/A

Offeror's (and all proposed subcontractor) site(s) at which services will be provided is/are located in catchment area and are operational at time of RFP submission.

YES or NO or N/A

Offeror signed and submitted Attachment B, OFFEROR'S BACKGROUND DISCLOSURE, certifying compliance with the requirements as listed in paragraphs 2(a) through 2(d) of Section L.

YES or NO

**SECTION L – STAFF QUALIFICATIONS**

Offeror signed and submitted page 1 Certifications of Attachment C, OFFEROR'S STAFF QUALIFICATIONS,

YES or NO

Offeror's Attachment C, OFFEROR'S STAFF QUALIFICATIONS, identified each staff person (and any proposed subcontractor) providing direct delivery of services, included identifying by project code all services each staff person will provide, included the educational background of each staff person providing direct service delivery, included all relevant experience based on the service delivery provided by the staff person, and listed current licensures, credentials, certifications, etc. to verify staff qualifications related to project codes.

YES or NO

Offeror (and any proposed subcontractor) meets all minimum staff requirements listed in Section C of the RFP.

YES or NO

**SECTION L – PREPARATION OF OFFEROR'S REFERENCES**

Offeror provided three references (Federal, State, or local government agencies and/or private organizations), using Attachment D, for whom the Offeror has provided the same or similar type of treatment and other services identified in this RFP within the past 3 years. Offerors who are currently awarded an agreement with the judiciary are not required to provide references. YES or NO or N/A

## SECTION C – FACILITY REQUIREMENTS (ON-SITE VISITS)

On-site visits will be conducted for those offeror's whose proposals are determined technically acceptable based on the above stated criteria and meet the lowest price requirement. On-site visits will be conducted to verify that the offeror's facility complies with the requirements of the RFP. There will be on-site evaluations for all subcontractors providing services.

An on-site visit is not required for Offerors who are currently awarded an agreement with the judiciary unless the Offeror's proposal includes a performance site where services are not currently provided under the existing agreement.

Offeror's (and any proposed subcontractor) facility meets requirements listed in Statement of Work.

YES or NO

Is there private office space preserving both the integrity of the confidential relationship and the personal dignity of the client?

YES or NO

Is there a secured filing or electronic storage system to preserve confidentiality of defendant/person under supervision services?

YES or NO

Did the vendor establish emergency (24 hours/ 7 days a week) contact procedures (i.e., crisis intervention, schedule changes, local hotlines, and/or situations requiring immediate attention), for times when counselors are not available.

YES or NO

The facility provides adequate access for defendants/persons under supervision with physical disabilities (e.g. elevator access to second floor office space, etc.). In the event the space does not, the vendor has provided an alternative facility/space within the identified catchment area that meets the requirements.

YES or NO

**Residential Treatment Only**

Are emergency and evacuation plans and diagrams posted?

YES or NO

Are there smoke detectors on each floor?

YES or NO

Is the facility in compliance with state and local licensure requirements for residential treatment?

YES or NO

**Urine Collection Testing Only**

Is there a dedicated bathroom or one that can be secured for collecting urine?

YES or NO

Is there a secured room for the storage of specimens and supplies?

YES or NO

### M. 4 Evaluation of Price

The Government will determine Total Evaluated Price for required services by using the following formula:

(a) Determining Total Evaluated Price -- Multiply the Estimate Monthly Quantity (EMQ) by 12 months to get a Yearly Quantity. Multiply that figure by the unit Price offered to arrive at the Total Evaluated Price for that project code. Yearly prices of project codes are totaled to arrive at Total Evaluated Price for each offeror.

(b) Project codes that are offered at "N/C" or No Charge, will be evaluated in the Life of Agreement comparison by entering $0.00 for the unit price.

(c) Project codes that are reimbursable at actual prices or at a travel regulation rate are not considered in the price comparison.

(d) Project codes not marked as required services will not be evaluated or considered.

(e) Total Evaluated Price (TEP) shall be rank ordered to show the lowest TEP.

**M.5 Provision 2-85A Evaluation Inclusive of Options (JAN 2003)**

(a) The judiciary will evaluate offers for purposes of award by adding the total price for all options to the total price for the basic requirement. Evaluation of options does not obligate the judiciary to exercise the option(s).

(b) Any offer that is materially unbalanced as to prices for basic and option quantities may be rejected. An unbalanced offer is one that is based on prices significantly less than prices for some work and prices that are significantly overstated for other work.

**M.6 Clause 3-70 Determination of Responsibility (JAN 2003)**

A determination of responsibility will be made on the apparent successful offeror prior to contract award. For an offeror to be found responsible, the offeror must not be on the List of Parties Excluded from Federal Procurement and Non-Procurement Programs and references (if applicable) must show satisfactory performance. If the offeror is found non-responsible, that offeror will be rejected and will receive no further consideration for award. In the event an offeror is rejected based on a determination of non-responsibility, a determination will be made on the next apparent successful offeror.