APPENDIX C SEX OFFENDER SERVICES

- 1. <u>Service Definition and Approaches</u>: This service provides appropriate treatment intervention for adult sex offenders, which includes group, individual and family counseling and requires intensive collaboration with the probation supervision team and ongoing assessment of risk to the community.
- 2. Standard Service Specifications: see Introduction, page 14.

3. Additional Service Specifications:

- **a. Assessment/Intake** In addition to a full clinical assessment, assessments of sex offenders will include a full sexual history, a review of attitudes and beliefs in regard to human sexuality and level of responsibility taking for the offense.
- **b. Sex Offender Treatment Groups -** Will address, at minimum, healthy sexual behaviors, identifying triggers to deviant behaviors and boundary setting.

Size and Composition: Twelve (12) participants or less. Groups must be gender specific.

c. Couples/Family Counseling - Couple and/or family counseling is appropriate in addressing special dynamics or family trauma issues, planning for reunification, facilitating clarification and apology sessions, and assisting couples in communicating and adjusting to court-imposed separation.

<u>Duration and Intensity</u>: 60-minute sessions, as needed, ideally no more than twice/month for up to four months.

d. Chaperone Education Services - These session(s) may include notification of high-risk behaviors and their responsibility in accompanying the offender in the community.

4. Additional Service Goals:

a. Facilitate probationer's self-awareness, self-management, increased coping skills and ability to intervene in their sexual offending cycle.

5. Additional Service Tasks:

- a. Develop a treatment plan that includes defining and teaching normative sexual behavior, reducing risk to victimize others, and promoting victim empathy.
- b. Review physiological testing results with client and probation officer.
- c. Conduct ongoing risk assessment of probationer; develop strategies for managing risk that include immediately notifying the probation department and any parties involved with the probationer, of increased risks or concerns.
- e. Report probationer's unexcused absence from treatment to the supervising probation officer within 24 hours.
- f. Meet with the Sex Offender Adult Probation team once a month, or as needed.
- h. Provide consultation services to the Court, which may include, but not be limited to staffing, training, expert testimony or other assistance as may be required.
- i. Provide coordination, consultation, and/or training for prospective chaperones.

6. Please list the name(s) and title(s) of the staff that will be providing these services for your agency. In addition, briefly describe their experience (including length of time) in providing these services.

Service Delivery Methodology

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tas	accomplish the goal of this program during the term of this agreement, the Contractor will perform the ks specified and implement a methodology for delivery of services. Please answer each of the lowing questions. You may use additional space as necessary, as this document will expand.
1.	Describe your program model. Specifically describe how your model and approach incorporate evidence-based practices. Provide examples and include program outlines or curricula.
2.	Describe your agency's process for conducting assessment/intake and any instruments you use. How do you determine appropriate placement of a probationer into a particular group environment/composition? How will you track attendance and co-payments?
3.	Describe your process for developing treatment plans and how you determine treatment goals and objectives. Please provide three examples of treatment plans.
4.	What quality assurance measures do you use regarding the delivery of services by agency staff?
5.	How does your organization define and measure client/probationer progress? How is it documented? What feedback do you provide the client/probationer?
6.	What practical application tools do you employ to facilitate client behavior change? How do you deal with particularly defensive, difficult, or cognitively distorted probationers?
	How do you assure agency communication with the probation officers regarding probationer's upliance issues, progress or specific concerns?

8.	Describe your process for discharge planning of a client and reintegration into the community (or reunification with family, if applicable). What aftercare and support do you encourage?
9.	How and when does your program involve family members, significant others or other community members or resources in the treatment process?
10.	Describe your process for identifying referring probationers with special/unique problems that your agency does not address to appropriate services in the community. Give an example of a client you have, or would, refer to another agency for services?
11.	How do you address clients who have co-occurring mental health disorders or other serious concurrent problems?
12.	What specialized treatment does your organization provide to those clients with cultural, language, developmental disabilities and/or other needs (for example, LGBTQ, deaf population, Spanish speakers, etc.)?
13.	Describe your understanding of the dynamics of sexual offending and how that understanding shapes your approach to sex offender treatment.
14.	Describe the benchmarks in your sex offender treatment program.
15.	How do you evaluate and manage a probationer's risk to re-offend?

16. How does your organization incorporate the use of physiological testing and other assessments in therapy?
17. How are victim issues/empathy dealt with in therapy?
18. Describe your chaperone training model.
19. How does your program distinguish itself from other sex offender treatment programs in the community?