

Contract Year July 1, 2024 to June 30, 2026



**STANDARD TERMS &
CONDITIONS FOR
INDEPENDENT PRACTITIONERS**

**ARIZONA SUPREME COURT
ADMINISTRATIVE OFFICE OF THE COURT
JUVENILE JUSTICE SERVICES DIVISION**

Contacts for Questions

If you have any questions regarding AOC contract requirements for Independent Practitioners, please review the following contents. Below is a list of AOC Staff that may provide you further assistance if necessary. Thank you.

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<https://www.azcourts.gov/jjsd/ContractsMonitoring>

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SECTION I – DEFINITIONS FOR TERMS USED IN THE STANDARD TERMS & CONDITIONS AND SERVICE SPECIFICATIONS

1. Definitions

“**ACH**” means the Automated Clearing House vendor direct deposit payment system; it is a central distribution and settlement point for clearing the electronic credit and debit transaction between financial institutions.

“**ADHS/Licensing**” means Arizona Department of Health Services/Division of Licensing Services.

“**AHCCCS**” means Arizona Health Care Cost Containment System.

“**A.R.S.**” means the Arizona Revised Statutes.

“**ASC/AOC/JJSD/JJSD**” means the Arizona Supreme Court/Administrative Office of the Courts, Juvenile Justice Services Division.

“**Acuity**” means the severity or intensity of a mental health disorder, personality disorder, behavior disorder, emotional condition or alcohol, drug or other substance use disorder.

“**Application**” means the Contractor’s responses to the Administrative Qualification and/or Programmatic Services and any accompanying documents, which are the basis for award of this Contract.

“**Attachment A**” means that document attached to the Contract Form setting forth the Compensation Schedule, the types of services to be provided, and any Special Terms and Conditions applicable to the AOC Contract.

“**AZYAS**” means Arizona Youth Assessment System. A risk assessment tool used by the probation department to assess a juvenile’s risk for criminal recidivism and identify domains for addressing service and/or treatment need(s).

“**BBHE**” means the Arizona Board of Behavioral Health Examiners.

“**Case Management**” means supportive services provided to enhance treatment compliance and effectiveness. Case management activities include assistance in accessing, maintaining, monitoring, and modifying covered services; assistance in finding resources, communication and coordination of care, outreach and follow-up of crisis contacts or missed appointments. Case management is not professional consultation. Case management services are not a billable service under the AOC contract.

“**Client**” means a juvenile referred by the probation department and/or juvenile court authorized to receive services under this Contract.

“Client Records” means all existing documents, papers, records or other material regardless of physical form which contain personal information made or received about the juvenile, including juvenile identifying information, information on the services and treatment provided to the juvenile or other activities regarding the juvenile. Client records are the property of the referring juvenile court and may not be released without a court order (see Paragraph 21 of these AOC Standard Terms & Conditions for more information).

“Clinical Assessment” means the internal bio-psycho-social assessment completed as part of the process to document, collect, and analyze information as it relates to delinquency risk, criminogenic factors, social history, educational/vocational history, legal status/history family functioning, substance use, treatment and behavioral health history in order to determine a DSM diagnosis using the most current version of the DSM, the strengths and needs of a client and his/her family. See Paragraph 41-A of these AOC Standard Terms & Conditions. This assessment is NOT the external Assessment for General Mental Health (Svc Code 123), Sexually Abusive Behavior Assessment (Svc Code 127) or Substance Use Assessment (Svc Code 128) utilized to provide treatment recommendations as a stand-alone service.

Clinical Oversight” means a collaborative relationship between the supervisor and behavioral health technician (BHT) that may occur face-to-face, via videoconferencing and/or telephonically. It is monitoring the services provided by a BHT to ensure that skills and knowledge related to the provision of contractor’s services, providing guidance to improve a BHT’s skills and knowledge and recommending training for a BHT to improve the BHT’s skills and knowledge related to the provision of the contractor’s services.

Clinical Supervision- a mutual endeavor enhanced by a trusting bi-directional relationship that leads to professional development and enhanced client care through mentoring, guidance, and clinical oversight.

“Compensation Schedule” means the rates, fees or other compensation terms set forth in Attachment A to the Contract Form or in a Contract Amendment or Change Order.

“Contract” means the formal agreement between the ASC/AOC/JJSD and the Contractor as described in the Contract Form.

“Contract Form” means the ASC/AOC/JJSD form that the Contractor’s Authorized Representative and the Contract Officer sign agreeing to the terms of the Contract.

“Contract Officer” means the ASC/AOC/JJSD Juvenile Justice Services Division Program Director or that Director’s authorized designee.

“Contractor” means that person or entity which has entered into this Contract with the AOC.

“Contractor Orientation” means a mandatory training session requiring the attendance of all Contractors and provided by the AOC that relates to the Contractor’s obligations and requirements contained in these AOC Standard Terms & Conditions, AOC *Service*

Specifications, monitoring procedures, outcome reporting and invoicing for services.

“Contractor’s Authorized Representative” means that person whom the Contractor has authorized to sign the Contract Form and to legally bind and officially represent the Contractor to the ASC/AOC/JJSD on all matters under this Contract. Only the Contractor’s Authorized Representative may sign contract amendments or other legal documents authorizing changes to the contract and/or services.

“Contractor’s Signatory” means the individual practitioner who signs the Contract Form to legally bind the Contractor to the ASC/AOC/JJSD on all matters under this Contract.

“Contractor Orientation” means a mandatory training session requiring the attendance of all Contractors and provided by the AOC that relates to the Contractor’s obligations and requirements contained in these AOC Standard Terms & Conditions, AOC *Service Specifications*, monitoring procedures, outcome reporting and invoicing for services.

“Co-occurring Disorders” means the presence of more than one and often several of the following disorders that are identified independently of one another and are not simply a cluster of symptoms resulting from a single disorder: mental illness, mental retardation (intellectual disability), or substance abuse (substance use disorders); brain injury; or developmental disability.

“Co-occurring Services” means individually planned therapeutic treatment that concurrently treats the integrated service needs of individuals who have co-occurring disorders

“Counseling” means the therapeutic process based on interaction between a juvenile, juveniles or juvenile’s family and a clinician qualified under ASC/AOC/JJSD contract terms, intended to improve, eliminate, or manage one or more of a juvenile’s behavioral health issues in an individual, group or family setting.

“Criminogenic” means internal and external factors that contribute to criminal behavior and recidivism. Criminogenic risk factors include antisocial behavior; antisocial personality; anti-social thinking; anti-social peers; dysfunctional family; problems with employment and education; leisure and recreation; and substance abuse.

“Cultural Competency” Cultural competence refers to the process by which systems respond respectfully and effectively to juveniles/families of all cultures, languages, classes, races, ethnic backgrounds, religions, spiritual traditions, immigration status, and other diversity factors in a manner that recognizes, affirms, and values the worth of juveniles, families, and communities and protects and preserves the dignity of each.

“Current” means up to date, extending to the present time.

“Days” means AOC business days unless otherwise indicated.

“DCS” means the Arizona Department of Child Safety.

“De-escalation” means a method of verbal communication or non-verbal signals and actions, or a combination of signals and actions, that interrupt a client’s behavior crisis and calms the client.

“Delinquency Prevention Program” means any education-based program, which may utilize a curriculum, and does not include the delivery of professional counseling services

“Delinquency Risk” means the characteristics and/or variables, if present for a given juvenile, that make it more likely the juvenile will criminally re-offend.

“Designated Authorities” means those public entities which may be directly involved in the care and treatment of court referred juveniles, such as the ASC/AOC/JJSD and superior court personnel.

“Direct Care Services” means non-professional services that may include but are not limited to life skills education and training, recreation and social activities, milieu activities, guidance, and juvenile supervision that are non-therapeutic in nature and provided by a person working directly with juveniles.

“Direct Therapeutic Services” means professional services that are therapeutic in nature and are provided to a juvenile without continuous direct visual supervision.

“Direct Visual Supervision” means to be physically present and available to respond to the needs of the supervisee or the juvenile.

“Director” means the Administrative Director of the ASC/AOC/JJSD or that Director’s authorized designee.

“Discharge/Aftercare Plan” a document that is created with the juvenile, family/guardian, probation officer and other stakeholders that are integrally involved in the preparation of discharge from the program or transition to a different level of care.

The final discharge plan identifies recommendations for referrals, additional or continued services to ensure continuity of care, or sustain the changes that have been accomplished in the program. It will also include identification of supports available to the client and family and/or guardian in the community and plans to access those resources.

“Discharge Planning” means a process which begins at the initiation of service, outlining discharge criteria and goals in the initial treatment/service plan. The process continues in a dynamic manner throughout services, with review and revision of the discharge planning occurring during each treatment/service plan review and update. It shall include identification of objectives that a client needs to accomplish in order to be discharged from the program or make a transition to a different level of care. The purpose of on-going discharge planning is to develop guided support for the client and family to promote sustainable change.

“Documentation” or “documented” means information in written, photographic, electronic, or other permanent form.

“DPS” means the Arizona Department of Public Safety.

“Due Diligence” means the care that a reasonable person exercises under the circumstances to avoid harm to other persons or their property.

“Electronic” means relating to technology that has electrical, digital, magnetic, wireless, optical, or electromagnetic capabilities or similar capabilities. (A.R.S. §44-7002.5.)

“Electronic Record” means a record that is created, generated, sent, communicated, received or stored by electronic means. (A.R.S. §44-7002.7.)

“Emergency Safety Response” means physically holding a client to safely manage a sudden, intense, or out-of-control behavior to prevent harm to the client or another individual.

“Encrypted” means data security whereby electronic records are converted into an alternate format to prevent unauthorized access.

“Evidence-based Practice” (as related to juvenile justice interventions) means strategies that have been shown, through current scientific research to lead to a reduction in recidivism.

“Extended Jurisdiction Youth” -A.R.S. § 8-202(H) provides for the juvenile court to extend the jurisdiction of a juvenile beyond their 18th birthdate. At any time before an adjudication hearing or a proceeding in which a juvenile is admitting to an allegation in a petition that alleges the juvenile is delinquent, the state may file a notice of intent to retain jurisdiction over a juvenile who is 17 years of age. Once ordered, extended jurisdiction allows a juvenile court to retain jurisdiction until a juvenile turns 19 years of age. In cases which a juvenile court has extended jurisdiction over a person they will provide continued probation supervision and treatment services until the person turns 19, or until otherwise terminated by the court. This allows for continuity of services which began prior to the juvenile’s 18th birthdate.

“Facility-based Program” means any program which is frequently and regularly held at a location in which the facility is integral to the program’s operation. The term includes but is not limited to out-of-home programs, most day support programs, and may include other outpatient and delinquency prevention services programs.

“Family” means a biological, adopted, or self-created unit of people living together and/or with significant attachment that consists of adult(s) and children, with adult(s) performing duties of parenthood for the children. Persons within this unit share bonds, culture, practices and significant relationships.

“Family Counseling” means therapeutic process based on interaction between a client and the client’s family that involves parents/guardians or other family members working with a therapist/clinician to achieve relative stability of the family unit. It emphasizes the importance of involving the whole family unit opposed to focusing efforts on a single

individual.

“Grievance” means a description of a circumstance or action a client believes to be unjust and grounds for a complaint related to their basic rights.

“Group Home” means a residential facility that is licensed to serve four (4) or more minors at any one time and that is licensed by the Arizona Department of Health Services pursuant to A.R.S. Title 36, Chapter 4 or A.R.S. § 36-591, Subsection B., or by the Arizona Department of Economic Security, pursuant to A.R.S. Title 8, Chapter 5, Article 1 and that provides services pursuant to a contract or minors determined to be dependent as defined in A.R.S. § 8-201 or delinquent or incorrigible pursuant to A.R.S. § 8-341, or for minors with developmental disabilities, mental health or substance abuse needs. Group Home does not include hospitals, nursing homes, child crisis and domestic violence shelters, adult homes, foster homes, facilities subject to any transient occupancy tax or behavioral health service agencies that provide twenty-four (24) hour or continuous physician availability.

“Incident” means an unusual or significant event involving client(s) and/or personnel, which requires notification to the designated authorities.

“Incident Report” means a report that is verbal or written communication to the probation officer, the Superior Court and the ASC/AOC/JJSD.

“In-county” means providing a service to clients within the county where the Contractor maintains an office location.

“Independent Practitioner” means a contractor who is a sole proprietor, a corporation, a limited liability company, or a partnership consisting of no more than two (2) persons, which does not use employees or non-employees to provide direct services, with the exception of pre-approved psychometrists.

“Individual Education Plan (IEP)” means a written document that describes educational goals for a particular juvenile, and the services that the juvenile needs to attain those educational goals.

“Informed Consent to Treat” means having documented agreement by the client and the client’s guardian, parent, custodian or agent before a client receives a specific treatment or a change in treatment for which informed consent has not yet been obtained. The Informed Consent is obtained only after a client and, if applicable, the client’s parent, guardian, custodian or agent receives a verbal explanation of the specific treatment being proposed, the intended outcome, nature and procedures of the proposed treatment, the risks and side effects of the proposed treatment along with the risks of not proceeding with the proposed treatment, the alternatives to the proposed treatment and that informed consent is voluntary and may be withdrawn at any time.

“Intern” means an individual who is enrolled in an academic program of a college or university and who provides direct services related to the academic subject matter as part of the college’s academic program's requirements.

“Invoice” means the document utilized between the Contractor and AOC that itemizes and records the monthly statement of services provided by the contractor to youth and families referred to AOC services through a service authorization form.

“Invoice Billing Manual” means the most current version of the manual of that title that the ASC/AOC/JJSD, Juvenile Justice Services Division, publishes establishing minimum billing requirements and practices for this Contract.

“JSAB” means a juvenile who commits a sexually abusive behavior.

“Key Personnel” means persons who provide professional services and/or has oversight responsibility of direct services, and/or who are identified in the Application.

“Limited English Proficiency (LEP)” means not speaking English as the primary language and/or having a limited ability to read, speak, write, or understand English. Individuals with LEP are entitled to language assistance with respect to a particular type of service, benefit or encounter.

“Medical Necessity” means the need for treatment services which are necessary to diagnose, treat, cure or prevent regression of significant functional impairments resulting from symptoms of a mental health or substance use disorder diagnosis.

“Medication” means prescribed or over-the-counter drugs or both.

“Medication Administration” means the direct application of medications by injection, inhalation, ingestion, or any other means to an individual receiving services by (i) persons legally permitted to administer medications or (ii) the individual at the direction and in the presence of persons legally permitted to administer medications.

“Medical Treatment” means professional medical intervention above and beyond first aid for the purpose of treating an ailment or injury, preventing further physical harm, and/or health risk.

“Medication Error” means an error in administering a medication to an individual and includes when any of the following occur: (i) the wrong medication is given to an individual, (ii) the wrong individual is given the medication, (iii) the wrong dosage is given to an individual, (iv) medication is given to an individual at the wrong time or not at all, or (v) the wrong method is used to give the medication to the individual.

“Medication Storage” means any area where medications are maintained by the provider, including a locked cabinet, locked room, or locked box.

“Non-Clinical Assessment” An assessment completed by a behavioral health technician or paraprofessional which summarizes, at minimum, the following: the presenting issue, family history, substance use history, criminogenic risk factors, legal, medical and social history (including any allergies), education, and any current or past history of behavioral health treatment. A discussion of immediate needs shall also be addressed (i.e., safety, suicide, domestic violence, etc.) See paragraph 41- C.

“Non-employee” means any person, provider or agency, other than bona fide employees of the Contractor, who, under an agreement with the Contractor, is providing or may provide direct services to clients under this Contract. The term is limited to interns and psychometrists.

“Non-facility-based services” means services such as “in-home”, home-based” or “mobile services” that are provided at locations such as home, school, detention or community locations other than the contractor’s business location.

“Out-of-county” means any Arizona county other than the county in which the Contractor has an office location. Contractors with multiple office locations may use ‘out-of-county’ only when billing for services in counties where they have no office location and travel to provide services in person in the county the client resides.

“Out-of-Home Program” means a program in which a client resides consistently for twenty-four (24) hours or longer in a licensed living facility.

“Outing” means a social or recreational activity that: occurs away from the premises; is not a part of the out-of-home or facility-based programs’ daily routine; and lasts longer than 4 hours.

“Personnel” means any principal or employee, whether temporary, full-time or part-time who is paid and who will provide direct services to clients referred to the Contractor under this Contract.

“Plan of Correction” means the provider's pledged corrective action in response to cited areas of noncompliance documented by the contracting entity. A plan of correction must be completed within a specified time.

“Policy” means a definite direction or course of action that guides decisions and activities within the agency or institution. It describes what action the institution will take with regard to a specific issue.

“Probation Department” means the juvenile probation department or adult probation department of the Superior Court or its employees designated to enforce the terms and conditions of probation required by law and the Superior Court, including participation in programs authorized by A.R.S. 8-321 and 8-322.

“Procedure” means the detailed and sequential actions necessary to ensure that a policy is fully implemented. It describes the who, what, when, where, and how of implementing policy.

“Professional Consultation” means a service authorized by a Service Authorization Form (SAF) which is provided supplementary to a contracted service. Professional Consultation may include court testimony or specific activities requested by the referring probation department. Professional Consultation **is not case management**. (Refer to the AOC *Service Specification* to determine whether Professional Consultation is available as an

adjunctive service).

“Professional Services” means services as identified in Paragraph 33 provided by a person meeting the qualifications described in Paragraph 34 or Paragraph 35 of these AOC Standard Terms & Conditions. *Please refer to Service Specifications for specific guidelines.

“Provider Standards” means the requirements, standards and deliverables set forth in Sections III through XV of these AOC Standard Terms & Conditions.

“Psychometrist” means a trained individual (subcontractor or intern) who administers and scores psychological tests for evaluation and diagnosis services. Within the scope of this contract, a psychometrist may not conduct the clinical interview or interpret test results and must meet minimum qualifications of applicable AOC *Evaluation & Diagnosis Service Specifications*.

“RBHA” means Regional Behavioral Health Authority which administers public behavioral health services throughout the State of Arizona.

“Records” means all data in whatever form, including written, photographic, and electronic data, relating to this Contract. It includes but is not limited to books; documents; financial records; personnel records; documents supporting information provided in a Prequalification Form or in an application; and reports, plans, assessments, evaluations and any other data, whether or not the Contractor prepares it, pertaining to each client that the Contractor serves under this Contract.

“Resident” means any client placed in out-of-home pursuant to a contract with a contracting authority.

“Responsivity Principle” means considering individual characteristics when matching clients to services. These characteristics include, but are not limited to: culture, gender, motivational stages, developmental stages, and learning styles.

“Restraint” means an approved physical restraint or medication used to manage a juvenile’s behavior that is not standard treatment and dosage for juvenile’s medical condition) restricting a client’s freedom of movement, physical activity, or access to the client’s own body to prevent harm to the juvenile or others.

“Riot” A person commits a riot if, with two or more other persons acting together, such person recklessly uses force or violence or threatens to use force or violence, if such threat is accompanied by immediate power of execution, which disturbs the public peace.

“SAF” means a Service Authorization Form which is initiated by the referring probation department to authorize payment for services to be delivered under this Contract.

“Seclusion” means the involuntary confinement of a client in a room or area where the client is prevented from leaving but does not include the confinement of a client in a correctional facility.

“Secured setting” means a facility that uses a method, device or structure to prevent a resident from an area or from departure from the facility. Unsecured refers to no method, device or structure used to prevent a resident from departing.

“Service Specifications” means service standards and performance requirements set forth in the ASC/AOC/JJSD Application.

“Services” means all services that the Contractor is to provide under this Contract.

“Special Terms and Conditions” means those terms and conditions set forth in Attachment A to the Contract Form, and in any Amendments or Change Orders.

“Specialty Track” means a service contracted supplementary, and in addition to a primary contracted service. The Specialty Track provides additional specialized therapy not available with the primary service and is available for contract only with select *AOC Service Specifications*. Therapists delivering specialty track services will be required to submit additional certification or documentation of training supporting their ability to provide the supplementary service. The therapist must maintain all certifications and continuing education requirements to continue providing a specialty track service.

“Standard Terms & Conditions” means the contract provisions set forth in this document.

“State” means the State of Arizona.

“Sub-Contractor” means any person, provider or agency, other than bona fide employees of the Contractor, who, under an agreement with the Contractor, is providing or may provide direct services to clients under this Contract, in exchange for financial compensation.

“Supervision” means a collaborative relationship between the supervisor and supervisee that may occur face-to-face, via videoconferencing and/or telephonically. Supervision involves a direct dialogue that is client-centric in nature; discusses the experiences and interactions between clients, their families and supervisees; promotes development of responsibility, skills, knowledge, attitudes, and techniques; and which assists the supervisee to engage in the provision of services in an ethical, safe and competent manner.

“Telemedicine” (also known as Telehealth) means the practice of health-care delivery, diagnosis, consultation and treatment, and the transfer of medical data through interactive audio, video or data communications that occur in the physical presence of the patient, including audio or video communications sent to a health care provider for diagnostic or treatment consultation.

“Termination Report” means the report provided to the probation department following termination of services that summarizes the services provided to the client.

“Transferred Youth” means a juvenile transferred to Superior Court for (adult) criminal prosecution per ARS §8-302, §8-327 and §13-501.

“Trauma Certified” or “Trauma-Certified Professional” means that a counselor or clinician has attended specific training to learn trauma related techniques and practices to provide immediate and longer-term individual, group, and/or family counseling, therapy, and support to trauma survivors either as a specialty or within their field of practice. The therapist must have received a completion certificate for Trauma Certification from an approved AOC organization. Certification in specific trauma-related techniques is not acceptable for this designation.

“Trauma Informed” means an overall approach and philosophy to provide trauma care to clients. Trauma Informed Care is an organizational structure and treatment framework that involves understanding, recognizing, and responding to the effects of all types of trauma. Trauma Informed Care also emphasizes physical, psychological, and emotional safety for both consumers and providers, and helps survivors rebuild a sense of control and empowerment.

“Treatment” means a procedure or method to cure or improve an individual’s behavioral health issue.

“Treatment/Service Goal” means the desired result or outcome of treatment/services.

“Treatment Method” means the specific approach used to achieve a treatment/service goal.

“Treatment Objectives” means the specific time-targeted steps identified to achieve the treatment/service goals.

“Treatment/Service Plan” means a description of interventions to be delivered and measurable goals and objectives to be achieved by the juvenile/family during a set time or by a specific target date as indicated in the AOC Standard Terms & Conditions.

“Treatment/Service Plan Review” means an activity organized by the contractor and including the client, the parent/guardian and the probation officer that is held at intervals as indicated in these AOC Standard Terms & Conditions.

“Treatment Principle” means delivery of targeted and timely treatment interventions focused on criminogenic needs to provide the greatest long-term benefit to the community, the victim, and the client.

“Validated Risk Assessments” (i.e. AZYAS, J-SOAP-II, etc.) means an assessment instrument which has been studied, tested and reliably proven to identify criminogenic and non-criminogenic factors correlated to a reduction in recidivism when applied to youth who are involved with the criminal justice system.

“Vendor Performance Report (VPR)” means a formal complaint document to assess vendor performance of a contractor and to state whether corrective action is required or additional remedies to improve performance and bring contractor into contract compliance.

“Volunteer” means a person authorized by the Contractor and who voluntarily undertakes a direct care service on a regular basis without financial compensation from the Contractor.

SECTION II - GENERAL PROVISIONS

2. Contract Effective Date

The Contract shall be effective on the start date specified on the Contract Form.

3. Duration of Contract

- A. **Basic Term.** The term of this contract shall be that set forth in the Contract Form.
- B. **Extension of Term.** The Contract may be extended beyond the basic term if the number of extensions and their duration are set forth in the Independent Practitioner Solicitation. The basic term and extensions shall not collectively exceed five (5) years. To extend the term, the Contract Officer shall provide written notice to the Contractor of the desire to extend the Contract not less than forty-five (45) days prior to the expiration of the original Contract term or any subsequent extension. Extensions will not be offered to vendors with unresolved performance problems, licensing or certification problems, significant contractual or statutory violations, or unresolved health and safety issues. The AOC reserves the right to make changes to these Terms & Conditions and/or to the AOC Service Specifications at the time of the Contract extension. If both parties agree, in writing, the Contract shall be amended, and the Contract Officer and the Contractor's Authorized Representative shall sign the amendment. Extension of the Contract shall not be assumed and is not officially extended until the Contractor receives a written contract extension form.
- C. **Non - renewal.** The Contractor shall provide written notice to the Contract Officer no later than sixty (60) days in advance of the expiration of the contract, of its intent to not renew contract service or the contract. If the Contractor fails to comply with the provisions of this Paragraph, the Contract Officer may take whatever actions that the officer deems appropriate under Paragraph 11 of these AOC Standard Terms & Conditions.

4. Maintenance of Quality Service Delivery

- A. The Contractor shall provide services which comply at all times with the Contract and deliver them according to the Contract and within the bounds of applicable professional standards.
- B. **Warranty.** The Contractor warrants that the services it provides under the Contract shall at all times meet the requirements of the Contract, including the Service Specifications and the AOC Standard Terms & Conditions and the AOC Invoice Billing Manual.
- C. **Right to Reject.** The Contract Officer shall have the right to reject the Contractor's use of any person, whether the person is Contractor personnel, intern, volunteer or psychometrist, to provide services under this Contract where that officer reasonably

determines that the person's background or conduct is unsuitable to provide the assigned services.

- D. **Facility Condition and Maintenance.** If the Contractor provides services to clients at its facility, the Contractor shall maintain the facility in good repair and keep it in a clean condition to assure the safety and comfort of clients. The Contractor shall prohibit smoking of any kind in or on the property of any facility where it provides services to clients. The Contractor shall not rely primarily on the work of clients to maintain and keep the facility clean.
- E. **Private Practice.** If the Contractor provides services separate and apart from this Contract, it shall do so in a manner which does not interfere with Contractor's performance of this Contract and which does not create a conflict of interest.
- F. **Related Litigation, Complaints, or Investigations.** In the event that the Contractor, any of its personnel, interns, psychometrists or volunteers are criminally charged, are named in litigation alleging professional misconduct, or are subject to a complaint or other matter before an administrative licensing entity, including the Department of Child Safety (DCS), the Contractor shall immediately notify the Contract Officer in writing. The notice shall state the date that the litigation or complaint was filed, or the administrative proceeding was initiated, the names of the parties, the case number, and the allegations involved. It shall also state whether, at the times alleged in the charge, litigation, complaint, or proceeding, the Contractor or the Contractor's personnel, or any non-employees (see definition) were providing services to any client under this Contract, and whether the alleged misconduct involves those services.
- G. **Licenses.** The Contractor shall, at its expense, obtain and maintain for the duration of the Contract all licenses, certifications, credentials, permits, certificates, and other authority required by law for the Contractor and its employees to do business, render services, and perform work under this Contract. The Contractor shall forward to the Contract Officer all copies of Arizona Department of Health Services Licenses (ADHS) and the Department of Child Safety (DCS) licenses/operating certificates for facilities in which services under this Contract are provided, and individual professional licenses for all personnel providing professional services and/or providing supervision to personnel providing professional services under this Contract. This includes, but is not limited to, renewals, expirations, and changes in status of license, i.e., provisional status. The Contractor shall ensure staff providing professional services under this Contract practice within the scope of his/her licensure or licensing body regulation. The Contractor shall notify the ASC/AOC/JJSD immediately upon notice of an allegation of any health, safety and/or welfare licensing violation.
- H. **Timeliness.** The Contractor shall make all reasonable efforts to deliver the services under this Contract to the client in a timely manner and notify the referring probation department, in writing, in the event service delivery cannot occur **within ten (10) business days** after Contractor's dated signature on the SAF, notification shall be maintained in the client file.

- I. **Responsibility for Performance.** The Contractor shall be responsible for overall contract performance, compliance and services provided by employees, or any non-employees providing services under this Contract. The Contractor shall ensure at all times that the services provided, and the persons providing them, meet all of the requirements of the Contract.

5. Use of Psychometrists and Interns

- A. **Contractual Requirements.** Any agreement between the Contractor and a psychometrist (paid or unpaid) or intern who provides or may provide services under this Contract shall be in writing and shall be approved by the AOC prior to delivery of services. The agreement shall explicitly set forth, or incorporate by reference, these AOC Standard Terms & Conditions, relevant Special Terms & Conditions, and the applicable AOC *Service Specifications*, which shall apply with equal force to the psychometrist or intern as if it were the Contractor. The Contractor shall review the agreement and have the psychometrist or intern sign an initial agreement, and annually thereafter. The agreement shall prohibit the psychometrist or intern from subcontracting any part of the service. Please contact the AOC Contract unit for required documentation.

The authority to review psychometrists and interns are for the purpose of permitting verification of persons who are involved in performance of this Contract and who are treated by the Contractor as a psychometrist or interns and are bound by the terms of this contract.

- B. **Warranty.** The Contractor warrants that the qualifications of, and the services provided by psychometrists or intern, meet all the requirements of the Contract.
- C. **Noncompliance.** If the Contractor fails to comply with the provisions of this Paragraph, the Contract Officer may take whatever actions that the officer deems appropriate under Paragraph 11 of these AOC Standard Terms & Conditions.
- D. **Approval:** The AOC shall approve the use of any psychometrists and/or interns.
- E. **Notice of Change in Key Personnel.** The contractor must notify the ASC/AOC/JJSD within seven (7) business days of any change in key personnel who provide professional services (psychometrist or interns) or direct services, and /or who are identified by the Contractor and whose absence directly effects the continuation or provision of services.

A change in key personnel includes, but may not be limited to, the following:

- i. Change in position.
- ii. Termination.
- iii. Resignation.

- iv. Extended absence for more than 30 days.
- v. Suspension or administrative leave; and
- vi. New Employee.

The Contractor must submit a plan of action which addresses the vacancy of the key personnel position being vacated to the satisfaction of the ASC/AOC. If new staff is hired in response to the vacancy, the Contractor will submit a Notice of Change of Key Personnel form.

6. Notice Requirements

- A. **Notice to the Contract Officer.** The Contractor shall provide in writing, notice of changes, closures, programs listed below to the Contract Officer via mail, email, or fax to:

**Arizona Supreme Court
Juvenile Justice Services Division
Attn: Contracts & Monitoring Program Manager
1501 West Washington, Suite 337
Phoenix, Arizona 85007-3231
FAX 602-452-3879**

- B. **Permission from Probation Officer/Court to Change Contracted Vendor.** If at any time the Contractor considers recommending a juvenile be sent out-of-state as a part of the client's treatment program the Contractor shall send a written request to the probation officer to staff the case. A juvenile may not be moved out of state without written permission from the probation officer or the court as appropriate. Rules of Interstate Compact on the Placement of Children (ICPC) must be followed prior to any out-of-state placement.
- C. **Notice of Intent to Add, Move or Close a Facility, Service or Program.** The Contractor shall provide written notice to the Contract Officer no later than 60 days in advance of its intent to add, move, or close a facility or program at which it has been providing services to juveniles under this Contract. If a facility/program is listed on the contract and the Contractor does not intend to use the facility/program for over ninety (90) days, the Contractor must submit a contract amendment to reflect the temporary change in the facility/program status. Failure to properly notify the ASC/AOC/JJSD may result in the Contract Officer taking actions that the contract officer deems appropriate under Paragraph 11 of these AOC Standard Terms & Conditions.
- D. **Notice of Change in Key Personnel.** The Contractor shall provide immediate written notice to the ASC/AOC/JJSD of any changes of key personnel, as defined in these AOC Standard Terms & Conditions, paragraph 5 of a program/service under this Contract. At least annually and upon request the Contractor shall

complete and submit to the AOC a Personnel Qualifications form, current license, or certification (if applicable) and a current resume for key personnel.

- E. **Notice of Intent to Modify a Program.** The Contractor may propose to modify the components of an existing service/program under this Contract. Program/service modification may include but is not limited to, programmatic and licensure items. The Contractor shall provide a written request of modification to the ASC/AOC/JJSD for written approval **prior** to implementation. Failure to obtain ASC/AOC/JJSD approval may result in the Contract Officer taking actions that the Contract Officer deems appropriate under Paragraph 11 of these AOC Standard Terms & Conditions. The modification request form is located at:

<https://www.azcourts.gov/jjtd/ContractsMonitoring>

7. Payment for Services, Allowances and Other Approved Expenses

- A. **Compensation Schedule.** The ASC/AOC/JJSD shall pay the Contractor for the services specified in this Contract at the rate set forth in the Contract Compensation Schedule, and which are authorized on SAF. The ASC/AOC/JJSD shall reimburse the Contractor for allowances and expenses:
- i. At rates that do not exceed those set forth in the Compensation Schedule.
 - ii. Which are authorized in SAF's, or administratively authorized by the Contract Officer. Payment may be denied for services rendered before receipt of a SAF and/ or if no SAF documentation exists in the client file during an ASC/AOC/JJSD contract monitoring visit. Contractor is responsible for ensuring that an SAF is received for referral of services to be performed, and for requesting corrected SAFs when appropriate.
 - iii. There will be no compensation pay for missed appointments for any contracted service.
 - iv. In the event the Contractor delivers services not on the Contract, not authorized by the probation department and/or inaccurately bills service codes and receives payment for the service, the Contractor shall not be entitled to compensation for those services and shall refund payments received per the AOC Billing Manual. The Contract Officer may take further actions the officer deems appropriate under Paragraph 11 of these AOC Standard Terms & Conditions.
 - v. Within the context of the Contract, Contractors shall not arrange alternative agreements with the referring probation department for services under contract with the AOC and may be responsible to remit payment to the ASC/AOC/JJSD for services rendered under such agreement; this includes but is not limited to authorizing services not on the Contract and inaccurately representing service codes.

- vi. The ASC/AOC/JJSD does not guarantee referrals or a minimum/maximum volume of business for any service to any provider, unless otherwise described in the AOC Special Terms & Conditions of the Contract; and
- vii. All Contractors must complete registration with the ACH for direct deposit of payments for services rendered under this contract.

B. Method of Payment.

- i. **ASC/AOC/JJSD Funds.** The funding source and the other party to this Contract is the ASC/AOC/JJSD, not the superior court or county probation department. However, the Contractor shall submit all invoices under this Contract to the referring probation department for approval.
- ii. **Form of Invoices.** The Contractor shall comply with the Invoice Billing Manual in preparing and submitting all invoices, including requests for reimbursement of allowances and expenses.

C. Late Invoices. Payment may be delayed, reduced, or denied for any late invoices as indicated in the AOC Invoice Billing Manual. The Contractor may resubmit any denied invoice with a letter from the Contractor's Authorized Representative explaining the reasons that the Contractor failed to submit the invoice in a timely manner and identifying actions it has undertaken to correct the problem.

Invoices which are repeatedly submitted more than ten (10) business days after the end of the month are subject to a 10% reduction in payment from the ASC/AOC/JJSD. Any invoice received at the ASC/AOC/JJSD that is more than forty-five (45) calendar days after the end of the month in which services are rendered will be reduced by 25%. Any invoice received at the ASC/AOC/JJSD that is more than 60 calendar days after the end of the month in which services are rendered will be reduced by 50%. Any invoice received at the ASC/AOC/JJSD that is more than 90 calendar days after the end of the month in which services are rendered will be reduced by 75% or denied payment. The Contractor's repeated failure to submit timely invoices may be grounds for terminating this Contract.

D. Charges to Client's Parents/Guardians. The Contractor shall not impose any fees or charges of any kind upon a client or the parents, guardians, or relatives of the client if the services authorized by the referring Superior Court or probation department are paid by ASC/AOC/JJSD funds.

E. Payments Collected for Services. If the Contractor collects any payment for services, allowances, or expenses from any source, including third party payors, the Contractor shall specify the amount of the collection on the invoice as described in the Invoice Billing Manual. The Contractor shall report payments collected after ASC/AOC/JJSD payment of the invoice on a credit memo and reimburse the ASC/AOC/JJSD as specified in the AOC Invoice Billing Manual. Acceptance by the contractor of any payment by anyone other than the ASC/AOC/JJSD shall be applied to the invoice for services rendered and billed by the ASC/AOC/JJSD. The

ASC/AOC/JJSD will seek recovery of monies paid to the Contractor if the third party and the ASC/AOC/JJSD have both compensated the Contractor for the authorized service, allowance, or expense.

- F. **Availability of Funds.** Payments for all obligations under this Agreement are contingent on funds for that purpose being appropriated, budgeted, and otherwise made available to the Supreme Court Administrative Office of the Courts ("Court"), and the payment provisions of this Agreement shall become effective only when funds appropriated for the purposes of this Agreement actually become available to the Court for disbursement. The Administrative Director of the Court shall be the sole judge and authority for determining the availability of funds for this contract. The Court shall not be liable for any payments for which funds are not available or any purchases or subcontracts entered into in anticipation of funding.
- G. **Title XIX/XXI Screening and Enrollment.** If it is determined that the client is actively enrolled in Arizona Health Care Cost Containment System (AHCCCS), the Contractor shall bill the AHCCCS for the services the AHCCCS has authorized to deliver. In accordance with the Contractor's policies, the Contractor shall periodically verify the clients' AHCCCS enrollment status and notify the probation department of status changes. AHCCCS funding for treatment and services must be used as the primary source of funding before utilizing AOC funding, unless otherwise approved by the AOC Contract or Budget Manager.
- H. **Third Party Liability.** The Contractor is responsible for checking if a third party is liable for the cost of services before billing the ASC/AOC/JJSD. These findings shall be documented in the client file. Upon determination that a client has third party coverage, as applicable, the Contractor shall bill the third party. The third party may include, but is not limited to, the AHCCCS, private health insurance and/or other third- party payer. Under this Contract, the third party may be responsible for covering some or all the behavioral health services authorized by the superior court.
- I. **Payments.** Payments made to a Contractor shall be in the form of a direct deposit made to an account(s) specified by the Contractor that has been registered and activated in the ACH system.
- J. **Exemption.** Requirements of Paragraph 7-G and H of these AOC Standard Terms & Conditions shall not be applicable to delinquency prevention services and competency restoration services.

8. Change Orders and Contract Amendments

- A. **Change Orders.** The Contract Officer may through a written change order make unilateral changes within the scope of the *Service Specifications* or other terms and conditions of the Contract. If the Contractor disagrees with any change made under this Subparagraph, it may seek relief under the Disputes provision of this Contract, Paragraph 20 of these AOC Standard Terms & Conditions.

- B. **Amendments.** All amendments to this Contract shall be in writing and signed by the Contract Officer and the Contractor's Authorized Representative. The Superior Court, including probation officers or juvenile Superior Court personnel, have no authority to amend the Contract, or to direct the Contractor to perform additional work not specified in this Contract or authorized through a SAF. The ASC/AOC/JJSD is under no obligation to pay the Contractor for work under the Contract that is not authorized by the Contract Officer.

9. Contractor's Authorized Representative

The Contractor's Authorized Representative shall be the sole person authorized to represent the Contractor with the ASC/AOC/JJSD on matters, and to sign documents, including amendments and invoices, relating to this Contract. He or she may designate an appropriate person to sign invoices for the Contractor if he or she identifies that person in writing, other than on an invoice, to the Contract Officer. That representative shall be someone with the legal authority to bind the Contractor to contractual agreements. The Contractor shall notify the Contract Officer in writing using the Key Personnel Notification Form no later than seven (7) business days if it replaces the Contractor's Authorized Representative during the Contract. The notice shall be signed by a person with the authority to designate the Contractor's Authorized Representative, and provide at a minimum the name, title, email, mailing address, and telephone number of the new representative.

10. Right to Enter into Other Contracts

The ASC/AOC/JJSD reserves the right to enter into other contracts for the types of services that the Contractor is providing under this Contract.

11. Remedies and Termination Rights

- A. **Convenience.** The Contract Officer may terminate this Contract in whole or in part without cause thirty (30) calendar days after mailing written notice of termination by certified mail, return receipt requested, to the Contractor.
- B. **Defective Performance.** Contractors are expected to be in compliance with all aspects of their contract including the service specifications listed on the contract, AOC Standard Terms and Conditions and the Invoice Billing Manual. Performance complaints can be submitted by stakeholders including Probation Departments, Courts, Parents, Youth, and other contractors. Complaints are submitted on a Vendor Performance Report to the AOC/JJSD Contracts and Monitoring Unit

If after review of the complaint, there is a valid vendor performance issues, the Contractor will be responsive and actively involved in resolving the complaint. The Contracts and Monitoring Unit will provide the Contractor an opportunity to correct the valid performance concerns to remedy the valid complaint through a plan of correction or other remedies as deemed necessary to bring the Contractor in to contract compliance. In the event the Contractor is unable to resolve the performance issue, additional remedies may be sought listed in Paragraph 11.E of these terms and conditions.

- C. **Voluntary Termination.** The Contractor may request, in writing, a voluntary termination of the Contract. The Contractor shall give a sixty (60) calendar day notice prior to the requested date of termination. The Contract Officer shall have the sole discretion to determine if the voluntary termination is in the best interest of the ASC/AOC/JJSD and shall provide written notice accepting termination. All provisions of paragraph 12 shall apply to voluntary terminations.
- D. **Unanticipated Circumstance.** In the event the Contractor becomes deceased, incapacitated, or ill and is not able to perform the service provisions of this Contract, the ASC/AOC/JJSD reserves the right to terminate the Contract upon notification. Whenever possible, notification of the unanticipated circumstance must be submitted in writing to the AOC within fourteen (14) business days of the determination of the occurrence.
- E. **Additional Remedies.** The ASC/AOC/JJSD is entitled under this Contract to all remedies available in law or equity. If the Contract Officer determines that the Contractor or any non-employee has failed to comply with the Contract, the Contract Officer may take any appropriate action including:
 - i. Withholding of compensation due the Contractor for services rendered.
 - ii. Suspension of the Contract in whole or in part.
 - iii. Suspension of referrals and/or removal of the clients in service.
 - iv. Recovery, through offset or otherwise, of compensation already paid, or of ASC/AOC/JJSD administrative costs.
 - v. Requiring the posting of a bond; and/or
 - vi. Terminating the Contract.

12. Obligations on Completion, Termination or Suspension

- A. **Transfer of Clients.** At the completion of the Contract, or if the Contract Officer terminates or suspends this Contract, or if the Contractor request in writing, termination of the Contract, the Contractor shall cooperate with the Contract Officer in transferring or otherwise reassigning any client to whom the Contractor is providing services. The Contract Officer shall promptly take all actions necessary to transfer or otherwise reassign any client to whom the Contractor was providing services for and must do so before or upon completion, termination, or suspension of this Contract.
- B. **Records.** Records relating to the Contract shall remain the property of the Court and Contractor shall ensure the records are retained, subject to the Contract's retention, confidentiality, and access requirements. The Contractor shall, at the Contract Officer's request, provide a copy of those records to the ASC/AOC/JJSD

or to any new provider of the services within the time specified in the request. The ASC/AOC/JJSD shall pay for the reasonable cost of copying and transferring those records.

- C. **Compensation for Services.** Where the compensation under the Contract is fee for service, the ASC/AOC/JJSD shall pay the Contractor for all authorized services performed to the date of completion, termination, or suspension. Where the compensation under the Contract is block purchase, the ASC/AOC/JJSD shall pay the Contractor an appropriate pro rate portion of the flat rate. Additionally, if it is necessary to remove and transfer clients from a facility that the Contractor operates and the ASC/AOC/JJSD fails to do so by the completion, termination, or suspension date, the ASC/AOC/JJSD shall reimburse the Contractor for all costs reasonably incurred and documented in maintaining clients at the facility, from the date of completion, termination or suspension until the clients are removed.
- D. **Subsequent Audit.** If the Contract is completed, or the Contract Officer or Contractor terminates or suspends it, the ASC/AOC/JJSD retains the right to inspect, monitor or audit the facilities and records of the Contractor and non-employees, and to disallow compensation or recover compensation if warranted.

13. Assignment

No right, liability, obligation, or duty under this Contract shall be assigned or delegated in whole or in part, without the prior written approval of the Contract Officer.

14. Retention of Records

- A. **Retention and Inspection.** The Contractor shall retain all records in locked storage, including electronic archives, as referenced in Paragraph 45 relating to this Contract for seven (7) years after the client's service termination date and shall dispose of the records in a manner that protects client confidentiality. During the retention period, the ASC/AOC/JJSD, federal or state auditors and any other persons duly authorized by the ASC/AOC/JJSD, shall have full access to and the right to inspect, copy and make use of all records. The Contractor shall maintain a written policy which incorporates the requirements set forth in these Subparagraphs.
- B. **Contract Termination.** Upon termination of the Contract, voluntary or involuntary, the Contractor shall immediately provide the Contract Officer with written notice specifying the location where the records will be stored, and the name and telephone number of the person responsible for maintaining them. The Contractor is responsible for complying with the requirements of this Paragraph and Paragraph 21 even if it closes or sells its business.

- C. **Record Transfer.** The Contractor shall ensure a plan is developed for the transfer of records. The record transfer plan will be enacted upon an unanticipated event, such as cessation of business activity by the Contractor. In such an event, the records of clients served under this Contract shall become property of the ASC/AOC/JJSD. The ASC/AOC/JJSD reserves the right to immediately retrieve records.
- D. **Electronic Information and Record Management.** The Contractor shall ensure all electronic client records/information are stored on a protected network/drive or device. All mobile devices or electronic storage media may be used for temporary storage if the data is encrypted, and the device is password protected. When electronic storage is utilized, the Contractor shall ensure devices or media contain the following features: passwords and automatic log-off. There must be security of the device or media to prevent unauthorized access, tampering, loss, or theft. There must also be current patch management functionality, firewall and virus protection software.
- E. **Psychological Testing Data.** As part of the records retained under Subparagraph A, the Contractor shall retain psychological testing raw data on all clients served under this contract including those evaluated for transfer to the adult division of the Superior Court. The data shall be readily retrievable by the psychologist when requested by a Superior Court, the ASC/AOC/JJSD, federal or state auditors and any other persons duly authorized by the ASC/AOC/JJSD to have full access to, including the right to inspect, copy and make use of all records.
- F. **Adequacy of Records.** The contractor shall maintain records in accordance with their licensing requirements and this contract that adequately and sufficiently provide evidence/support to document that services were provided as authorized by the referring probation department. If the Contractor's records are insufficient to support and document that authorized services were provided to clients, the Contractor shall reimburse the ASC/AOC/JJSD for those services and other costs not adequately supported and documented.

15. Contract Administration

- A. **General Rights.** The ASC/AOC/JJSD, under A.R.S. § 8-322 and 8-243, has the statutory authority to administer all services and manage the funds for incorrigible and delinquent youth referred to the court. The administration of services includes contract administration and contract compliance, including monitoring activities. The ASC/AOC/JJSD or any other legally authorized agency of the state or federal government may, at any time during the hours of operation with or without notice to the Contractor or to non-employees:
 - i. Visit or inspect the facilities of the Contractor, or of non-employees.
 - ii. Observe the services provided.

- iii. Interview Contractor, clients, parents, guardians, personnel, volunteers, or interns in privacy; and
 - iv. Inspect and copy records relating to the Contract, including but not limited to personnel files, client files, billing documentation, policies, and procedures.
- B. **Monitoring.** The Contract Officer, using the activities authorized in this Paragraph, may monitor the services delivered and the facilities and records maintained by the Contractor, Contractor's personnel, or non-employees this Contract. Monitoring activities may include but are not limited to, an announced and/or unannounced site visit, the examination of the personnel files of the Contractor or non-employee, client records, administrative records, facility/environmental reviews, billing/financial records, policies, procedures, phone interviews, requests for written plans of correction, and in-person meetings.
- C. **Visitation with Clients.** The Contractor shall allow the Contract Officer, the client's probation officer, or other representative of the superior court, to visit with the client at any reasonable time during the Contractor's hours of operation under this Contract. The Contract Officer, the probation officer or other representative, in their sole discretion, may direct that the visitation be outside the presence of any personnel of the Contractor. If the Contract Officer, the probation officer, or other representative so directs, the Contractor shall provide a location for the visitation which assures that the Contract Officer, probation officer or other representative may conduct it in complete privacy.
- D. **Program Evaluation.** The Contract Officer may evaluate any services that the Contractor provides and may assess the Contractor's progress to reduce recidivism and achieve the goals and measurable objectives described in the Contract. The Contractor must participate in any program evaluation processes, as determined by the ASC/AOC/JJSD. The Contract Officer shall make evaluation reports available to the Contractor upon request.
- E. **Transfer of Clients.** The Contract Officer may direct the Contractor at any time during the Contract to transfer a client to whom the Contractor is providing services. If the Contractor is required to transfer any client, it shall comply with the requirements of Paragraph 12-A and B of these AOC Standard Terms & Conditions. The Contractor shall be paid for the services provided to that client according to Paragraph 12-C of these AOC Standard Terms & Conditions.
- F. **Failure to Comply.** The failure of the Contractor, its personnel, volunteers, interns, or any non-employee to cooperate with the activities described in this Paragraph may result in the Contract Officer taking actions that the officer deems appropriate under Paragraph 11 of these AOC Standard Terms & Conditions.

16. Contract Reviews

The Contract Officer may conduct contract reviews, including interviews with current and

former personnel including subcontractors, non-employees, and current and former clients of the Contractor, regarding allegations about issues that may affect the care, safety and welfare of clients served under the Contract. The Contractor shall provide all contact information for personnel or clients upon request. The Contracts Officer may determine the necessity for a monitoring activity.

17. Fiscal, Management and Administrative Requirements

- A. **Changes in Legal Status.** The Contractor shall give the Contract Officer written notice at least sixty (60) calendar days prior to any change in its legal or financial status, such as a merger or consolidation with another entity, a change in name, bankruptcy, or any action concerning that status pending before the Arizona Corporation Commission or the Arizona Secretary of State. The Contract Officer, in the officer's sole discretion, may require the Contractor to file a new or revised Prequalification Form and/or a new application to provide services, where the Contractor's legal status has, or may change. Failure of the Contractor to provide this information may result in suspension or termination of the ASC/AOC/JJSD contract.
- B. **Notice of Intent of Acquisition or Merge.** The Contractor shall provide written notification to the ASC/AOC/JJSD of any pending acquisition or merger of his/her company within ninety (90) calendar days upon discovery. Failure of the Contractor to provide this information may invalidate AOC Qualified Vendor Status.
- C. **Bonds.** The Contract Officer may, under appropriate circumstances, require the Contractor to provide the ASC/AOC/JJSD with a performance, payment, fidelity, or other appropriate bond issued by a surety acceptable to that officer.
- D. **Additional Fiscal Requirements.** If the Contractor provides services under this Contract which are paid for in whole or in part with Federal Government funds, the Contractor shall adhere to, and document, accounting policies and procedures, including those which address cost allocation and allowable expenses, which comply with all applicable federal laws, regulations, and Office of Management and Budget circulars.

18. Indemnification Clause

- A. **Indemnification.** Contractor shall indemnify, defend, save and hold harmless the State of Arizona, its departments, agencies, boards, commissions, universities and its officers, officials, agents, and employees (hereinafter referred to as "Indemnitee") from and against any and all claims, actions, liabilities, damages, losses, or expenses (including court costs, attorneys' fees, and costs of claim processing, investigation and litigation) (hereinafter referred to as "Claims") for bodily injury or personal injury (including death), or loss or damage to tangible or intangible property caused, or alleged to be caused, in whole or in part, by the negligent or willful acts or omissions of Contractor or any of its owners, officers, directors, agents, employees, psychometrists or interns.

This indemnity includes any claim or amount arising out of or recovered under the Workers' Compensation Law or arising out of the failure of such contractor to conform to any federal, state, or local law, statute, ordinance, rule, regulation, or court decree. It is the specific intention of the parties that the Indemnatee shall, in all instances, except for Claims arising solely from the negligent or willful acts or omissions of the Indemnatee, be indemnified by Contractor from and against any and all claims.

It is agreed that Contractor will be responsible for primary loss investigation, defense, and judgment costs where this indemnification is applicable. In consideration of the award of this contract, the Contractor agrees to waive all rights of subrogation against the State of Arizona, its officers, officials, agents, and employees for losses arising from the work performed by the Contractor for the State of Arizona.

- B. Professional Service Contracts – Working with Children and/or Vulnerable Adults.** Many professional services involve working with, or caring for, children and/or vulnerable adults (physically and developmentally disabled adults or inmates that are in the care, custody, and control of the State of Arizona). This activity creates an additional risk of liability to the State of Arizona because of the severe and sensitive nature of the possible allegations of wrongdoing.

When services involve working with these groups of individuals, the insurance requirements in the contract need to be revised to include coverage for "Sexual Abuse and Molestation (SAM)". Coverage for this type of claim, or allegation, is typically excluded from general liability policies, but some insurers offer a niche product with SAM coverage in their liability policy for classes of business with this exposure, i.e., church organizations, nonprofits, hospitals, children's sports clubs, etc. Therefore, contractors whose services include working with, and/or caring for children or vulnerable adults, should have their policies specifically endorsed to include this coverage. Due to the often complex and lengthy investigation and defense associated with the claims of abuse, defense cost should not erode the policy limits. This is also known as "defense outside the limits".

19. Insurance

Contractor, intern(s) and subcontractor(s) shall procure and maintain, until all of their obligations have been discharged, including any warranty periods under this Contract, insurance against claims for injury to persons or damage to property arising from, or in connection with, the performance of the work hereunder by the Contractor, its agents, representatives, employees or subcontractors.

The insurance requirements herein are minimum requirements for this Contract and in no way limit the indemnity covenants contained in this Contract. The State of Arizona in no way warrants that the minimum limits contained herein are sufficient to protect the Contractor from liabilities that arise out of the performance of the work under this Contract by the Contractor, its agents, representatives, employees or subcontractors, and the Contractor is free to purchase additional insurance.

A. **Insurance Required.** Before commencing services under the Contract, the Contractor shall furnish the Contract Officer a certificate from the Contractor's insurer. The insurer shall be authorized to transact business in Arizona and hold a Certificate of Authority issued from the Arizona Department of Insurance. The certificate shall demonstrate insurance coverage in the minimum amounts and under the terms stated in Subparagraphs b and c. The Contract Officer shall have the right to request and receive certified copies of any or all of the applicable policies or endorsements.

B. **Coverage.** The Contractor shall maintain the coverage specified in this Subparagraph in full force and effect during the term of the Contract. The coverage specified in this Subparagraph shall not limit the liability or other obligations of the Contractor. The Contractor shall require all interns and subcontractors to maintain the same coverage specified in this Subparagraph or shall provide such coverage for interns and subcontractors. The Contract Officer reserves the right to waive or adjust insurance requirements in unique situations.

i. **Commercial General Liability – Occurrence Form**

Policy shall include bodily injury, property damage, personal injury and broad form contractual liability coverage.

General Aggregate	\$2,000,000
Products – Completed Operations Aggregate	\$1,000,000
Personal and Advertising Injury	\$1,000,000
Damage to Rented Premises	\$50,000
Each Occurrence	\$1,000,000

a. The policy shall include coverage for Sexual Abuse and Molestation (SAM). **This coverage may be sub-limited to no less than \$500,000.** The limits may be included within the General Liability limit or provided by separate endorsement with its own limits. If you are unable to obtain SAM coverage under your General Liability because the insurance market will not support it, it should be included with the Professional Liability.

b. Contractor must provide the following statement on their Certificate(s) of Insurance: **“Sexual Abuse and Molestation coverage is included” or “Sexual Abuse and Molestation coverage is not excluded.”**

c. The policy shall be endorsed, to include the following additional insured language: ***The State of Arizona, and its departments, agencies, boards, commissions, universities, officers, officials, agents, and employees as additional insureds with respect to liability arising out of the activities performed by or on behalf of the Contractor.*** Such additional insured shall be covered to the full

limits of liability purchased by the Contractor, even if those limits of liability are in excess of those required by this Contract.

- d. Policy shall contain a waiver of subrogation endorsement, as required by this written agreement, in favor of the State of Arizona, and its departments, agencies, boards, commissions, universities, officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Contractor.

ii. **Business Automobile Liability**

Bodily Injury and Property Damage for any owned, hired, and/or non-owned automobiles used in the performance of this Contract.

Combined Single Limit (CSL) \$1,000,000

- a. The policy shall be endorsed, to include the following additional insured language: ***The State of Arizona, and its departments, agencies, boards, commissions, universities, officers, officials, agents, and employees as additional insureds with respect to liability arising out of the activities performed by or on behalf of the Contractor.*** Such additional insured shall be covered to the full limits of liability purchased by the Contractor, even if those limits of liability are in excess of those required by this Contract.
- b. Policy shall contain a waiver of subrogation endorsement in favor of the State of Arizona, and its departments, agencies, boards, commissions, universities, officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Contractor.

iii. **Professional Liability (Errors and Omissions Liability)**

Each Claim \$2,000,000
Annual Aggregate \$2,000,000

- a. If SAM coverage is being provided under this policy, then Contractor must provide the following statement on their Certificate(s) of Insurance: ***“Sexual Abuse and Molestation coverage is included” or “Sexual Abuse and Molestation coverage is not excluded.” This coverage may be sub-limited to no less than \$500,000.***
- b. If the professional liability insurance required by this Contract is written on a claims-made basis, Contractor warrants that any retroactive date under the policy shall precede the effective date of this Contract; and that either continuous coverage will be maintained, or an extended discovery period will be exercised for a

period of two (2) years beginning at the time work under this Contract is completed.

- c. Policy shall cover professional misconduct or wrongful acts for those positions defined in the Scope of Work of this contract.

iv. **Workers' Compensation and Employers' Liability**

Coverage is required if applicant has paid employees that provide services on the contract. This requirement shall not apply to: Separately, EACH contractor or subcontractor exempt under A.R.S. § 23-901, AND when such contractor or subcontractor executes the appropriate waiver (Sole Proprietor/Independent Contractor) form. Workers' Compensation Statutory

Employers' Liability

Each Accident	\$1,000,000
Disease – Each Employee	\$1,000,000
Disease – Policy Limit	\$1,000,000

- a. Policy shall contain a waiver of subrogation endorsement, as required by this written agreement, in favor of the State of Arizona, and its departments, agencies, boards, commissions, universities, officers, officials, agents, and employees for losses arising from work performed by or on behalf of the Contractor.
- b. This requirement shall not apply to each Contractor or subcontractor that is exempt under A.R.S. § 23-901, and when such Contractor or subcontractor executes the appropriate waiver form (Sole Proprietor or Independent Contractor).

C. **Additional Insurance Requirements:** The policies shall include, or be endorsed to include, as required by this written agreement, the following provisions:

- i. The certificate of insurance for Commercial General Liability must be endorsed to include the following additional insured language: ***“The State of Arizona, Arizona Supreme Court and their agencies, boards, commissions, officials, agents, and employees shall be named as additional insureds with respect to liability arising out of the activities performed by or on behalf of the Contractor.”***
- ii. The certificate of insurance for Automobile Liability must be endorsed to include the following additional insured language: ***“The State of Arizona, Arizona Supreme Court and their agencies, boards, commissions, officials, agents, and employees shall be named as additional insureds with respect to liability arising out of the activities performed by or on behalf of the Contractor, involving automobiles owned, leased, hired or borrowed by the Contractor.”***

- iii. The Contractor's policies, as applicable, shall stipulate that the insurance afforded the Contractor shall be primary and that any insurance carried by the Department, its agents, officials, employees or the State of Arizona shall be excess and not contributory insurance, as provided by A.R.S. § 41-621 (E).
 - iv. Insurance provided by the Contractor shall not limit the Contractor's liability assumed under the indemnification provisions of this Contract.
- D. **Notice of Cancellation:** Applicable to all insurance policies required within the Insurance Requirements of this Contract, Contractor's insurance shall not be permitted to expire, be suspended, be canceled, or be materially changed for any reason without thirty (30) days prior written notice to the State of Arizona. Within two (2) business days of receipt, Contractor must provide notice to the State of Arizona if they receive notice of a policy that has been or will be suspended, canceled, materially changed for any reason, has expired, or will be expiring. Such notice shall be sent directly to the AOC and shall be mailed, emailed, hand delivered or sent by facsimile transmission.
- E. **Acceptability of Insurers:** Contractor's insurance shall be placed with companies licensed in the State of Arizona or hold approved non-admitted status on the Arizona Department of Insurance List of Qualified Unauthorized Insurers. Insurers shall have an "A.M. Best" rating of not less than A- VII. The State of Arizona in no way warrants that the above-required minimum insurer rating is sufficient to protect the Contractor from potential insurer insolvency.
- F. **Verification of Coverage:** Contractor shall furnish the State of Arizona with certificates of insurance (valid ACORD form or equivalent approved by the State of Arizona) evidencing that Contractor has the insurance as required by this Contract. An authorized representative of the insurer shall sign the certificates.

All such certificates of insurance and policy endorsements must be received by the State before work commences. The State's receipt of any certificates of insurance or policy endorsements that do not comply with this written agreement shall not waive or otherwise affect the requirements of this agreement.

Each insurance policy required by this Contract must be in effect at, or prior to, commencement of work under this Contract. Failure to maintain the insurance policies as required by this Contract, or to provide evidence of renewal, is a material breach of contract.

All certificates required by this Contract shall be sent directly to the Department. The State of Arizona project/contract number and project description shall be noted on the certificate of insurance. The State of Arizona reserves the right to require complete copies of all insurance policies required by this Contract at any time.

- G. **Subcontractors and Interns:** Contractor's certificate(s) shall include all subcontractors and/or interns as insureds under its policies or Contractor shall be responsible for ensuring and/or verifying that all subcontractors and/or interns have valid and collectable insurance as evidenced by the certificates of insurance and endorsements for each subcontractor. All coverages for subcontractors and/or interns shall be subject to the minimum Insurance Requirements identified above. The AOC reserves the right to require, at any time throughout the life of the Contract, proof from the Contractor that its subcontractors and/or interns have the required coverage.
- H. **Approval and Modifications:** The AOC, in consultation with State Risk, reserves the right to review or make modifications to the insurance limits, required coverages, or endorsements throughout the life of this contract, as deemed necessary. Such action will not require a formal Contract amendment but may be made by administrative action.
- I. **Exceptions:** In the event the Contractor, subcontractor(s) and/or intern(s) is/are a public entity, then the Insurance Requirements shall not apply. Such public entity shall provide a certificate of self-insurance. If the Contractor, subcontractor(s) and/or intern(s) is/are insured by a State of Arizona agency, board, commission, or university, none of the above shall apply.
- J. **Sole Proprietor and Independent Contractor Waiver:** Applies to Independent Practitioner applicants only! Applicants must complete a written waiver under the compulsory Workers' Compensation laws of the State of Arizona, A.R.S. 23-901 (et, seq.) and specifically, A.R.S. 23-961(O), that provides that a Sole Proprietor or Independent Contractor may waive his/her rights to Workers' Compensation coverage and benefits.

Insurance	Minimum Amounts		Additional Insured Required	Waiver of Subrogation	Sexual Abuse/ Molestation Required (\$500,000)
Commercial General Liability	Each Occurrence	\$1,000,000	X	X	X (Required by endorsement in either CGL or PROF)
	Products Personal and Advertising Injury	\$1,000,000			
	Damage to Rented Premises	\$50,000			
	Aggregate	\$2,000,000			

Insurance	Minimum Amounts		Additional Insured Required	Waiver of Subrogation	Sexual Abuse/ Molestation Required (\$500,000)
Business Automobile Liability	Combined Single Limit	\$1,000,000	X	X	N/A
Worker's Compensation and Employer's Liability	Each Accident Disease – Each Employee Disease - Policy Limit	\$1,000,000 \$1,000,000 \$1,000,000			
Professional Liability	Each Claim Annual Limit	\$2,000,000 \$2,000,000			X (Required by endorsement in either CGL or PROF)

20. Disputes

Should any dispute arise between the ASC/AOC/JJSD and the Contractor concerning this Contract, the Contractor shall follow procedures established in the Supreme Court Administrative Office of the Courts' Policies and Procedures Manual No. 7.04 (C) and (D). If, after exhausting the administrative remedies set forth in those provisions, the dispute is subject to the mandatory arbitration provisions of A.R.S. § 12-133, the ASC/AOC/JJSD and the Contractor shall submit the matter to binding arbitration in compliance with A.R.S. § 12-1518.

21. Confidentiality of Client Information

- A. **Compliance.** The Contractor, its personnel, interns, volunteers, and psychometrists, unless otherwise exempt, shall adhere to all federal, state, and local laws regarding confidentiality including, but not limited to the Health Insurance Portability and Accountability Act (HIPAA) Pub. L. No. 1-4-191 (1996), 42 CFR Part 2, if applicable, and regulations promulgated there under.
- B. **Prohibition.** The Contractor, its personnel, interns, psychometrists or volunteers shall not divulge, or release information received from the Superior Court/Juvenile Probation Department about any client to anyone without court order, except to the ASC/AOC/JJSD, the referring Superior Court/Juvenile Probation Department, or anyone authorized by the Contract Officer to receive it. Violation of this Paragraph or applicable law shall constitute grounds to terminate this Contract. If court ordered, information from the Contractor will be sent via mail, secured email or fax.
- C. **Release Authorization.** Release of any information pursuant to an authorization signed by client or parent/guardian is prohibited under this contract unless there is a court order requiring release.

D. **Record Dissemination.** Except for the ASC/AOC/JJSD and the referring Superior Court/Juvenile Probation Department or anyone authorized by the Contract Officer, the Contractor shall refer persons requesting records of written documentation containing client information relating to this Contract to the probation department. The Contractor shall maintain all court orders requiring release authorization and release authorization forms to track the dissemination of information in each client's record, except for the release of records to the ASC/AOC/JJSD, or the probation department. The process for dissemination of records is listed below and varies by record type.

- i. **Court records.** All information and records obtained during evaluation, examination, or treatment of juveniles who have been referred to a treatment program funded by the juvenile probation fund (pursuant to A.R.S. § 8-322) or the family counseling fund (A.R.S. § 8-261, et seq.) are confidential and shall not be released unless authorized by rule or court order. These records include, but are not limited to, clinical records, medical reports, laboratory statements and reports, or any report relating to diagnostic findings and treatment of juveniles, or any information by which the juvenile or his family may be identified, wherever such records are maintained by the court. See Rule 123 (d) (1) (C), and Paragraph 46 of these AOC Standard Terms & Conditions.

Court records are also defined as records originating from or authorized/ordered by the ASC/AOC/JJSD, and/or the referring juvenile or adult Superior Court or their probation departments.

All such court records are only authorized for release to a third party through court order. Contractor shall refer persons requesting client court records to the referring Superior Court to process court records dissemination.

- ii. **Social File.** The social file shall be maintained by the probation department and may consist of all social records, including diagnostic evaluations, psychiatric and psychological reports, treatment records, medical reports, social studies, Department of Child Safety records, police reports, disposition reports, detention records, and records and reports or work product of the probation department. The social file of the juvenile shall be confidential and withheld from public inspection except upon order of the court. See Rule 19 (A)(2).
- iii. **Third party records.** Are defined as records obtained by the Contractor from a third-party through a release authorization and shall not be released by the Contractor. Persons requesting third-party records shall be referred to the originator of the records.

E. **Request for Records.** The Contractor shall request record(s) from a third party with a release authorization as defined in the Health Insurance Portability and Accountability Act (HIPAA) Pub. L. No. 1-4-191 (1996) and 42 CFR Part 2, if applicable, and regulations promulgated there under.

- F. **Procedures and Controls.** The Contractor shall have written policies and procedures, and maintain controls, acceptable to the Contract Officer which comply with Paragraphs 14 and 21 of these AOC Standard Terms & Conditions, rules, policies, and any applicable statutes. The Contractor shall conduct and document an annual review of all written policies and changes incorporated therein as a result of responses to monitoring reports, quality assurance checks and/or performance improvement plans. At a minimum, they shall address the compilation, locked storage, dissemination, retention and disposal of client records information, and Incident Reports. Except as authorized by the Contract, the policies, procedures, and controls shall assure that no information contained in the Contractor's records or obtained from designated authorities or others, is used or disclosed by, the Contractor's agents, officers, personnel, interns, psychometrists or volunteers.
- G. **Research Data.** Notwithstanding any other provision of this Paragraph, the Contractor shall not provide to anyone other than the ASC/AOC/JJSD any information, including information about clients in whatever form, for research purposes without the prior written approval of the Contract Officer. The Contractor shall refer any requests for such information to the Contract Officer and such requests shall be in writing. Approval shall be within the discretion of the Contract Officer.
- H. **Subpoenas.** If the Contractor receives a subpoena requesting records relating to this Contract, the Contractor, before complying with the subpoena, shall immediately notify the Contract Officer, and supply that officer with a copy of the subpoena.

22. Non-Discrimination in Service Delivery

The Contractor shall not deny services to or otherwise discriminate in the delivery of services against any client on the basis of race, color, religion, gender, national origin, age, disability, or sexual orientation. For purposes of this Paragraph, gender discrimination includes sexual harassment. The Contractor must address the Limited English Proficiency needs of client(s) and their families' receiving services. (See Appendix A).

23. Non-Discrimination in Employment

The Contractor shall not discriminate against any employee or applicant for employment because of race, color, religion, gender, national origin, age, disability, or sexual orientation. The Contractor shall comply with all applicable federal, state, and local laws, regulations and rules, and executive and administrative orders regarding employment discrimination. For purposes of this Paragraph, gender discrimination includes sexual harassment.

24. Cancellation Due to Conflict of Interest

Pursuant to A.R.S. § 38-511, the ASC/AOC/JJSD may cancel a contract if any person significantly involved in initiating, negotiating, securing, drafting, or creating a contract on the ASC/AOC/JJSD's behalf is, during the contract duration including extensions:

- A. An employee or agent of any party to the Contract in any capacity; or
- B. A consultant to any other party to the Contract concerning the contract's subject matter.

The cancellation shall be effective when the Contractor receives written notice from the Contract Officer unless the notice specifies a later date.

25. Effect of Contradictory Provisions

To the extent that Attachment A, the *Service Specifications*, or any amendments or contract change orders to the Contract conflict with these AOC Standard Terms & Conditions, the Attachment A, the *Service Specifications* or any Amendments or Contract Change Orders shall control the interpretation of the Contract.

26. General Provisions

- A. **Applicable Law.** The laws and rules of the State shall govern the rights of the parties, the performance of this Contract and any disputes under it. Any action relating to this Contract shall be brought in an Arizona Supreme Court. Any changes in the applicable laws and rules during the term of this Contract shall apply without amendment of this Contract.
- B. **Unenforceability of Provisions.** If any provision of this Contract is held invalid or unenforceable, the remaining provisions shall continue to be valid and enforceable to the full extent permitted by law.
- C. **Insurance.** The Contractor shall comply with all laws regarding unemployment insurance, disability insurance, and workers' compensation.
- D. **Independent Contractor Status.** The Contractor is an independent contractor in the performance of work and the provision of services under this Contract, and is not to be considered an officer, employee, or agent of the State, or of the ASC/AOC/JJSD.
- E. **Non-waiver.** The Contract Officer's acceptance of performance which does not strictly comply with a requirement of this Contract shall not constitute a waiver of the right to enforce strict compliance of the requirement in the future.
- F. **Certification against Contingent Fees.** The Contractor certifies that no individual or agent has been employed or retained to solicit or secure this Contract for a

commission, percentage, brokerage, or contingent fee, except a bona fide employee maintained by Contractor to secure business.

G. Compliance with the Arizona Legal Workers Act, A.R.S. §41-4401.

- i After September 30, 2008, a government entity shall not award a contract to any contractor or subcontractor that fails to comply with section 23-214, subsection A. Every government entity shall require that every government entity contract include all of the following provisions:
 - a. That each contractor and subcontractor warrant their compliance with all federal immigration laws and regulations that relate to their employees and their compliance with section 23-214, subsection A.
 - b. That a breach of a warranty under paragraph 1 shall be deemed a material breach of the contract that is subject to penalties up to and including termination of the contract.
 - c. That the government entity retains the legal right to inspect the papers of any contractor or subcontractor employee who works on the contract to ensure that the contractor or subcontractor is complying with the warranty under paragraph 1.

27. Fingerprinting, Criminal History Affidavits, and Central Registry Background Checks

Fingerprinting and AOC Criminal History Affidavit Requirements.

Contractor/Independent Practitioner must have a valid fingerprint clearance card upon the date of signing this contract. The AOC must be identified on the fingerprint card application as an employer in addition to the Contractor. Contractor and Contractor's personnel, which includes employees, interns, psychometrists, or volunteers who provide or may provide direct services to clients under this contract shall, prior to performing services under this contract, have and maintain a valid fingerprint clearance card issued; and

- A. Be fingerprinted as required by this Subparagraph and A.R.S. § 8-322. A contract entered into between the Arizona Supreme Court or the County Attorney and any contract provider who provide services pursuant to section A.R.S. § 8-321 shall adhere to the requirements of this Subparagraph. The Contractor shall ensure **within seven (7) working days of employment**, as a condition of employment, personnel who are employed by any contract provider, whether paid or not, and who are required or allowed to provide services directly to clients shall have and maintain a valid fingerprint clearance card issued pursuant to Title 41, Chapter 12, Article 3 apply for a fingerprint clearance card; and
- B. Pursuant to A.R.S. § 8-322, the Contractor shall assume the cost of fingerprint checks but may charge these costs to its fingerprinted personnel.

- C. Pursuant to A.R.S § 8-322, the Contractor shall notify the Arizona Department of Public Safety (DPS) if the Contractor receives credible evidence that a person who possesses a valid fingerprint clearance card either is arrested for or charged with an offense listed in A.R.S. § 41-1758.03, subsection B. The Contractor must notify the ASC/AOC/JJSD in writing within five business days of becoming aware of arrest or charges. Notification must include a description of the personnel action taken by the Contractor.
- D. Pursuant to A.R.S. § 8-322, volunteers who provide services to clients under the direct visual supervision of the Contractor's employees are exempt from the fingerprinting requirements but shall comply with criminal history affidavit requirements. Under this contract, Contractor personnel responsible for direct visual supervision of volunteers must possess a valid DPS fingerprint clearance card and shall not, under any circumstance, allow a volunteer unsupervised contact with a juvenile.
- E. Complete a certified criminal offense history on a notarized AOC *Criminal History Affidavit* form within seven (7) working days of employment and before providing services pursuant to:
 - i. Per A.R.S. § 8-322, any personnel who are employed by any contracted provider, whether paid or not, and who are required or allowed to provide services directly to juveniles shall certify on forms provided by the contracting agency and notarized whether they are awaiting trial on or have ever been convicted of any of the criminal offenses listed in section ARS 41-1758.03, subsections B and C in this state or similar offenses in another state or jurisdiction.
 - ii. Per A.R.S. § 8-322, any personnel who are employed by any contracted provider, whether paid or not, and who are required or allowed to provide services directly to juveniles shall certify on forms provided by the contracting agency and notarized whether they have ever committed any act of sexual abuse of a child, including sexual exploitation and commercial sexual exploitation, or any act of child abuse.
- F. All Contractors and their personnel or non-employees, interns, and volunteers shall report any requirement to register as a sex offender per A.R.S. § 13-3821.
- G. **If personnel have a fingerprint clearance card the following must occur:**
 - i. Prior to being allowed to perform services or any contact with the juveniles under this contract, the Contractor shall obtain personnel's fingerprint clearance card and contact the DPS to verify the validity of the fingerprint clearance card. This verification process must be documented in the personnel file and a copy of the fingerprint clearance card must be maintained in the personnel file.
 - ii. Prior to being allowed to perform services under this contract, all personnel

must complete an AOC *Criminal History Affidavit* form, which must be signed and notarized. The affidavit can be obtained from the AOC via the JJSD website and must be maintained in the personnel file. The Contractor must review the executed affidavit and if responses on the completed affidavit indicate fingerprint clearance likely will be denied then the Contractor must take action to ensure that the person does not provide services directly to juveniles pending issuance of fingerprint clearance.

H. If personnel do not have a fingerprint clearance card the following must occur:

- i. Prior to being allowed to perform services or any contract with juveniles under this contract personnel must complete an AOC *Criminal History Affidavit* form, which must be signed and notarized. The affidavit can be accessed on the JJSD website and must be maintained in the personnel file. The Contractor must review the executed affidavit and if responses on the completed affidavit indicate fingerprint clearance likely will be denied then the Contractor must take action to ensure that the person does not provide services directly to juveniles pending issuance of fingerprint clearance.
- ii. Within seven (7) working days of employment, personnel must complete **AND** submit a fingerprint clearance application to DPS. The AOC must be identified on the fingerprint card application as an employer in addition to the Contractor. A copy of the application or application number, , including the fingerprint ink card (or copy of electronic submission of fingerprint card) must be maintained in the personnel file. Once the personnel receive the fingerprint clearance card, a copy of the card must be maintained in the personnel file.
- iii. The Contractor shall contact DPS to check on the status of pending fingerprint clearance card applications as outlined in subsection a of this paragraph. All status checks must be documented in the personnel file.

I. Status Checks and AOC Notification: The Contractor must check the status of the application with DPS for a fingerprint clearance card at 30 days after submission and every 7 days thereafter until the employee or intern presents either a valid fingerprint clearance card, a denial from DPS, or is advised by DPS that the application has been completed. If the information from DPS indicates the application has been completed, the employee must immediately present a fingerprint clearance card or be suspended from performing services under this contract until the clearance card is presented.

If the employee or intern has been denied a fingerprint clearance card but is eligible to apply for a good cause exception, the employer may proceed according to A.R.S. § 8-322 unless advised differently by the Board of Fingerprinting. The Contractor must document status checks in files for all persons providing services under contract. The Contractor must provide **written** notification and documentation to the ASC/AOC/JJSD when personnel, non-employees, volunteers, interns, and temporary personnel who do or may provide services to juveniles have been denied

fingerprint clearance. Notification must include a description of the personnel action taken by the Contractor.

If the status of the fingerprint clearance card reveals that it is being denied, the applicant must cease providing any services to the client immediately.

J. Renewals:

- i. The Contractor shall have in place a process to monitor the Contractor's own and any personnel fingerprint renewals to assist staff to continually meet the AOC Fingerprint and Criminal History Affidavit requirements.
- ii. If a lapse occurs and the Contractor, personnel, or interns do not have a valid fingerprint card personnel will not be allowed to provide services until a valid fingerprint card is obtained and renewal is documented by the Contractor. NOTE: Fingerprint clearance may take up to six months for renewal.
- iii. A new AOC *Criminal History Affidavit* must be completed, signed, and notarized during *each* fingerprint clearance card renewal process. The original, executed affidavit must be retained in the Contractor's own and the appropriate personnel file.

K. Record Keeping. The contractor shall maintain a copy of the record of fingerprinting and an original of the notarized AOC *Criminal History Affidavit* form in a file described in Paragraphs 43 and 44 of these AOC Standard Terms & Conditions.

- i. The AOC *Criminal History Affidavit* can be obtained via the JJSD website.
- ii. The Contractor shall make the file available for inspection on request.
- iii. The original fingerprint clearance card is the personal property of the individual whose name appears on the card.

L. Termination. The Contract may be terminated immediately pursuant to:

- i. A.R.S. § 8-322 The contract may be terminated immediately if a person certifies pursuant to A.R.S. § 8-322 or 8-322 that the person is awaiting trial or has been convicted of any of the offenses listed in A.R.S. § 8-322 in this state or of acts committed in another state that would be offenses in this state or if the person does not possess or is denied issuance of a valid fingerprint clearance card.
- ii. A.R.S. § 8-322 The contractor may avoid cancellation or termination of the contract under A.R.S. § 8-322 if a person who does not possess or has been denied issuance of a valid fingerprint clearance card or who certifies pursuant to A.R.S. § 8-322 that the person has been convicted of or is

awaiting trial on any of the offenses pursuant to A.R.S. § 41-1758.03, subsection B and is immediately prohibited from employment or services with the licensee or contract provider in any capacity requiring or allowing contact with juveniles.

- iii. A.R.S. § 8-322, A contractor may avoid cancellation or termination of their contract under subsection I if a person who does not possess or has been denied issuance of a valid fingerprint clearance card or who certifies that the person has been convicted of or is awaiting trial on any of the offenses pursuant to section 41-1758.03, Subsection C is immediately prohibited from employment or service with the contract provider in any capacity requiring or allowing the person to provide direct services to juveniles unless the person is granted a good cause exception pursuant to section 41-619.55.

- M. **Certification.** By signing the contract and the Annual Contract Compliance (ACC) document, the Contractor certifies that the Contractor and the Contractor's personnel, volunteers, and interns meet the requirements of this Paragraph as of the date of contract signing or annually submitted ACC's.
- N. **Failure to comply.** If the Contractor, any of the Contractor's personnel, volunteers, or interns fails to disclose or falsifies information to be disclosed in this Paragraph, or otherwise fails to comply with the requirements of this Paragraph, the Contract Officer shall direct the Contractor to take action immediately to comply with this Paragraph and any other actions that are appropriate under the circumstances. If the Contractor fails to take all appropriate actions as directed, the Contract Officer shall terminate the contract.

SECTION III - CLIENT RIGHTS

28. Client Rights

- A. **Posting and Documentation.** The Contractor shall post a list of client rights in a conspicuous area accessible to all clients pursuant to A.R.S. § 36-504-(A) in both English and Spanish. The Contractor shall document the client's receipt of his/her client rights in the client file. At a minimum, the Contractor shall have a written acknowledgement signed by the client that:
- i. Confirms receipt of a copy of the Client Rights by the client.
 - ii. Indicates that a verbal explanation was provided by the Contractor; and
 - iii. Indicates the client's understanding of the Client Rights.
- B. **Rights.** At the time of admission to service, a client and, if applicable, the client's parent, guardian, custodian, designated representative, or agent shall be provided with a written list and a verbal explanation of the following rights:
- i. To be treated with dignity, respect, and consideration.
 - ii. Not to be discriminated against based on race, national origin, religion, gender, sexual orientation, age, disability, marital status, diagnosis, or source of payment.
 - iii. To be informed of and consent to the proposed treatment/services including the intended outcome, the nature of the proposed treatment/services, any procedures involved in the proposed treatment/services, risk or side effects of the proposed treatment/services and any alternatives to the proposed treatment/services.
 - iv. To receive treatment that:
 - a. Supports and respects the client's individuality, choices, strengths, and abilities.
 - b. Supports the client's personal liberty and only restricts the client's personal liberty according to a court order or by the client's consent.
 - c. Is provided in the least restrictive environment that meets the client's treatment needs.
 - d. Incorporates the family members, guardian, and/or other support persons, as appropriate.

- v. Not to be prevented or impeded from exercising the client's civil rights unless the client has been adjudicated incompetent or a court of competent jurisdiction has found that the client is unable to exercise a specific right or category of rights.
- vi. To submit grievances to agency staff members and complaints to outside entities and other individuals without constraint or retaliation.
- vii. To have grievances considered by a contractor in a fair, timely and impartial manner.
- viii. To seek, speak to, and be assisted by legal counsel of the client's choice at the client's expense.
- ix. To receive assistance from a family member, designated representative, or other individual in understanding, protecting, or exercising the client's rights.
- x. To have the client's information and records be confidential and released only as permitted by state or federal law, court order or as authorized in writing by the client's legal guardian.
- xi. To privacy in treatment, including the right not to be fingerprinted, photographed, or recorded without consent except:
 - a. For photographing for identification and administrative purposes as provided by A.R.S. Title 36-507 (2).
 - b. For video recordings used for security purposes that are maintained only on a temporary basis.
 - c. For any other event or purpose, written consent by parent/guardian must be obtained immediately prior to the event and upon full disclosure of the intended use of the image. Use of an image(s) for promotion, marketing and financial gain is strictly prohibited.
- xii. To review, upon written request by the client's legal guardian, the client's record during normal agency business hours or at a time agreed upon between the client's legal guardian and the contractor.
- xiii. To be provided with a verbal explanation of the proposed treatment/services, including the intended outcome, any procedures involved in the proposed treatment/services, potential risks, or side effects, and other alternatives to the proposed treatment/services.
- xiv. To be free from abuse, neglect, exploitation, coercion, and manipulation.

- xv. To have the client's parent, guardian, custodian, or agent participate in treatment decisions and in the development and periodic review and revision or the client's written treatment/service plan.
- xvi. To participate or refuse to participate in religious activities; and
- xvii. To refuse to acknowledge gratitude to the contractor through written statements, other media, or speaking engagements at public gatherings.

C. **Telephone Numbers.** The Contractor shall post, in a waiting or public access area and at the telephone available for client use, the local telephone number or hotline number of the Arizona Department of Child Safety (DCS) and local emergency numbers.

29. Privacy

Photographs. The Contractor shall not use photographs of a client without a dated and signed written consent form from the client, the client's parent or guardian and the probation officer. The Contractor shall state on the form the specific reasons for using the photograph and the manner in which the Contractor intends to use it. The Contractor shall place the executed form in the client's record. Use of an image(s) for promotion, marketing and financial gain is strictly prohibited.

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SECTION IV - GENERAL CONTRACTOR REQUIREMENTS

31. General Requirements

- A. **Contractor Orientation.** Contractors are required to attend and complete a Contractor Orientation as directed by the Contract Officer. The orientation will be provided by the AOC. Failure to complete the orientation shall be considered non-compliance and subject to Paragraph 11 “Remedies and Termination Rights” of these AOC Standard Terms & Conditions.
- B. **Qualified Staff.** The Contractor ensures he/she meets the acuity of the client to provide the quantity and type of services set forth in the Contractor’s Application. The Contractor’s, psychometrist(s) and intern(s) qualifications shall meet the requirements of this Contract and be commensurate with the level of care required by clients and the client admission and discharge criteria of the Contractor.
- C. **CPR and First Aid.** There shall be a minimum of one (1) person with current certification in first aid training and one (1) person with current cardiopulmonary resuscitation certification from a program approved by the American Heart Association, the American Red Cross, the Licensing Office of the Arizona Department of Health Services, or the Office of Licensing and Regulation for the Arizona Department of Child Safety on the premises at all times when the Contractor is open and clients are present. One person may meet both certification requirements. This requirement does not apply to staff providing in-home services, mentoring services outside of a facility or big brother/big sister programs.
- D. **Operating Policy.** The Contractor shall have written policies that implement the AOC Standard Terms & Conditions of the Contract; including, but not limited to, incident reporting, participation by probation officers in treatment/service planning, case staffing and discharge planning, client file documentation and storage and dissemination of client records.
 - i. **Annual Policy Review.** The Contractor shall conduct and document an annual review of all written policies. Changes to policies should include changes in practice, responses to monitoring reports, quality assurance checks and/or performance improvement plans.
 - ii. **Terms and Conditions of Juvenile Probation.** The Contractor shall at all times be aware of and informed about the juvenile’s terms and conditions of probation, in order to assist, support, encourage compliance, and behavioral changes.
- E. **Telemedicine Guidelines.**
 - i. Any provider of Tele-Medicine Health services must be licensed and insured within in the state of Arizona and must abide by **A.R.S. § 32, Chapter 19.1 and A.R.S. § 36-3601, 3602, and 3603.**

- ii. AOC-contracted service providers licensed by the **Arizona Department of Health Services** shall abide by the **ADHS Policy & Procedures Manual, Section 1, Chapter 400, Policy 410, Use of Telemedicine.**
- iii. AOC-contracted service providers licensed by the **Arizona Board of Medical Examiners**, the **Arizona Board of Psychologist Examiners**, or the **Arizona Board of Behavioral Health Examiners**, shall abide by their respective Board Rules for the practice of Tele-Medicine (or applicable term used by their respective Board).
- iv. AOC-contracted service providers who are also AHCCCS-contracted shall abide by the **AHCCCS Medical Policy Manual, Section 320-I Tele-Health.**
- v. In addition, any AOC-contracted service providers wishing to provide clinical assessment, consultation or counseling, psychiatric consultation, or medication monitoring, and/or competency restoration services via Tele-Medicine shall comply with the following **AOC-specific guidelines:**
 - a. **AOC Contract:** The provision of contracted services via Tele-medicine must be approved by the AOC as a term on the AOC Contract. (See submission guidelines below)
 - b. **Security & Privacy:** Tele-medicine services must be provided by the client / family logging on to a secure portal, either at a court / probation-provided HIPAA-compliant site or through the client's home computer or Smart-phone. If the service is conducted at a court-provided site, then the following conditions shall be in place:
 - No person, other than those agreed to by the person receiving services will observe or monitor the service being provided.
 - The video-conferencing room door must remain closed at all times.
 - A sign must be posted on the door stating that a clinical session is in progress.
 - Safeguards must be provided to ensure the privacy of the session, e.g., white noise machine.
 - c. **Reimbursement:** Tele-medicine sessions are reimbursable at the same rate as in county in-office sessions denoted on the AOC Contract for the same service regardless of client residing in or out of county. Tele-medicine will only be provided when identified as a tele-medicine service on the SAF as determined by the referring probation department.
 - d. **Progress notes:** In addition to requirements in the AOC Standard Terms & Conditions, Paragraph 45 for Independent Practitioners (IP) or Paragraph 50 for Agencies (FP), progress notes must include

documentation of tele-medicine as the modality of the session and must document the physical location of the client during the session. The Progress Notes must also include any issues that came up due to the nature of the delivery of the service, e.g., the client or provider had difficulty logging on causing session to start late, problems with connectivity, loss of service during session, delay in transmission, interruptions, or loss of visual at any point during the session, the necessity of crisis interventions, etc. Notation must also be made as to whether the use of this modality posed any barriers for the client, and how those were addressed.

- e. **Client identification:** Tele-medicine services must include direct real-time, ongoing visual interaction with the client or family, and document the client's identification in the progress notes.
- f. **Crisis Management:** The service provider must be familiar with crisis services or hotlines in the area where the client resides, in the event that the client is in crisis and needs immediate in-person assistance. Plans for crisis management must be discussed with the client and family prior to the initiation of services. Written documentation of crisis management plans, including local contact information and locations, must be retained in the client's record and a copy must be provided to the client and family.
- g. **Confidentiality:** All provisions of AOC Standard Terms & Conditions, Paragraph 21 (IP & FP), Confidentiality applies, *in addition*;
 - The provider must explain the inherent confidentiality risks of electronic communication, including telemedicine services; the importance of not including other individuals within the session unless approved by the provider (e.g., family sessions may be planned, but the client's friends should not be present during sessions; family members should not be present unless a family session is planned).
- h. **Informed Consent.** Prior to delivery of any tele-medicine service, informed consent must be provided in accordance with AOC Standard Terms & Conditions, Paragraph 45 for Independent Practitioners (IP) or Paragraph 50 for Agencies (FP). The Informed Consent document must include a description of the limitations and risks associated with tele-medicine, including but not limited to:
 - Inherent confidentiality risks of electronic communications.
 - The potential for technology failure and outline of emergency procedures for when such failure may occur.
 - Emergency procedures when the service provider is unavailable.
 - Detailed Emergency procedures to be followed when the client is in immediate crisis (see above).

- Client and Parent/guardian signature shall include verification of their understanding and that this information was conveyed verbally and in writing.

32. Intern, Psychometrist and Volunteer Policies

Contractors using interns, psychometrists or volunteers to provide direct services to clients shall have written policies governing the provision of those services that set forth qualification requirements for, and service descriptions and responsibilities for each position. The policies shall also address screening, training, orientation, and supervision of interns, psychometrists and volunteers. Intern, psychometrist and volunteer supervision shall be provided as outlined in Paragraph 36 of this document. The policies and procedures shall mandate that information about each intern, psychometrist or volunteer be retained in the Contractor's files according to Paragraph 39 of these AOC Standard Terms & Conditions. NOTE: A contractor must submit the appropriate written agreement for interns to the AOC for approval prior to the provision of services by interns or psychometrists. These agreements may be obtained by contacting the AOC Contracts Unit.

- A. **Internship, Psychometrist and Volunteer Policies.** The Contractor shall establish written policies describing the required minimum qualifications of the Contractor and any intern, psychometrist or volunteer. The qualification requirements shall relate to the AOC *Service Specifications* categories offered by the Contractor under this Contract and shall be consistent with the minimum requirements set forth by state licensing authorities and/or relate to the Contract. Internship, psychometry, and volunteer policies shall include standards governing the ethical conduct of interns, psychometrists and volunteers and include confidentiality of information in compliance with Paragraph 21 of these AOC Standard Terms & Conditions.
- B. **Professional Conduct.** The Contractor shall have written standards and disciplinary policies describing the expected ethical behavior of interns, psychometrists and volunteers including standards and policies regarding social media contact/communication between current and/or former juvenile clients and the Contractor and Contractor's interns, psychometrists or volunteers who provide or may provide direct or indirect services to court-referred juveniles.

SECTION V - MINIMUM PERSONNEL QUALIFICATIONS TO PROVIDE SERVICES TO CLIENTS

33. Assessment, Treatment/Service Planning, Counseling, Psychotherapy and Evaluation & Diagnosis Services

The AOC acknowledges standards set forth by the Arizona Board of Behavioral Health Examiners (AzBBHE) through Arizona Administrative Code R4-6-403 through R4-6-707 that allow for independent and direct practice experience by behavioral health professionals in relation to psychotherapy for the purpose of assessment, diagnosis and treatment of individuals, families, and groups.

Assessment, treatment planning, group, family or individual counseling, psychotherapy and evaluation and diagnosis services of a clinical nature shall be conducted only by a psychiatrist, a psychologist, or a professional meeting the minimum qualifications outlined in Paragraph 34. Clinical services include assessment, diagnosis, treatment/service planning, psychotherapy, and evaluation.

34. Qualifications to Provide Assessment, Treatment Planning, Counseling, Psychotherapy and Evaluation & Diagnosis Services

A. Any person who provides the professional services referenced in Paragraph 33 of these AOC Standard Terms & Conditions shall be at least twenty-one (21) years of age, possess a minimum of a master's degree in a human service-related specialty (or higher degree as required in applicable *Service Specifications*); have two years documented full-time experience in the preceding five years working with the client population(s) being served; and have at least one of the following qualifications:

- i. Psychiatrists. Psychiatrists shall be a licensed physician as defined in A.R.S. Title 32, Chapter 13 or 17, who is Board certified or Board eligible under the standards of the American Board of Psychiatry and Neurology or the Osteopathic Board of Neurology and Psychiatry.
- ii. Psychologists. Psychologists shall be licensed by the Arizona Board of Psychologist Examiners in accordance with A.R.S. Title 32, Chapter 19.1.
- iii. Professional counselors, marriage and family therapists, social workers, or substance abuse counselors. This level staff shall hold a master's degree in a human service-related specialty and have the following qualifications as applicable:
 - a. Professional Counselors shall be a Licensed Professional Counselor (LPC) with the Arizona Board of Behavioral Health Examiners pursuant to A.R.S. Title 32, Chapter 33.

- b. Marriage and Family Therapists shall be a Licensed Marriage and Family Therapist (LMFT) with the Arizona Board of Behavioral Health Examiners pursuant to A.R.S. Title 32, Chapter 33.
 - c. Social Workers shall be a Licensed Clinical Social Worker (LCSW) with the Arizona Board of Behavioral Health Examiners pursuant to A.R.S. Title 32, Chapter 33.
 - d. Substance Abuse Counselors shall be a Licensed Independent Substance Abuse Counselor (LISAC) with the Arizona Board of Behavioral Health Examiners pursuant to A.R.S. Title 32, Chapter 33.
- iv. Non-Licensed Ph.D. Ph.D. level staff, that is not clinical psychologists and is not licensed by the Arizona Board of Psychologist Examiners, shall be licensed to practice independently by the Arizona Board of Behavioral Health Examiners pursuant to A.R.S. Title 32, Chapter 33. The person must have a minimum of two years documented full-time experience in the preceding five years working with the client population(s) being served.
- v. Nurse Practitioners. Nurse practitioners providing the services specified in Paragraph 33 of these AOC Standard Terms & Conditions shall be at least twenty-one (21) years of age, hold a master's degree in a human services specialty, and licensed by the Arizona Board of Nursing pursuant to A.R.S. Title 32, Chapter 15. The person must provide services within the scope of their license and have documented full-time experience in the preceding five years working with the client population(s) being served.
- vi. Physician Assistants. Physician assistants providing the services specified in Paragraph 33 of these AOC Standard Terms & Conditions shall be at least twenty-one (21) years of age, hold a master's degree, and licensed by the Arizona Board of Medical Examiners pursuant to A.R.S. Title 32, Chapter 25. The person must provide services within the scope of their license and have documented full-time experience in the preceding five years working with the client population(s) being served.
- vii. Registered Nurses. Registered nurses providing the services specified in Paragraph 33 of these AOC Standard Terms & Conditions shall be at least twenty-one (21) years of age, hold a master's degree, and be licensed by the Arizona Board of Nursing pursuant to A.R.S. Title 32, Chapter 15. RNs shall have one (1) year of work experience in a behavioral health field. The person must provide services within the scope of their license and have documented full-time experience in the preceding five years working with the client population(s) being served.
- viii. Licensed Associate Behavioral Health Professionals. Staff holding a Master's degree and licensed at the Associate level by the Arizona Board of Behavioral Health Examiners as defined in R4-6-210 and R4-6-211 may provide assessment, treatment/service planning, group, individual and family counseling, and other direct care services under this contract; shall

have a minimum of two (2) years of documented full-time experience within the preceding five (5) years working with the client population(s) being served; shall not engage in independent practice under this contract; and shall receive clinical oversight/direct supervision at a rate of four (4) hours per month by a persons listed above in Paragraph 36 A. i. - iii.

- B. **Failure to Use Qualified Personnel.** If the Contractor provides services through volunteers, interns and/or psychometrists who do not meet the minimum qualifications set forth in this Paragraph and/or the applicable *Service Specification*, the Contractor shall not be entitled to compensation for those services and the Contract Officer may recoup, through offset or any other means, any compensation already paid for the services. In addition, the Contract Officer may take actions that the officer deems appropriate under Paragraph 11 of these AOC Standard Terms & Conditions.
- C. **Documentation.** The Contractor shall document competency, experience, and training of volunteers, interns or psychometrists as outlined in Paragraph 37 and 38 of this Contract, within thirty (30) days of hire, and before allowing volunteers ~~or~~ interns or psychometrists to perform services to clients under this contract.
- D. **Temporary Deferral.** The AOC does not allow deferral of education, experience, or licensure.
- E. **Annual Personnel List.** The Contractor shall provide to the AOC a list that includes name, title, status, degree, license type, and corresponding license number, and affirmation of submission of personnel qualification form, of all personnel, interns, psychometrists and volunteers who provide direct client services, on a yearly basis, and/or upon request.

35. **Qualifications for Independent Practitioners (non-licensed & providing non-therapeutic services), Volunteers, Interns and/or Psychometrists**

- A. **Minimum Qualifications, Independent Practitioners (non-licensed & providing non-therapeutic services).** An Independent Practitioner (IP) who provides non-therapeutic services shall be at least twenty-one (21) years of age, have a minimum of a high school diploma or GED (unless a higher degree is required by the applicable AOC *Service Specification*). The IP must demonstrate that they have the skill level required to provide effective program delivery and the ability to interact positively with juveniles. The IP shall provide documentation of any certificate, education, training, or experience reflecting their competency to provide the applicable service in accordance with Paragraph 38 and 39 of these AOC Standard Terms & Conditions.
- B. **Minimum Qualifications, Volunteers, and Interns.** Volunteers and interns providing direct care services to clients shall be at least twenty-one (21) years of age, have a minimum of a high school diploma or GED (unless a higher degree is required by the applicable *Service Specification*) and have the experience and training necessary, and shall be competent to provide the services assigned. The

Contractor shall document competency, experience, and training of volunteers and interns as outlined in Paragraph 38 and 39 of these AOC Standard Terms & Conditions, within thirty (30) days of hire, and before allowing the volunteer and/or intern to perform services with clients under this contract.

- C. **Minimum Qualifications, Psychometrists.** Psychometrists must possess a minimum of a bachelor's degree with a major in psychology or a closely related field of study and must have completed training in administering and scoring tests under the supervision of a licensed psychologist, to include satisfactory completion of coursework in test interpretation, psychometrics and measurement theory, and educational statistics. Certification by the National Association of Psychometrists (NAP) or Board of Certified Psychometrists (BCP) is preferred.

The use of psychometrists by the Contractor is permitted for and shall be limited to administration and scoring of testing instruments for purposes of evaluation and diagnostic services. The psychometrist shall **not** interpret testing instruments, conduct the clinical interview, or write the evaluation report. Psychometrists, regardless of employment status, shall have AOC approval before providing services to clients.

SECTION VI - SUPERVISION

36. Supervision of Interns, Volunteers and Psychometrists

- A. **Provisions of Supervision.** The Contractor shall supervise interns, psychometrists, and/or volunteers who provide direct services through direct observation and supervision. The supervision requirements are specified in this Paragraph and vary depending on the type of direct service the intern/volunteer is providing.
- i. **Professional Services.** The Contractor shall provide interns, psychometrist and/or volunteers at least one (1) hour of clinical supervision for every ten (10) hours of professional services delivered, as described in Paragraph 33. Supervision may occur individually or in a group.
 - ii. **Direct Care Services.** The Contractor shall provide psychometrists, volunteers and/or interns providing direct care services more than 10 hours per month at least one (1) hour of supervision or oversight for every forty (40) hours of work. Supervision may occur individually or in a group.
- B. **Documentation.** The Contractor shall document the supervision in the personnel file. The supervision and documentation shall occur contemporaneously, and the documentation shall be in a clear and consistent manner that includes:
- i. The date of the supervision.
 - ii. The name, signature, date and professional credential or job title of the supervisor.
 - iii. The name, signature, date and professional credential or job title of the person receiving the supervision.
 - iv. The duration of the supervision session.
 - v. Whether the supervision occurred in a group or individual setting; and
 - vi. Identification of training needs and recommendations made by the supervisor to enhance job performance, if indicated.
 - vii. **For psychometrists:**
Consultation regarding the services being delivered, which may include, but is not limited to, clinical issues and skills, unique needs of the client and family, record keeping and documentation, training and development plans, competency determinations, administrative and programming issues.

SECTION VII – ORIENTATION, ANNUAL TRAINING AND COMPETENCY DETERMINATION REQUIREMENTS

37. Orientation, Annual Training and Competency Determination

The Contractor shall annually complete the training required to maintain all professional licenses in good standing and any contract-related orientation or training as scheduled by the AOC. The contractor shall maintain documentation of all personal training and all training and competency related to volunteers, interns and psychometrists.

- A. **Orientation Plan.** The Contractor shall establish a plan to provide initial orientation and ongoing training for volunteers, interns and psychometrists providing direct services to clients. This ongoing training and orientation should clearly describe the type of training necessary to maintain current skills and obtain new skills, and provide services in a culturally competent manner, which relate to the goals and measurable objectives stated in the Contractor's ASC/AOC/JJSD application.
- B. **Orientation for Volunteers, Interns and Psychometrists.** The Contractor shall provide an initial orientation to Interns and Psychometrists prior to staff providing services to youth under this contract.
 - i. Time spent in orientation must be clearly documented in the personnel record and shall include:
 - a. Review of the Contractor's policies and procedures.
 - b. Review of AOC Standard Terms & Conditions, including incident reporting, applicable AOC *Service Specifications*, and contract special terms and conditions.
 - c. Client rights.
 - d. Protection of client privacy and confidentiality.
 - e. Service delivery in a culturally appropriate manner.
 - f. Program rules.
 - g. Fire, safety, and emergency procedures.
 - h. If applicable, basic infection control techniques, including hand washing, prevention of communicable diseases, and linen handling.
 - i. Ethical and professional conduct.
 - j. The client record keeping requirements set forth in Paragraphs 45 &

46 of these AOC Standard Terms & Conditions; and

- k. The staff person's dated signature affirming the orientation topics received and duration of orientation.
- ii. Volunteers who are under direct visual supervision and not providing direct services on a regular basis shall receive at minimum orientation and training relative to the scope of any services being provided to include:
 - a. Overview of the organization.
 - b. Population served.
 - c. Protection of client privacy and confidentiality.
 - d. Scope of the services and limitations of volunteer activity.

- C. **Training Requirements and documentation for Volunteers, Interns and Psychometrists.** The Contractor shall provide or ensure that each full-time employee who provides direct services to juveniles, the Contractor shall provide, or ensure that each person participates in, a minimum of forty-eight (48) hours of continuing education or in-service training for the first year of employment in the position. The Contractor shall credit time spent in orientation toward a person's first year of in-service hours.

Within the first six (6) months of hire, a minimum of four (4) hours of trauma training must be completed by the Contractor and any staff providing direct services to juveniles.

After the first year of employment, the Contractor shall ensure that each person obtains a minimum of sixteen (16) hours of continuing education or in-service training annually, to include documented training on criminogenic risk, trauma-informed care, and adolescent development. All training must be relevant to the staff's volunteers, interns and psychometrists' assigned activities. Documentation of training must include the date and duration of training; identified training topic; and include the dated signatures of the trainer and trainee.

For part time employees, training requirements are twenty-four (24) hours of continuing education or in-service training for the first year of employment and eight (8) hours of continuing education or in-service training annually, to include documented training on criminogenic risk, trauma-informed care, and adolescent development.

- D. **Competency Determination and Documentation for Volunteers, Interns and Psychometrists.** Except for personnel independently licensed, within thirty (30) days of hire and before permitting volunteers, interns and psychometrists to perform direct care services to clients under this contract, the Contractor shall determine competency (verbal, visual observation, written test, or other means) of

direct service by volunteers, interns and psychometrists. Contractor shall determine competency (verbal, visual observation, written test, or other means) of direct service staff for the items listed below. Competency determination must be made by the staff member's supervisor or higher management who at minimum possess a bachelor's degree and experience in human services related field for the areas identified below.

Documentation of competency in the following domains shall include the dated signature of the agency staff member responsible for the staff competency determination and shall be included in the personnel file:

- i. Prevention of violent behavior or behavior harmful to the client or others.
- ii. Behavior management in crisis situations including application of least restrictive interventions through modeled practice such as role-play and demonstrated technique.
- iii. Behavior management skills and activity supervision.
- iv. Record keeping of client activities and progress toward treatment goals and measurable objectives.
- v. Recognizing and responding to high-risk situations and suicide prevention techniques.
- vi. Symptomatology of clients' disorders and addictions; and
- vii. Common side effects, reactions, and interactions of prescribed medications.

SECTION VIII – PERSONNEL AND RELATED FILES

38. Contractor Personnel File

File Contents. The Contractor shall maintain a current, individual file for him/herself which shall include:

- A. The person's name, birth date, address, social security number and phone numbers.
- B. Documentation that he/she meets qualifications specified in Paragraphs 33 or 34 of these AOC Standard Terms & Conditions to provide assigned services, including an official copy of his/her diploma or transcripts, record of dates and locations of work experience, education, and training.
- C. A copy of required professional licenses.
- D. Documentation of compliance with the fingerprinting requirements, and the requirement for a notarized criminal history affidavit form, set forth in Paragraph 27 of these AOC Standard Terms & Conditions. *A copy of the fingerprint clearance card and verification of DPS validity OR a copy of the fingerprint clearance application, including fingerprint ink card if the person does not have the clearance card at the time of hire.*
- E. Documentation of any disciplinary actions including but not limited to professional licensure actions; and
- F. Documentation of any required communication per AOC Standard Terms & Conditions Paragraph 4-F: Related Litigation, Complaints or Investigations and any responses to any inquiry or investigation conducted by law enforcement or licensing body related to the contractor/staff's license or professional conduct may be kept in a separate file available for AOC review and inspection.

39. Files on Volunteers, Interns and Psychometrists

File Contents. The Contractor shall maintain individual files on volunteers, interns and psychometrists who provide direct services to clients. The files shall demonstrate compliance with the requirements of these AOC Standard Terms & Conditions, and shall include the following:

- A. The person's name, birth date, address, social security number and phone number.
- B. Documentation that the person meets the qualifications specified in this Contract to provide assigned services, including a record of dates and locations of work experience, education, and training.
- C. A copy of the person's current job description, work duties and responsibilities, official learning contract or service agreement and required qualifications with a

dated signature of the person indicating that he or she understands and agrees that he or she meets stated qualifications, experience requirements, and can adequately perform duties described.

- D. Documentation of compliance with the fingerprinting requirements, as applicable, and the requirement to maintain a notarized criminal history affidavit form specified in Paragraph 27 of these AOC Standard Terms & Conditions.
- E. Documentation of any disciplinary actions taken against the person.
- F. Documentation of orientation, continuing education, or training (including web based) as described in Paragraph 37 of these AOC Standard Terms & Conditions.
- G. Documentation of supervision of volunteer (if applicable) and intern **during** the volunteer activity or service provided as described in Paragraph 36.
- H. Documentation of competency determination as described in Paragraph 37 of these AOC Standard Terms & Conditions.
- I. Documentation of supervision of volunteer, intern and psychometrist as described in Paragraph 36.

SECTION IX - CLIENT ADMISSION AND DISCHARGE CRITERIA

40. Admission and Discharge Requirements

- A. **Admission and Discharge Criteria.** The Contractor shall maintain admission and discharge criteria which are consistent with those specified in the Contractor's Application. The Contractor's written admission criteria shall be sufficiently detailed to allow prospective clients and referring agencies to understand the Contractor's admission policies. The Contractor's written discharge criteria shall be sufficiently detailed to allow a client to understand his or her expected performance.
- i. Discharge planning should occur throughout the service duration and be specific, measurable, attainable, realistic and time bound. The discharge plan should include the juvenile's ability to implement coping skills and impulse control. It should also include strategies that mitigate risks and increase protective factors that support ongoing reintegration to the community. Also, the plan should document the readiness of the client for discharge and/or transition to the next level of care, and if applicable, document barriers that prevent successful discharge from service.
 - ii. The final discharge/aftercare plan shall be clearly identified as "final" and identify specific recommendations including referrals, specific providers, identification of formal and informal supports, and any additional or continued services to ensure continuity of care. A copy of the completed plan shall be provided to the juvenile, juvenile's parent/guardian/supportive adult, and the probation officer prior to or at the time-of-service termination with documentation of the dissemination recorded in the juvenile's file.
- B. **Rules and Disciplinary Policies.** The Contractor shall have written program rules and disciplinary policies describing the expected behavior of clients. The Contractor shall provide a copy and verbal explanation of those rules and policies to each client upon that client's entry into service with the Contractor, and document that client's receipt of them in the client file, as required in Paragraph 45 C xvii. of these AOC Standard Terms & Conditions.

SECTION X - CLIENT ASSESSMENT

41. Assessment

- A. **Clinical Assessment:** Except as provided in Subparagraph d, the Contractor shall conduct a detailed clinical assessment and enter it in writing into a client's record within five (5) business days of the client's admission to the service. A psychiatrist, psychologist, or other behavioral health professional as identified in Paragraph 34 of the AOC Standard Terms & Conditions shall conduct the assessment.

The assessment, and the written record of it, must determine and document whether the individual meets the Contractor's service admission criteria and the necessity for treatment; and whether the Contractor has the capability and staffing to provide authorized services. The assessment must be a written narrative summary and shall include the following to be used to develop the treatment/service plan:

- i. Date, time, and location where the assessment was conducted.
- ii. Determination that the client meets the admission criteria for service authorized and that the Contractor has the capability and staff to provide the needed services.
- iii. Presenting issues as described by the referral source, and collateral contacts (i.e., probation officer, parent/legal guardian, family members, juvenile, other information provided).
- iv. Identification of criminogenic factors of the client. Clinicians should obtain the AZYAS report and consult with juvenile probation officers regarding criminogenic factors, risk & needs profiles, and make use of this information for the assessment process.
- v. Identify youth's strengths and protective factors.
- vi. Detailed social history, including traumatic experiences, placement history, and events including juvenile's history of victimization.
- vii. Medical history with documentation of known allergies, required special diets, head trauma or other events that caused brain injury such as high fevers, periods of oxygen deprivation, and current and past medications.
- viii. Educational and vocational history including any Individual Education Plan (IEP) or 504 Plan.
- ix. Substance abuse history, including family and/or juvenile, if applicable.
- x. Domestic Violence history if applicable.

- xi. Legal status and history.
- xii. Current services the client and family are receiving.
- xiii. Client and family's history of physical and mental health diagnosis, past treatment, and hospitalization for behavioral health and/or substance abuse issues.
- xiv. Information obtained from the interview with the client, his or her parent or guardian.
- xv. Using the most current version of the DSM, provide diagnosis and co-occurring issues, if applicable.
- xvi. Recommendations for further assessment and treatment as appropriate prior to finalization of treatment plan and, if applicable, the need for additional evaluation and diagnosis as specified in Paragraph 42 of these AOC Standard Terms & Conditions; and
- xvii. Dated signature and credentials of person completing the assessment.

B. **Assessment Update.** The Contractor shall update the assessment (clinical and non-clinical) as new information is obtained that effects the client's assessment, but no less than every 90 days.

C. **Non-Clinical Assessments** The contractor shall complete a brief written summary assessment within five (5) business days and enter it into a client's record according to the timeframe described within the AOC *Service Specification* . This assessment may be completed by a behavioral health technician or paraprofessional. A non-clinical assessment cannot be used for clinical services.

The assessment, and the written record of it, must determine and document whether the individual meets the Contractor's service admission criteria; and whether the Contractor has the capability and staffing to provide authorized services; and shall include the following to be used to develop the service plan:

- i. Date the assessment was conducted.
- ii. Determination that the client meets the admission criteria for service authorized and that the Contractor has the capability and staff to provide the needed services.
- iii. Presenting issues as described by the referral source through the AZYAS report and juvenile.
- iv. Identification of criminogenic factors for the client. Staff should consult with juvenile probation officers regarding criminogenic factors, risk and

need profiles and make use of this information as part of the assessment process.

- v. Social history; including traumatic experiences and events including juvenile's history of victimization.
- vi. Medical history with documentation of known allergies, required special diets, and current and past medications.
- vii. Educational and vocational history including an Individual Education Plan (IEP) or 504 Plan.
- viii. Substance use history including family and/or juvenile, if applicable.
- ix. Domestic violence history, if applicable.
- x. Legal status and history.
- xi. Current services that the client and family are receiving.
- xii. Client and family's history of past treatment.
- xiii. Information obtained from the interview with the client, his or her parent or guardian.
- xiv. Recommendations for further assessment as applicable.
- xv. Dated signature and credentials of person completing the assessment.

D. **Assessment Update.** The Contractor shall update the assessment as new information is obtained that effects the client's assessment, but no less than every 12 months.

E. **Evaluation History.** If a client received a psychiatric, psychological, psycho-educational, and/or psychosexual evaluation within one (1) year of the client's admission to the program with the Contractor, the Contractor may use such evaluations as the client's assessment under Subparagraph A if it meets all the requirements. If the Contractor uses such evaluations as the client's assessment, the Contractor shall update the information and add the information required in Subparagraphs A, to ensure that the information thoroughly addresses all the items specified in Subparagraph A. **Exemption.** The requirements of this Paragraph shall not be applicable to delinquency prevention programs unless otherwise indicated on the service specification.

42. Additional Evaluation and Diagnosis

A. **Evaluation.** Based on the information contained in the assessment, the Contractor shall determine the need for and make recommendations for any additional

evaluation. The Contractor shall make the recommendations to the referring probation officer and enter the recommendations for additional evaluation into the client's record within twenty (20) business days of admission to the service. The recommendations may include but are not limited to the following:

- i. Psychiatric or psychological evaluation.
- ii. Physical examination.
- iii. Neurological or neuro-psychological examination.
- iv. Laboratory tests.
- v. Educational testing.
- vi. Occupational and recreational therapy evaluations.
- vii. Rehabilitation and vocational evaluation.
- viii. Adaptive behavior evaluation or direct observation of behavior.
- ix. Nutritional evaluations including specialized nutrition or dietary modifications; and
- x. Speech and language evaluations.

- B. **Record Keeping.** The Contractor shall record immediately in the client's record additional information about the client's condition resulting from any evaluation conducted throughout the delivery of services to that client. At a minimum, the information shall include the Contractor's conclusions and recommendations resulting from each evaluation.

SECTION XI - TREATMENT OR SERVICES PLANNING

43. Creating a Treatment or Service Plan

- A. **Requirement.** The Contractor shall prepare a written treatment/service plan for each client based on the clinical or nonclinical assessment, evaluation, and collateral information, provisional or principal diagnosis and assessment of behavior and the treatment needs, abilities, resources, and circumstances of the client. A psychiatrist, psychologist, or other behavioral health professional identified in Paragraph 34 of these AOC Standard Terms & Conditions shall prepare an individualized treatment or service plan for clients referred under this Contract. The plan shall identify the person who wrote the plan and their credentials and contain those person's legible dated signature(s) and is based on the findings of the assessment/evaluation as set forth in Paragraphs 41 and 42.
- B. **Exemption.** The requirements of Paragraph 43 shall not be applicable to delinquency prevention programs unless otherwise indicated on the service specification(s).
- C. **Timeline.** The Contractor shall prepare and implement an individualized treatment/service plans for each client within five (5) business days of the completion of the assessment and prior to the initiation of treatment services with the exception of services that have a different requirement outlined in the AOC *Service Specification*.
- D. **Participants.** The Contractor shall notify the client, probation officer, the client's parent/guardian and/or designated representative in advance for all parties to participate in the development of the treatment plan, or in any treatment plan reviews. Participation can be in person or via a secure virtual meeting platform. The Contractor shall retain a copy of the notification, or documentation that it gave verbal notification, in the client record. If a client, a parent, guardian, probation officer or designated representative is unable or unwilling to participate in the planning, or such participation is inappropriate, the Contractor shall document the circumstances in writing and file the documentation in the client record.
- E. **Agreement to Treatment/Service Plan.** At the time that the initial plan is developed and with each subsequent review, the Contractor shall document the participation of the client, the client's parent, guardian, and/or designated representative, and the probation officer. The Contractor shall also document the participants' agreement to the plan by obtaining their dated signatures on it, or through a written record on the plan that the Contractor obtained verbal approval. Documentation in the treatment plan must also reflect the diagnosis and basis for treatment.

44. Contents of the Plan

- A. Treatment/Service planning should include consideration of the client's culture,

perspectives, interests, and goals, which in turn can promote their investment and ownership in the intervention process. The individualized treatment/service plan(s) shall be based on the current clinical or non-clinical assessment and/or evaluation, diagnosis, and basis for treatment at a minimum, contain the following documented items:

- i. The date the treatment plan was developed.
- ii. Methods to impact the criminogenic risk factors and build on client's strengths and protective factors as identified in the assessment/evaluation.
- iii. One or more client and family goals to achieve for improvement or maintenance of behavior, behavioral health, substance use, or adaptive functioning that are specific, measurable, attainable, realistic, and identify a target date for goal attainment.
- iv. The services, activities, and programs planned with the client and family, identifying specific interventions and modalities to address each goal as well as the person or agency responsible for providing the interventions.
- v. Referrals for parent/family services as appropriate; and
- vi. Discharge criteria, projected discharge date, and goals.

- B. **Treatment Methods.** The methods used in service delivery and individualized treatment plan development shall be an accepted evidenced based practice among the behavioral health field, juvenile justice reforms and practices. The treatment/service plan should demonstrate service capabilities which are appropriate to meet the client's needs including trauma history, reduce delinquency risk and address responsivity factors such as age, gender, and development.
- C. **Implementation.** Services provided to the client shall be trauma informed and directed toward carrying out the treatment/service plan; shall address the juvenile's identified criminogenic risks and needs; and shall be verified by documentation through progress notes, attendance records, pre and post-tests, and performance indicators.
- D. **Discharge Planning.** The Contractor shall document the readiness of the client for discharge and/or transition to the next level of care through Discharge Planning. This Discharge Planning activity shall be developed by the Contractor in conjunction with the client, client's parent or guardian, and the probation officer and document the progress made towards transition and/or discharge of the client. Discharge Planning activity must begin at the initiation of services and shall be documented on the Treatment Plan and on each Treatment Plan Update as developed by the Contractor. The discharge plan and if applicable, safety plan, should be provided to the client and parent/guardian upon discharge from the program to assist the family and client with implementing the plan.

- E. **Treatment/Service Plan Review and Update.** The Contractor shall ensure that the treatment plan is reviewed and updated by qualified personnel as identified in Paragraph 34 of these AOC Standard Terms & Conditions, at a minimum, when measurable objectives are accomplished, when additional client deficits which need intervention are identified, or at least every ninety (90) days from the initial date of the plan or as specified in the applicable AOC *Service Specifications*. The review and update shall comply with the requirements of Paragraph 44-D of these AOC Standard Terms & Conditions. The written treatment/service plan review shall include the following:
- i. Specific services, activities, programs, and client goals added to, deleted, or modified from the previous treatment plan.
 - ii. Documentation of client's progress toward the measurable objectives previously identified on the plan.
 - iii. Individualized Treatment plan objectives/service milestones that must still be accomplished by the client to allow for discharge or transition to a lower level of care.
 - iv. Criminogenic factors that have been targeted and methods for reducing those factors and increasing protective factors.
 - v. Identification of barriers to transition and/or discharge and plans to address those barriers.
 - vi. Issues which impeded treatment progress including unaddressed traumatic experiences and whether such issues were client-based or agency-based.
 - vii. Revised treatment plan objectives, including approaches, services and/or supports needed to achieve discharge or transition readiness.
- F. **Discharge/Aftercare Plan.** Discharge plan is the final document which formalizes the ongoing discussions with the client and family and/or guardian in preparation for discharge from the program or transition to a different level of care. The final discharge/aftercare plan identifies recommendations for referrals, additional or continued services to ensure continuity of care, or sustain the changes that have been accomplished in the program. It will also include identification of supports available to the client and family and/or guardian in the community and plans to access those resources. The discharge/aftercare plan shall be provided in writing to the juvenile, juvenile's parent or guardian, and the probation officer on the day of discharge. The Contractor shall document on the discharge/aftercare plan the date and method of delivery for filing the plan with the client and family/guardian and the probation officer.
- G. **Termination Report** (See Paragraph 49-E.)

SECTION XII - REQUIREMENTS FOR CLIENT RECORD KEEPING

45. Confidentiality and Content of Client Records

- A. **Confidentiality.** Client information, including client records, shall be kept confidential pursuant to the requirements of Paragraph 21 of these AOC Standard Terms & Conditions.
- B. **Case Notes:** All case notes/progress notes and all reports to the court / probation shall be legible (if handwritten) or computer generated in a font that can clearly be read.
- C. **Minimum Contents.** At a minimum, the record for each client shall include:
- i. An Informed Consent Form, as outlined in the definitions of these AOC Standard Terms & Conditions, which is signed by the client and the client's parent, guardian, or designated representative as appropriate and contains documentation that a verbal explanation has been provided to the client and to the client's parent or legal guardian. Informed consent can be accomplished by providing a verbal explanation of the client's condition(s) and proposed treatment/services/evaluations/assessments, the intended outcome, the nature of the proposed treatment/services, any procedures involved in the proposed treatment/services, risk or side effects of the proposed treatment/services and any alternatives to the proposed treatment/services.

This requirement is not applicable to delinquency prevention programs unless the program is graphic in nature and to competency resolution education services.
 - ii. A face sheet, which shall include name, address, telephone number, date of birth, person to notify in case of emergency, client's legal status in court proceedings, client's parent/guardian name and contact information, referral source, probation officer, attending or personal physician and the admission date. All information on the face sheet shall be updated as necessary in order to keep the information accurate and timely.
 - iii. Client assessments and evaluations as specified in Paragraphs 41 and 42 of these AOC Standard Terms & Conditions.
 - iv. Documentation of client's receipt of program rules and disciplinary policies.
 - v. Copies of any consultation reports or evaluations conducted by other agencies, professionals or physicians which resulted in admission to the

Contractor or are relevant to treatment and/or services to be provided by the Contractor.

- vi. Referral form and summary, if applicable, including the reason for referral, presenting problem and medications and dosage at the time of referral.
- vii. Document the delinquency risk level in the client's file as reflected on the Service Authorization Form and determined by the probation department using the AZYAS (Arizona Youth Assessment System). Additionally, document justification for group counseling placement that demonstrates that low risk juveniles are not placed in groups with medium and high-risk juveniles and that consideration was given to place client according to self-identified gender and developmental stage (early, middle, late adolescence). Document communication with the probation officer about the juvenile's criminogenic risks and needs beginning at the initiation of services and ongoing throughout the course of services.
- viii. A treatment plan as specified in Paragraphs 43 and 44 of these AOC Standard Terms & Conditions, including any additional requirements as listed in the appropriate AOC *Service Specification*.
- ix. A notice of treatment planning as specified in Paragraph 43-D of these AOC Standard Terms & Conditions.
- x. Documentation of any treatment/service plan reviews and updates.
- xi. Progress notes, which are legible, signed and dated by the Contractor, must be written on the day of the event for all services. Documentation of the services provided to the client and family in accordance with the treatment/service plan, date, duration of service, location of service delivery; client behavior, participation, and significant events; level of family involvement and the progress made toward goals and measurable objectives. Amended progress notes shall have the date, name, and signature and the reason for the amendment. Group progress notes shall be individualized to each client attending group.
- xii. Contractor must have original signature of client on a dated attendance form for each day as specified in the AOC *Service Specification*. The attendance documentation must be maintained for the entire length of the contract and made available for review if requested.
- xiii. Progress reports required by Paragraph 49-B of these AOC Standard Terms & Conditions.
- xiv. Evaluation reports required by Paragraph 49-C of these AOC Standard Terms & Conditions.
- xv. Documentation of incidents required by Paragraph 50 of these AOC Standard Terms & Conditions.

- xvi. Documentation of internal/external communications pertinent to the client's well-being or treatment.
- xvii. The discharge/aftercare plan required by Paragraph 49-D of these AOC Standard Terms & Conditions.
- xviii. A copy of the Service Authorization Form (SAF) that includes number of units, dated, service codes and duration not to exceed 90 days, AZYAS risk score, provider and probation signatures initiating and continuing services.
- xix. Documentation of the client's receipt of his/her client rights as required in Paragraph 28.
- xx. Documentation of the AZYAS Summary Report provided by the probation department.

46. Client Record Maintenance

- A. **Maintenance.** The Contractor shall maintain original versions or secure electronic records, not photocopies, of client records in a locked storage location as follows:
 - i. Closed files and available on request for inspection by the Contract Officer or probation personnel.
 - ii. Open files, readily available on request and in a form which permits them to be brought to a central location for inspection.
 - iii. Up-to-date entries, without error, and legible.
 - iv. Notations and progress notes written in ink, typewritten or computer printed records, and signed with original signatures; and
 - v. For electronic records see Paragraph 14 of these AOC Standard Terms & Conditions.
- B. **Relevant Information.** Client records shall contain information relating only to the individual client's course of care and treatment. The Contractor shall not record the behavior, comments, or actions of any other client who is receiving services in another client's record, except for such information that directly affects the care and treatment of the client.
- C. **File Management.** The Contractor shall have a system of identifying, organizing, and filing of client records, hardcopy and if applicable electronically, to ensure information is maintained properly at an easily accessible location.
- D. **Access.** The Contract Officer shall have the right to inspect, review and copy client records for the purposes of administering and monitoring this Contract, or other

state or federal laws or regulations, as authorized in Paragraphs 12, 14, 15 and 16 of these AOC Standard Terms & Conditions. Additionally, the staff of the probation department shall have the right to examine, review and copy client records for the purpose of probation enforcement.

- E. **Retention.** The Contractor shall retain complete client records according to Paragraph 14 of these AOC Standard Terms & Conditions.
- F. **Disposal.** The Contractor shall dispose of client records, and any other records that contain client information, according to HIPPA, all applicable laws and regulations and Paragraph 21-A of these AOC Standard Terms & Conditions.

SECTION XIII – GENERAL CLIENT SERVICES REQUIREMENTS

47. General Client Services Requirements

- A. **Release of Client.** Contractor personnel shall not release a client to anyone other than the custodial parent or agency, probation officer, guardian or a person designated by documented authorization from the custodial parent, juvenile Superior Court, agency, or guardian. The Contractor shall have a procedure to verify telephone authorizations initiated by the custodial parent or guardian.
- B. **Health and Safety.** The Contractor shall not at any time endanger the health or safety of the client under their care.
- C. **Behavior Management.** Contractor personnel shall use behavior management methods to teach clients and model acceptable behavior. The Contractor shall adhere to the regulations of their respective licensing entity(ies), and shall abide by the following additional AOC requirements:
 - i. Contractor methods to promote socially accepted behavior and compliance with Contractor policies and procedures shall not be detrimental to the health, emotional or psychological well-being of the client and shall not be associated with eating, sleeping, toileting, seclusion, isolation, or physical exercise as punishment.
 - ii. Contractor personnel shall not humiliate, threaten, belittle, or frighten a client, or use corporal punishment, and shall not permit other personnel or other clients to do so.
 - iii. Clients shall not be allowed to discipline other clients.
 - iv. Contractors providing out-of-home care services shall provide initial and ongoing training to their staff utilizing a nationally recognized method of behavior management, which emphasizes the use of de-escalation techniques and avoidance of physical restraints.
 - v. The use of physical restraint shall be permissible only for acts of aggression, violence, or self-destructive behaviors, and to ensure immediate safety of the juvenile or another person. The physical restraint shall only be applied to enable the juvenile to regain control of him/herself.
 - vi. Physical restraint will not be used to enforce compliance with staff directives related to a non-safety issue or prevent or cease runaway behavior.
 - vii. Restraints which restrict the juvenile's diaphragm or chest may result in positional asphyxia and are strictly prohibited.

viii. Inappropriate behavior management practices, as described in this Subparagraph and/or prohibited in the Contractor's policies and procedures, are considered by the AOC to be incidents as defined in Paragraph 62 -C and may be subject to immediate contract action if determined to affect the health, safety and welfare of juveniles receiving services under this contract.

- D. **Service to Youth and Families with Limited English Proficiency.** For those youth and families with Limited English Proficiency the Contractor shall provide or arrange for the services to be provided in the language identified as preferred by the youth and/or family members. The Contractor shall not use the client's family members or peers to translate languages to English. The Contractor shall provide interpreters and/or translators with the education and expertise required by the specific situation.

Guidance to assist Contractors in complying with this requirement can be found in Appendix A. and on the JJSD website.

- E. **Family Involvement.** All efforts to encourage and support families to be actively and meaningfully involved in aspects of care must be documented. Family involvement must occur unless contraindicated throughout the course of services, including during the assessment process, the development and progress of treatment/service goals, the review of on-going care and the planning for discharge and aftercare services.

SECTION XIV - TRANSPORTATION OF CLIENTS

48. General Transportation Requirements

If the Contractor provides its own vehicular transportation of clients, uses a private transport provider, or uses volunteer-driven vehicles, it shall comply with the requirements of this Paragraph and all applicable federal and state laws, rules, and regulations.

A. **Vehicular and Driver Requirements.** Contractors providing client transportation shall ensure compliance to the following requirements:

- i. The vehicle shall be maintained in a mechanically safe condition.
- ii. The vehicle driver shall be twenty-one (21) years of age or older and hold a current, valid, and unrestricted driver's license.
- iii. No client shall be transported in portions of vehicles not constructed for the purpose of transporting people such as truck beds, campers, or any trailer attachment to a motor vehicle.
- iv. Every client shall be seated on a seat which is securely fastened to the body of the vehicle, and which provides sufficient space for the client's body.
- v. The driver and every passenger shall comply with A.R.S. § 28-907 and 28-909 in the use of seat belts.
- vi. Contractor volunteers or interns and clients shall not stand, sit, or lay on the floor while the vehicle is in motion.
- vii. Every vehicle used to transport clients shall have adequate heating and air conditioning.
- viii. A first aid kit and sufficient drinking water for all clients on an outing shall be maintained in the vehicle; and
- ix. The Contractor shall maintain on file records of all services and repairs for owned or leased vehicles for as long as the Contractor uses the vehicles.
- x. A person who maintains a fingerprint card that contains a driving restriction as noted in ARS §41-1758.03 D is precluded from driving any vehicle to transport employees or clients of the employing agency as part of the person's employment.

B. **Transport Insurance Requirements.** The Contractor shall comply with the insurance requirements specified in Paragraph 18 and 19 of these AOC Standard Terms & Conditions. The Contractor shall keep proof of insurance at its facility and in every vehicle used to transport clients.

- C. **Transport Safety Requirements.** For general transportation or transportation for outings, the Contractor shall ensure that the following procedures are complied with:
- i. The driver of any vehicle transporting clients shall not wear headphones or earphones.
 - ii. Vehicle doors shall remain locked at all times when the vehicle is in motion.
 - iii. The vehicle driver shall remove the keys from the vehicle and set the emergency brake before exiting the vehicle.
 - iv. A client shall not be left unattended in a vehicle; and
 - v. The Contractor shall provide a safe vehicle loading and unloading area away from moving traffic and hazardous obstructions.
- D. **Notification.** The Contractor shall notify the Contract Officer, according to the incident reporting requirements specified in Paragraph 50 of the AOC Standard Terms & Conditions of any traffic accident involving any client being transported by the Contractor, its transport contractor, Contractor volunteers, or interns utilizing personal vehicles.
- E. **Emergency Information.** Emergency information shall be available in the transport vehicle for every client being transported, which shall include, information regarding each client's medication/allergy requirements and any adverse reactions which may be anticipated to occur as a result of the weather, client anxiety, delay in administration of medications or other reasons. To ensure confidentiality, such private health information shall be locked or secured in such a way as to avoid unauthorized access, loss, and/or tampering.

SECTION XV - MANDATORY REPORTING REQUIREMENTS

49. Reporting

- A. **Contract Deliverables.** The Contractor shall supply all reports specified in the Contract, and applicable AOC *Service Specifications* or mandated by the Contract Officer. The Contractor shall ensure that each report is accurate, timely and thorough.
- B. **Monthly Progress Report.** The Contractor shall file a written progress report with the client's probation officer by the 10th day of each month for the prior month except if the circumstance is the youth has been terminated from the program and the probation department agrees to a combined progress and termination report. The Contractor shall document on the progress report the date and method of delivery for filing the report with the probation officer.

The progress report shall include, at a minimum:

- i. Date of report.
 - ii. All Services provided to the youth and family.
 - iii. The client and family's response and progress in services.
 - iv. Plan and active efforts for engagement strategies if the client and/or family are not involved.
 - v. Primary issues addressed, diagnosis and criminogenic factors addressed.
 - vi. Prognosis for continuing service including barriers towards progress.
 - vii. Client's anticipated discharge date and plan.
 - viii. Signature and credentials of personnel completing the report.
- C. **Evaluation Reports.** The Contractor shall submit psychiatric, psychological, psychoeducational, and psychosexual, and neuropsychological evaluation, within 30 days of the evaluation appointment and document the method and date of report dissemination. For addendums or updates, reports should be sent to the requesting probation department, within fifteen (15) business days of the referral.
- D. **Discharge Report.** The Contractor shall prepare a discharge report when juveniles are successfully exiting any program. This report is submitted to the probation officer within fifteen (15) business days of the discharge of Contractor services for each juvenile and family. The contractor shall record the method and date of dissemination of the report in the juvenile's file. The report shall include but is not limited to:

- i. Name and SWID number of the juvenile.
- ii. All services provided to the juvenile and family.
- iii. Treatment plan goals met and those still needing to be addressed.
- iv. Recommendations, if appropriate, for lower level of care in treatment.
- v. Summary of progress made for the presenting issues of placement.
- vi. Goals and objectives met.
- vii. Any barriers of goals and objectives.
- viii. CFT or staffing members present and agreement to discharge plans.
- ix. Family involvement summary.
- x. Family engagement next steps and/or barriers.
- xi. Any concerns or continued work post discharge.
- xii. Aftercare services identified and scheduled.
- xiii. Resource contacts for services post discharge if follow up is needed for scheduling.
- ix. Other agency involvement and resources in place or needed.

E. **Termination Report.** The Contractor shall prepare a termination report when juveniles are unsuccessfully exiting any program. This report is submitted to the probation officer within fifteen (15) business days of the termination of Contractor services for each juvenile and family. The contractor shall document the method and date of dissemination of the report in the juvenile's file. The report shall include the following:

- i. A summary of services provided.
- ii. Accomplishments relating to the treatment plan objectives and issues resolved during the length of time in services.
- iii. Length of time services received.
- iv. Criminogenic factors impacted during length of time in services.
- v. Criminogenic factors not impacted during the length of time in services.
- vi. Treatment/service plan goals which were not resolved.
- vii. Recommendations for continuing treatment as appropriate.
- viii. Date of termination of services.
- ix. Reason for termination of services.
- x. Referrals recommended, or community supports identified.
- xi. Date report was prepared.
- xii. Dated Contractor signature and credentials; and

xiii. For Clinical Services, termination reports must be prepared by a medical practitioner or behavioral health professional.

- F. **Diversity Report.** The Contractor shall by the second Friday in August, submit a Diversity Report form to the Contract Officer which identifies, for the previous fiscal year of service ending June 30, the number of personnel providing direct services to clients under the terms of this contract. The Contractor shall use the ASC/AOC/JJSD Diversity Report form to complete and submit the report. The submission of the diversity report is required even if no referrals were received by the contractor in the fiscal year. The report would then contain personnel diversity only.
- G. **Performance Outcomes Report.** The Contractor shall submit Annual Performance Outcomes reports to the Contract Officer. The Contractor shall use the ASC/AOC/JJSD Core Performance Outcome Report form to complete and submit the report for each service under contract, or as directed by the Contract Officer. The Contractor shall maintain a file of the completed Performance Outcome reports for review under this contract.
- H. **Other Reports.** The Contract Officer may require the Contractor to provide other reports, or to participate in reports or surveys of other entities, such as may be negotiated at the time this Contract is awarded and specified in the Contract's Special AOC Standard Terms & Conditions, Attachment A, Amendment or Change Order. The Contractor shall retain copies of these reports in its Contract file.
- I. **Outcome Evaluations.** The Contractor shall participate in any outcome evaluation conducted by the Contract Officer.

50. Incident Reporting

Reporting Requirements. The Contractor shall ensure all incidents involving clients served under the Contract and other youth as outlined in this Subparagraph are reported according to Paragraph 50-A through E of these AOC Standard Terms & Conditions. In addition, the Contractor shall ensure mandatory reporting to Law Enforcement and/or Department of Child safety is conducted pursuant to A.R.S. §13-3620 and shall report incidents identified in Paragraphs 50-B through E as required by law, licensing regulations and Contractor policy (as applicable).

A. **Parties to Notify.**

- i. ASC/AOC/JJSD. The Contractor shall report to the ASC/AOC/JJSD incidents involving clients/youth in accordance with Paragraphs 50-B through D of these terms and conditions. Incident impacting the health, safety, and welfare of clients **whether or not the incident involved clients served under this Contract** and shall also be reported to the ASC/AOC/JJSD. The incident report shall exclude identifying information for youth not funded by the ASC/AOC/JJSD.

- ii. Probation Department. The Contractor shall report incidents to the assigned probation officer, including but not limited to, incidents identified in Paragraphs 50-B through E. of probation involved youth to the probation officer whether or not the youth is funded by the ASC/AOC/JJSD.
 - iii. Law Enforcement. The contractor shall report incidents to law enforcement as required by law and according to the Contractor's policies and procedures.
 - iv. Parent/Guardian. The Contractor shall notify the parent or guardian of the incidents set forth in Paragraph 50-B through E.
- B. **Health, Safety and Welfare Incidents.** The Contractor shall report all incidents to the ASC/AOC/JJSD impacting the health, safety, and welfare of clients whether or not the incidents involved clients served under this contract. The Contractor shall follow the guidelines/timeframes set forth in subparagraphs B, C, D, and E for reporting and documenting of incidents.
- C. **Significant Incidents.** The Contractor shall report the following significant incidents by telephone to the ASC/AOC/JJSD at **602-452-3284** by 12:00 noon on the next business day after the incident occurs or after becoming aware of the incident. The Contractor shall also submit a written incident report to the secure ASC/AOC/JJSD fax at **602-307-1278** no later than three (3) business days after the occurrence or after becoming aware of any of the following incidents:
- i. Death of any client/juvenile (whether or not funded by the ASC/AOC/JJSD).
 - ii. Riots, fires, and/or natural disasters.
- D. **General Incidents.** The Contractor shall report the following incidents by submitting a written incident report to the secure ASC/AOC/JJSD secure email at JJSDincidentreports@courts.az.gov or fax at **602-307-1278** no later than three (3) business days after the occurrence of the incident or becoming aware of the incident. Immediate parent/guardian notification must occur for incidents relating to items i-v below, unless prohibited by court order and documented in client treatment/service plan.
- i. Homicidal or suicidal attempt or threat with a plan.
 - ii. Physical assault while in contract service that requires medical treatment beyond first aid.
 - iii. Medical treatment beyond first aid as a result of an injury while in a contract service.
 - iv. Emergency room or urgent care visits.

- v. Request for Emergency mental health stabilization provided by first responders and/or crisis intervention teams.
- vi. Sexual behavior involving staff and/or clients/youth (consensual or not).
- vii. Use of seclusion and/or restraint.
- viii. Weapons possession.
- ix. Possession and/or use by a client of any quantity of illicit drugs or alcohol or of medications not prescribed to the client.
- x. Prescription medication errors.
- xi. Any missed medication dosages and/or medication refusals that exceed two (2) consecutive days. Note: Refusals must be discussed with the probation officer and documented.
- xii. Acts by clients or staff where the Contractor involves law enforcement, excluding runaway.
- xiii. Self-harming behavior while in a contract service that requires medical treatment beyond first aid.
- xiv. Acts of inappropriate discipline and/or inappropriate behavior management involving clients/youth by staff; and
- xv. Traffic accidents involving clients transported by the Contractor or its personnel, its transport contractor, volunteers, or interns.

E. **Additional reports/notification to referring Probation Department.** Within three (3) hours of occurrence or becoming aware of the following incidents, the Contractor shall notify the referring Probation Department only and maintain documentation of those notifications:

- i. Runaways.
- ii. Any Department of Child Safety (DCS) report.

F. **Incident Report Form.** The Contractor shall use the ASC/AOC/JJSD Incident Report form to complete and submit incident reports. All reports must be legible and be signed by the staff who prepared the report as well as by the staff who approved the report. A fillable ASC/AOC/JJSD Incident Report form may be accessed at the JJSD website listed in the Contacts page of these AOC Standard Terms & Conditions. The completed form must be faxed to the secure ASC/AOC/JJSD email to JJSDincidentreports@courts.az.gov or fax at **602-307-1278** in accordance with the stated timelines. The Contractor shall maintain a file of written incident reports that are available for review under this contract.

G. **ASC/AOC/JJSD Response to Incident Reports or Complaints.** The Contract Officer shall take the following steps upon Contractor notification of an incident in Paragraphs 50-B through D:

- i. The Contract Officer shall review the verbal and written information to determine if the incident requires investigation. The Contract Officer may direct the Contractor to initiate an internal review and/or request additional information and/or require specific action.
- ii. If the Contractor's actions are such as to warrant the concern of the ASC/AOC/JJSD, the Contract Officer shall investigate further or forward the information to the relevant authorities.
- iii. If the ASC/AOC/JJSD is not satisfied with the Contractor's response to an incident, the Contract Officer may take any appropriate action including those listed in Paragraph 11.

Limited English Proficiency (LEP) Guidance Document

Guidance for Independent Practitioner (IP)

For those youth and families with LEP the Contractor shall provide or arrange for the services to be provided in the language preference identified by the youth and family members. The following options are available for Independent Practitioner (IP) contractors to address the LEP needs of youth and families receiving services:

- A. Independent Practitioners contracting with the AOC may contract directly with foreign language interpretation and translations contractors that are listed on the State's Foreign Language Interpretation and Translation portal but may need to do so at rates different than the State's contract rates.
- B. Independent Practitioners contracting with the AOC may make use of Certified Interpreters and/or Translators: A certified interpreter and/or translator shall be recognized as an individual who has passed an examination administered by a recognized examination agency, such as the American Translators Association, the Federal Court Interpreter's examination, or an examination administered by a State Court, or University accredited by the United States.
- C. Independent Practitioners contracting with the AOC may make use of Qualified (Non-Certified) Interpreters and/or Translators: A Qualified (Non-Certified) interpreter or translator is an individual who is able to interpret/translate effectively, accurately, and impartially, both receptively and expressively, using any necessary vocabulary. A Qualified (Non-Certified) individual shall possess competence in both the source language and the target language and shall be able to demonstrate knowledge and skill gained from experience working in the language.

Telemedicine Services

While in person service delivery is preferred and best practice for engaging juveniles and families, in the interest of facilitating the delivery of counseling and evaluation services to youth and families in unique circumstances, rural or under-served areas, the **Administrative Office of the Courts (AOC)** has approved Tele-Medicine service modalities. Tele-Medicine can be utilized by AOC-contracted providers except for services for which the weight of evidence, based on practice guidelines, peer-reviewed clinical publications or research or recommendations by the Telehealth advisory committee on Telehealth best practices established by A.R.S. § 36-3607, determines not to be appropriate to be provided through Telehealth, in accordance with the following definitions and guidelines (these may be subject to future updates or changes to meet evolving needs):

Tele-Medicine: Means the practice of health-care delivery, diagnosis, consultation, treatment, and transfer of medical data through a secure platform. Interactive audio, video, or data communications that occur in the physical presence of the patient, including audio or video communications sent to a health care provider for diagnostic or treatment consultation. **A.R.S. § 36-3601(3)** The **AHCCCS Medical Policy Manual, Section 320-I Tele-Health**, additionally defines Tele-Medicine as the practice of (real-time) health care delivery, diagnosis, consultation and treatment and the transfer of medical data through interactive audio and video communications that occur in the physical presence of the client.

Other commonly used terms include: Tele-Mental Health; Tele-Behavioral health; Behavioral Tele-Health; and Tele-Practice.

AOC Guidelines:

1. Any provider of Tele-Medicine Health services must be licensed and insured within in the state of Arizona and must abide by **A.R.S. § 32, Chapter 19.1 and A.R.S. § 36-3601, 3602, and 3603.**
2. AOC-contracted service providers licensed by the **Arizona Department of Health Services** shall abide by the **ADHS Policy & Procedures Manual, Section 1, Chapter 400, Policy 410, Use of Telemedicine.**
3. AOC-contracted service providers licensed by the **Arizona Board of Medical Examiners**, the **Arizona Board of Psychologist Examiners**, or the **Arizona Board of Behavioral Health Examiners**, shall abide by their respective Board Rules for the practice of Tele-Medicine (or applicable term used by their respective Board).
4. AOC-contracted service providers who are also AHCCCS-contracted shall abide by the **AHCCCS Medical Policy Manual, Section 320-I Tele-Health.**
5. In addition, any AOC-contracted service providers wishing to provide clinical assessment, consultation or counseling, psychiatric consultation or medication monitoring, and/or

competency restoration services via Tele-Medicine shall comply with the following **AOC-specific guidelines**:

A. AOC Contract.

The provision of contracted services via Tele-medicine requires the Contractor to submit the Tele-Medicine guidelines to JJSDContracts@courts.az.gov and must be approved by the AOC prior to utilizing tele-med as a term on the AOC Contract (See submission guidelines below)

B. Security & Privacy.

Tele-medicine services must be provided by the client / family logging on to a secure portal, either at a court / probation-provided HIPAA-compliant site or through the client's home computer or Smart-phone. If the service is conducted at a court-provided site, then the following conditions shall be in place:

- No person, other than those agreed to by the person receiving services will observe or monitor the service being provided.
- The video-conferencing room door must remain closed at all times.
- A sign must be posted on the door stating that a clinical session is in progress.
- Safeguards must be provided to ensure the privacy of the session, (e.g., white noise machine)

C. Reimbursement. Tele-medicine sessions are reimbursable at the same rate as in-office sessions denoted on the AOC Contract for the same service.

D. Progress notes. In addition to requirements in the **AOC Standard Terms & Conditions, Paragraph 45 for Independent Practitioners (IP) or Paragraph 50 for Agencies (FP)**, progress notes must include documentation of tele-medicine as the modality of the session and must document the physical location of the client during the session. The Progress Notes must also include any issues that came up due to the nature of the delivery of the service, e.g., the client or provider had difficulty logging on causing session to start late, problems with connectivity, loss of service during session, delay in transmission, interruptions, or loss of visual at any point during the session, the necessity of crisis interventions, etc. Notation must also be made as to whether the use of this modality posed any barriers for the client, and how those were addressed.

E. Client identification. Tele-medicine services must include direct real-time, ongoing visual interaction with the client or family, and document the client's identification in the progress notes.

F. Crisis Management: The service provider must be familiar with crisis services or hotlines in the area where the client is located, if the client is in crisis and needs immediate in-person assistance. Plans for crisis management must be discussed with the client and family prior to the initiation of services. Written documentation of crisis management plans, including local contact information and locations, must be retained in the client's record and a copy must be provided to the client and family.

- G. **Confidentiality.** All provisions of **AOC Standard Terms & Conditions, Paragraph 21 (IP & FP), Confidentiality** apply, *in addition*:
- The provider must explain: the inherent confidentiality risks of electronic communication, including telemedicine services; the importance of not including other individuals within the session unless approved by the provider (e.g. family sessions may be planned, but the client's friends should not be present during sessions; family members should not be present unless a family session is planned); the potential for technology failure and outline of emergency procedures for when such failure may occur
- H. **Informed Consent.** Prior to delivery of any tele-medicine service, informed consent must be provided in accordance with **AOC Standard Terms & Conditions, Paragraph 45 for Independent Practitioners (IP) or Paragraph 50 for Agencies (FP)**. The Informed Consent document must include a description of the limitations and risks associated with tele-medicine, including but not limited to:
- Inherent confidentiality risks of electronic communications.
 - The potential for technology failure and outline of emergency procedures for when such failure may occur.
 - Emergency procedures when the service provider is unavailable.
 - Detailed Emergency procedures to be followed when the client is in immediate crisis (see above).
 - Client and Parent/guardian signature shall include verification of their understanding and that this information was conveyed verbally and in writing.

Telemedicine Submission Guidelines

Under separate cover, please submit the following to the AOC:

For approval to utilize Tele-medicine for AOC-contracted services, the items below must be submitted. Upon approval, your contract will be revised to reflect those services which use the modality:

1. Please submit a copy of the current license, contract, and/or any related MOUs you hold for a secure platform for the delivery of tele-medicine (e.g. Zoom license) *NOTE: While Face-time, Skype, etc. may be acceptable for client-family chats or virtual visits, those platforms will not be allowed for the delivery of confidential services for which you are contracted.*
2. Please attach a separate page that list the services on your AOC Contract which you are able to provide via this modality.
3. Please submit a copy of your policy(ies) related to the provision of Tele-medicine services, and your Consent to treat form(s) which address this modality.
4. Please submit a sample copy of a Crisis Management Plan for use with clients relative to those receiving services via Tele-medicine modalities.

5. Please submit whether you are currently approved through AHCCCS to provide services via Tele-medicine.

***Please note that COPY means you are required to attach a copy of the requested documentation to this form.**