VISION AND PRE-EMPLOYMENT MEDICAL EXAMINATIONS

I. INTRODUCTION
The Contractor shall provide vision, pre-employment medical (PEM) and other associated examinations (i.e. urine drug screening, etc.) for the California Department of Corrections and Rehabilitation (CDCR) peace officer candidates. These examinations and subsequent reports will form the basis of medical suitability assessment of all peace officer candidates. The Contractor shall conduct the examinations pursuant to guidelines provided by the CDCR and California Code of Regulations (CCR), Title 2, Administration and State Personnel Board Rules on Pre-employment Drug Testing.

II. CONTRACTOR’S RESPONSIBILITIES
The Contractor shall provide examination facilities that have:

- A valid CLIA certificate
- A current license in their respective state as required (California/Nevada)
- Compliance with the requirements of the California Business and Professions Code, Chapter 3

The Contractor shall provide physicians licensed (without any restrictions) to practice medicine in the area of practice (California/Nevada) or certified Physician Assistant’s, Family Nurse Practitioner’s, or Advanced Practitioner’s of Nursing under the direction of a California/Nevada licensed/unrestricted licensed Physician to conduct PEM examinations.

The Contractor shall provide Optometrists or Ophthalmologists with a current and valid license to practice optometry (California/Nevada) to conduct vision examinations. The Contractor may use an Optometrist interchangeably with Optometrist’s personnel, an Ophthalmologist, or Ophthalmologist’s personnel.

The Contractor shall notify candidates in writing of all scheduled examination appointments. Upon arrival to the appointment, the Contractor shall request that each candidate show a valid and current state issued driver’s license or identification card and vision or PEM Scheduling Notice to allow the candidate to proceed with the examination.

The Contractor shall report to the CDCR Program Manager, in writing, the resignation or dismissal of any key personnel essential to the successful operation of the contracted services, as well as proposed replacements and action plans describing the continuation of services. The Contractor shall obtain the CDCR approval of replacement staff prior to use. Failure of the Contractor to secure prior approval from the CDCR may nullify this agreement. This agreement may be terminated as specified in Exhibit D by the CDCR, if the replacement of key personnel is detrimental to the services as determined by CDCR.
If any personnel are unable to perform due to illness, resignation, or other factors beyond the Contractor's control; the Contractor shall immediately provide acceptable substitute personnel without any loss or delay of services at any time.

**Estimated Number of Examinations**

Based on current projections, it is estimated that up to 13,200 vision and 6,600 PEM examinations will be conducted throughout the duration of the agreement. On average, less than 50 percent of the CDCR vision examination candidates will proceed to the PEM examination; which the Contractor shall perform at a later date. All quantities are estimates only and cannot be guaranteed by the CDCR. Actual numbers may vary, depending on staffing needs.

Based on current estimates, the Contractor shall process up to 550 vision and 275 PEM examinations per month. In addition, if the CDCR peace officer hiring projections increase during the duration of this agreement, the Contractor shall increase its resources to meet the projected increase in candidate referrals for vision and PEM examinations within thirty (30) calendar days from date of CDCR notification.

Vision Examinations shall consist of:
- Visual Acuity Examination
- Color Vision Testing

PEM Examinations shall consist of:
- General Physical Examination
- Blood Specimen and Analysis
- IgG Varicella Blood Test
- Routine Urinalysis
- Urine Drug Screening
- Hearing Test
- Respirator Fit Testing
- Respirator Training and Evaluation

The Contractor shall be responsible for scheduling vision and PEM examination appointments. The Contractor shall conduct the vision and PEM examinations as independent processes/components; therefore, scheduled by the Contractor on two separate dates.

The Contractor shall examine the CDCR candidates within one (1) hour of their scheduled appointment time in a clean, safe, and stress-free environment. Additionally, only patients that have incurred an injury requiring immediate medical care may be seen before a CDCR candidate.

The Contractor shall conduct all vision and PEM examinations in a professional manner and in accordance with protocol established by the professional standard of practice and procedures delineated within this agreement. The Contractor shall be responsible for the results of vision and PEM examination reports prepared by personnel under the direct or indirect supervision of the Contractor. The Contractor shall not provide direct
patient care services/treatment vision or PEM examinations to the candidates not related to employment with the CDCR, unless approved in advance by the CDCR.

**Examination Facilities and Scheduling**

The CDCR shall electronically notify the Contractor of candidates requiring vision examinations by providing the candidates’ contact information. The Contractor shall contact the candidate and schedule an optometry appointment within three (3) business days from date of the CDCR referral to the Contractor. The Contractor shall call and leave a message (if necessary) for the candidate with an appointment date and time and a call back phone number. The Contractor shall also follow up with an electronic (i.e. e-mail) Vision Scheduling Notice to the candidate citing the date, time, location of the appointment, and name of the optometry provider. The Contractor shall conduct vision examination appointments within ten (10) calendar days of receiving the initial contact referral from the CDCR.

The CDCR shall electronically notify the Contractor of candidates requiring PEM examinations by providing the candidates’ contact information. The Contractor shall contact the candidate and schedule a PEM appointment within three (3) business days from date of the CDCR referral to the Contractor. The Contractor shall call and leave a message (if necessary) for the candidate with an appointment date and time and a call back phone number. The Contractor shall also follow up with an electronic (i.e. e-mail) PEM Scheduling Notice to the candidate citing the date, time, location of the appointment, and name of the Medical Evaluation Practitioner.

The below chart provides a visual illustration of the above mentioned candidate appointment scheduling timeframes. This process includes the initial contact with the candidate and one follow up call, if the Contractor did not personally speak to the candidate or have the ability to leave a message.

<table>
<thead>
<tr>
<th>Appointment Type</th>
<th>Schedule Timeframe</th>
<th>Required Candidate Contact</th>
<th>“No Shows”</th>
<th>Additional Exam or Documentation</th>
</tr>
</thead>
<tbody>
<tr>
<td>PEM</td>
<td>Three (3) business days from the date of the CDCR referral</td>
<td>Call the candidate to schedule appointment (or if necessary, leave voicemail with the date, time and location of appointment); provide return phone number for rescheduling purposes; and, e-mail scheduling notice to candidate</td>
<td>Notify the CDCR within two (2) calendar days from date of appointment if candidate is a “no show” for the appointment</td>
<td>Notify the CDCR within ten (10) calendar days from date of the appointment (if additional information or testing is required)</td>
</tr>
</tbody>
</table>
SCOPE OF WORK

<table>
<thead>
<tr>
<th>Appointment Type</th>
<th>Schedule Timeframe</th>
<th>Required Candidate Contact</th>
<th>“No Shows”</th>
<th>Additional Exam or Documentation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vision</td>
<td>Three (3) business days from the date of the CDCR referral</td>
<td>Call the candidate to schedule appointment (or if necessary, leave voicemail with the date, time and location of appointment); provide return phone number for rescheduling purposes; and, e-mail scheduling notice to candidate</td>
<td>Notify the CDCR within two (2) calendar days from date of appointment if candidate is a “no show” for the appointment</td>
<td>Notify the CDCR within ten (10) calendar days from date of the appointment (if additional information or testing is required)</td>
</tr>
</tbody>
</table>

Appointments may be rescheduled by the Contractor at the candidate’s request on a case by case basis and if a justifiable reason exists, such as active military duty, jury duty summons, hospitalization, pre-paid travel plans, mandatory attendance in job training, enrollment in a college class, or time off is not approved at candidate’s current job for the date and time of the appointment. The Contractor shall request documentation from the candidate for rescheduled appointments whenever possible and include it the final vision or PEM examination report provided to the CDCR. The CDCR may approve rescheduling of an appointment for other unforeseen circumstances. The criteria used to determine if a candidate’s appointment may be rescheduled shall not be disclosed to the candidates.

The Contractor’s scheduling notice shall instruct candidates to bring a copy of their vision or PEM Scheduling Notice to his/her vision or PEM appointment. The Contractor shall submit a copy of the Scheduling Notice with the final vision or PEM examination report to the CDCR.

The Contractor shall schedule the appointment at a facility within a 50 mile radius from the candidate’s residence or the closest facility to the candidate’s residence, unless the candidate requests another location. If the candidate chooses a facility that is not closest to his/her residence, the Contractor shall inform the candidate that he/she may need to return to that facility at a later date for additional testing.

The Contractor shall provide vision and PEM examinations and laboratory services at one or more facilities within the below specified cities and must submit a list of examination sites and addresses.

- Bakersfield
- Blythe
- El Centro/Brawley
- Eureka/Crescent City
- Fresno
- Los Angeles
- Rancho Cucamonga/Ontario
- Richmond/San Rafael
- Sacramento
- Salinas/Monterey
- San Diego/Temecula
- San Jose
- San Luis Obispo
- Susanville/Reno
The facilities in cities listed below must be located as follows:

**Eureka or Crescent City (choose only one)**
The facility must be located in California within a 30-mile radius of the city limits.

**Susanville or Reno (choose only one)**
Susanville - the facility must be located in California within a 30-mile radius of the city limits.

Reno - the facility must be located within a 40-mile radius (north or west, not east or south) of the city limits.

The Contractor shall provide facilities that are cleaned on a daily basis and comply with all applicable health and safety standards. The Contractor’s facilities shall provide a stress-free environment, clean restrooms, private dressing rooms, and a waiting area with available seating.

Stress-free shall be defined as an environment free of upsetting, mentally, or emotionally disruptive conditions that occur in response to adverse external influences and capable of affecting physical health, characterized by an increased heart rate, a rise in blood pressure, muscular tension, irritability, and depression.

**Vision Examinations**

The Contractor shall ensure compliance of all vision examination equipment, facilities, and procedures with the CDCR Vision Examination Protocol stated in the agreement. The Contractor shall be responsible for the correct set-up of vision facilities, including the proper level of lighting for the visual acuity and color vision examinations in accordance with the Vision Examination Protocol. The Contractor shall ensure that all forms pertaining to vision examinations are completed and signed by an Optometrist.

The Contractor shall conduct vision examinations to measure each candidate’s uncorrected and corrected visual acuity. The Contractor shall ensure that eye charts meet American National Standards Institute (ANSI) standard Z80.21 (1992). The Contractor shall conduct color vision examinations using the Ishihara Test for Color Blindness and if necessary, the Farnsworth D-15 Color Vision Test.

The Contractor shall conduct all visual acuity and color vision examinations in accordance with the Vision Examination Protocol.

**Visual Acuity Standards**

The Contractor shall adhere to the following vision standards, which are established as the minimum visual acuity levels required to perform the essential functions of the specified peace officer classifications:
Each candidate that has successfully worn soft contact lens for the past 12 months is not required to meet an uncorrected standard as long as their corrected vision is 20/20 in each eye.

The Contractor shall provide documentation that describes the uncorrected and corrected visual acuity examination results for each candidate (i.e. uncorrected vision: right eye, left eye, and both eyes; corrected vision: right eye, left eye, and both eyes). The Contractor shall record all visual acuity examination results on the Peace Officer Vision Verification form (POVV) form.

The Contractor shall ensure that each candidate’s uncorrected and corrected visual acuity is documented by the Optometrist. If the candidate’s visual acuity is not correctable to 20/20, the Contractor shall ensure the Optometrist specifies the reason. If the candidate is a soft contact lens wearer, the Contractor shall ensure the examining Optometrist obtains verification from the candidate’s personal Optometrist, and documents the candidate’s successful contact lens use over the past 12 consecutive months. If the candidate has had refractive eye surgery (such as Lasik), the Contractor shall ensure the Optometrist obtains verification from the candidate’s regular Optometrist, and documents the date of surgery. The Contractor shall document this information on the POVV form.

**Color Vision Standards**

The Contractor shall require candidates to pass a color vision test without the use of an X-Chrome lens or other colored filters. The Contractor shall ensure a two-stage procedure is utilized for the color vision examination, but only if the candidate is not successful during Stage 1 test.

The Contractor shall administer the Ishihara Test for Color Blindness to candidates, (Stage 1 test) and record all correct and incorrect responses on the POVV form. The Contractor shall administer the Farnsworth D-15 Color Vision Test (Stage 2 test) to all candidates who fail the Ishihara Test for Color Blindness. The Contractor shall ensure the Optometrist records the Farnsworth D-15 Color Vision Test results on the Farnsworth D-15 Color Vision Score Sheet, attaches the POVV form, and forwards the documents to the CDCR.
TWO STAGES OF COLOR VISION TESTING

<table>
<thead>
<tr>
<th>Stage 1 Test</th>
<th>Ishihara’s Test for Color Blindness</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage 2 Test</td>
<td>Farnsworth D-15 Color Vision Test</td>
</tr>
</tbody>
</table>

Equipment:

The Contractor shall provide the following equipment at each vision examination facility:

- Vision Screening Forms
  - Vision Testing Score Sheet (OPOS 07B)
  - Peace Officer Vision Verification form (OPOS 07C)
  - Farnsworth D-15 Color Vision Test Score Sheet
- Desk Lamp with Verilux Full Spectrum Illuminant “C” (#F15T8/VLX) bulb
- Replacement Verilux Full Spectrum Illuminant “C” (#F15T8/VLX) bulb(s)
- Farnsworth D-15 Color Vision Test (complete with 15 colored caps)
- Lamp with 100-watt bulb
- Replacement 100-watt bulb(s)
- Ishihara Test for Color Blindness
- Gossen Pilot II light meter
- Penlight
- Soft paint brush
- Latex or vinyl gloves (small and large sizes)
- Phoropter
- Eye charts with Snellen letters

Test Conditions:

The Contractor shall provide the following vision examination conditions:

1. Monocular testing should precede binocular testing.
2. A phoropter must be used when determining and measuring each candidate’s visual acuity.
3. Eye charts must be placed at optical infinity (20 feet or 6 meters).
4. Lighting levels must be checked using the Gossen Pilot II Light Meter. The light meter should also be used to check the lighting level prior to test administration. Candidates should not face an open window while reading the chart, as this could produce glare and invalidate the results.
5. Ishihara Test for Color Blindness (Stage 1) includes 14 color plates. The test must be given by an Optometrist using Plates 1 through 11. (Do not use plates 12, 13, and 14.) For Plates 1 through 10, the candidate shall be asked to read the number
he/she sees—if any. Plate 11 involves tracing a dotted line from one X to another X.

6. The Farnsworth D-15 Color Vision Test (Stage 2) must be conducted in a room in which the only source of light is a desk lamp with a specialized bulb called the Verilux Full Spectrum Illuminant “C” (#F15T8/VLX). No other lights or light sources, such as windows shall be used.

7. Handling and storage of the Ishihara Test for Color Blindness plates and Farnsworth D-15 Color Vision Test caps must not be touched by the ungloved hand. Body oils, dirt, and scratches can alter the appearance of the color plates and color caps; which may produce invalid test results. Special care must be taken to ensure that none of the color vision tests are exposed to direct sunlight or other sources of strong lighting for prolonged periods of time.

**Vision Examination Protocol**

The Contractor shall implement the following protocol for each vision examination:

1. Prior to beginning the examination, the Optometrist must check both eyes of the candidate with a red beam penlight and magnifying glass for the presence of contact lenses.

2. Before any visual acuity examination begins, candidates wearing contact lenses must be instructed to remove them and given time for their eyes to adjust. At the time an appointment is being scheduled, candidates should be instructed not to remove their contact lenses prior to arriving to the optometry appointment.

3. The uncorrected visual acuity examination must be administered before the corrected visual acuity examination.

4. A phoropter must be used by the Optometrist when determining each candidate’s visual acuity. Standardized charts and methods must be utilized to avoid erroneous measurements.

5. The Contractor shall provide the following information on the POVV form:
   - Candidate’s uncorrected and corrected visual acuity
   - If the candidate’s vision is correctable to 20/20
   - If the candidate has had refractive eye surgery (i.e. Lasik)
     - If so, the date of surgery must be verified and documented.
   - If the candidate is a contact lens wearer
     - If so, it must be verified and documented whether the candidate has been a consistent contact lens wearer for the past twelve (12) consecutive months.

**Stage 1 Color Vision Examination – Ishihara Test for Color Blindness:**

1. The Contractor shall administer the Ishihara Test for Color Blindness to all candidates. Prior to beginning the test, the Contractor shall check the candidate’s
eyes with a red beam penlight and magnifying glass for the presence of contact lenses, especially the X-chrome lens. The Contractor shall not allow candidates to wear tinted contact lenses or glasses during the color vision examination. The Contractor shall allow candidates to wear non-tinted contact lens or glasses during the Ishihara Test for Color Blindness test.

2. The Contractor shall ensure that candidates are standing or seated at the color vision examining table with the Ishihara Test for Color Blindness booklet located at a comfortable reading distance. The Contractor shall instruct candidates to use both eyes during the examination as follows:

   “I am going to show you some color plates that contain a large group of dots. Some of the dots may form colored numbers that ‘stand out’ from the rest of the dots. I would like you to tell me the number that you see. Every plate does not necessarily have a number written on it. All figures on the plates are numbers rather than letters or shapes. The last plate requires you to trace along a dotted line between two symbols.”

3. The Contractor shall record correct and incorrect responses for each color plate on the Vision Testing Score Sheet.

4. The Contractor shall correctly identify a passing score of 8 out of 11 plates for successful candidates.

5. The Contractor shall immediately administer the Farnsworth D-15 Color Vision Test (Stage 2) to candidates who fail the Ishihara Test for Color Blindness (Stage 1).

Stage 2 Color Vision Examination – Farnsworth D-15 Color Vision Test:

1. The Contractor shall administer the Farnsworth D-15 Color Vision Test only to those candidates who fail the Ishihara Test for Color Blindness (Stage 1 test).

2. To avoid contamination of the surfaces of the color caps used in the Farnsworth D-15 Color Vision Test, the Contractor shall instruct candidates to grasp only the black sides of the color caps and avoid touching the colored central region.

3. Prior to each examination, the Contractor shall ensure proper handling of the Farnsworth D-15 Color Vision Test box, transfer the 15 removable color caps to the table (one color cap is not removable and remains inside the box), scramble the caps, and place them in random order in front of the candidate. The Contractor shall ensure that candidates are unable to see the numbers on the underside of the color caps.

4. The Contractor shall instruct candidates to be seated at the color vision table, opposite the Optometrist. The Contractor shall provide a source of Illuminant “C” at the table to ensure proper lighting for the test. The Contractor shall prevent extraneous light sources in the examination area. The Contractor shall instruct the candidate to use both eyes during the Farnsworth D-15 Color Vision Test.

5. The Contractor shall provide the candidate with a brief explanation of the examination as follows:
6. During the explanation of the test, the Contractor shall ensure that relevant testing components are clearly identified to the candidate (i.e. reference cap, location to place color caps in box, etc). The Contractor shall promptly respond to candidate questions regarding the test procedure. The Contractor shall refrain from offering information that might provide hints or clues to the candidate during the examination. The Contractor shall ensure that candidates are only allowed four minutes to complete the examination.

7. When the arrangement of color caps is complete, the Contractor shall ensure that the box containing the color caps is closed and turned upside down. The Contractor shall score and record all test results on the Farnsworth D-15 Color Vision Score Sheet. The Contractor shall complete the scoring away from the candidate’s view.

8. The Contractor shall graph the arrangement of color caps on the circular chart (Farnsworth D-15 Color Vision Test Score Sheet) labeled “Test” on the lower half of the scoring sheet. Beginning with the reference cap, the numbers on this chart are connected in a dot-to-dot fashion, using the candidate’s arrangement order as the sequence used to connect the numbered dots on the chart. A correct ordering of the caps will produce a circular or C-shaped pattern drawn on the chart (Exhibit A-1).

9. The Contractor shall record examination results for the Farnsworth D-15 Color Vision Test as a “Pass” or “Fail” on the Farnsworth D-15 Color Vision Score Sheet. The criterion for “Pass” or “Fail” is referenced on the chart (Exhibit A-1).

10. The Contractor shall immediately allow one retest for candidates who fail the Farnsworth D-15 Color Vision Test.

   The Contractor shall notify the CDCR of each candidate’s visual acuity and color vision examination results. The Contractor shall not inform candidates whether they have passed, failed, or were disqualified on their visual acuity examination or color vision test.

   The Contractor shall provide vision examination reports that clearly identify if the candidate meets the CDCR visual acuity and color vision standards, but the decision to appoint the candidate to a peace officer classification will be made by the CDCR, based on the information obtained from the Contractor. The Contractor shall not make job offers, promises of employment, or disqualify any candidate.

   The Contractor shall review, complete, and sign every examination form and report prior to submitting the documents to the CDCR.
The Contractor shall retain copies of all vision examination records and reports for a period of three (3) years after the Agreement expires. The Contractor shall establish a Record Retention Plan to confidentially shred candidate medical records and data after three (3) years in accordance with the State’s Record Retention Schedule. The Contractor’s Record Retention Plan shall include information regarding the transition of records and data to a successor, and specify steps the Contractor will take after termination of the Agreement to continue to provide data and assistance to a successor for a time period not to exceed six (6) weeks after the termination date of this Agreement. The Contractor shall submit the Record Retention Plan to the CDCR for approval and provide updates as requested by the CDCR during the term of the Agreement.

PEM Examination

The Contractor shall provide a same-gender attendant during all PEM examinations. If a same-gender attendant is not available, the Contractor shall offer the candidate an option to reschedule the examination without penalty or continue the examination with the available examination personnel.

The Contractor shall provide each candidate with a hospital gown to wear during the PEM examination. During the hands-on physical portion of the examination and urine sample collection, the Contractor shall instruct candidates to remove all articles of clothing under the gown, except undergarments.

The Contractor shall provide a Physician or Licensed Health Care Provider (PLHCP) to conduct PEM examinations prior to the urine specimen collection. The Contractor shall ensure that documents pertaining to urine collection and consent for drug testing is not signed until after the PEM examination.

The Contractor shall conduct a general PEM examination of all systems on each candidate which shall include: auscultation of heart and lungs, examination of eyes, ears, nose, mouth, throat, nervous system, chest, abdomen (including palpitation for hernia in males), neck, spine, range of motion, rectum, and visual examination of genitalia (see below for exception), skin, and lymphatic areas. The Contractor shall obtain blood pressure, pulse rate, height, and weight measurements of candidates and record the data on the Report of Peace Officer Medical Examination (RPOME). The Contractor shall document and describe each candidate’s significant history, responses, and any abnormalities found in the PEM examination on the PEM examination report, including:

- Chronic skin disease
- Large scars which may incapacitate and disfigurements to any degree that could impede a candidate’s ability to perform the job of a CDCR peace officer
- Previous surgical procedures or violent interactions
- Birthmarks, significant moles, or tattoos
- Nervous system disorders (i.e. tremors)
- Physical deformities (i.e. missing digits, abnormalities of the extremities, spinal defects) and any defects that would prohibit the candidate from performing duties of a CDCR peace officer, or limit range of motion, and/or require medical attention
• Stammering, stuttering, aberrant behaviors, psychiatric observations, symptoms of mental illness, emotional disturbances, and/or other pertinent findings observed upon examination

The candidate may decline to have the genitalia and rectum examined by the PLHCP. If the candidate requests to have his/her personal physician provide this information, the candidate will be responsible for examination fees assessed by his/her personal physician. The Contractor shall retrieve, document, and include this information in the final PEM report.

The Contractor shall document the presumed nexus between the aforementioned conditions and the candidate’s presumed ability to perform the essential functions of the CDCR peace officer.

**Examination Forms**

- Chain of Custody for Drug Analysis
- All required Laboratory Reports
- Quantitative Respirator Fit Test Results

The Contractor shall provide a comprehensive and in-depth evaluation of the candidate for each PEM examination, focusing on his/her health as a determinant factor of the candidate’s ability to perform the essential functions of the peace officer classification. The contents of these forms may be revised by the CDCR at any time and changes will be provided to the Contractor. The Contractor shall provide the “Peace Officer Health Questionnaire” (POHQ) to candidates to complete prior to the appointment and inform candidates to bring the completed document with them when they appear for their PEM examination. The Contractor shall collect and attach to the POHQ, any medical reports provided by the candidate’s personal treating physician(s) or PLHCP relating to past or current injuries or illnesses. The Contractor shall complete and return the RPOME to the CDCR, along with the candidate’s completed POHQ and relevant attachments, in the final PEM report.

The Contractor shall utilize the Peace Officer Essential Functions (Exhibit A-2) to complete the RPOME, as the criteria for answering the questions under Item 8 of the RPOME. The Contractor shall become familiar with this document and have it readily available during PEM examinations. The Contractor may request training from the CDCR regarding the completion of required forms, as needed.

The Contractor shall complete all questions on the RPOME and provide PEM examination findings and recommendations to the CDCR, regarding a candidate’s fitness for duty. Once completed, the Contractor shall verify the examination dates and sign the RPOME in the designated areas.

The Contractor shall provide PEM examination findings and recommendations to the CDCR, regarding a candidate’s fitness for duty based on job requirements outlined in the Peace Officer Essential Functions. The Contractor shall evaluate laboratory and medical reports submitted by the candidate in conjunction with personal observation and conclusions and document any limitations, conditions, or surgeries that would
reasonably prohibit the candidate from performing duties of the peace officer classification. In cases where a candidate is recovering from or must have surgery, or under treatment for any other condition that requires medical follow up; the Contractor shall document the date that the candidate will likely be ready for duty and include this in the final PEM report. If no abnormalities are noted, the Contractor shall document this information on the PEM examination report, which will form the basis of the candidate’s medical qualification for employment. The Contractor shall address any reported past injuries or significant illnesses with the candidate and document any continuing limitations that could reasonably prohibit the candidate from performing the duties of a peace officer classification. The Contractor shall complete a final review of the medical documents to ensure accuracy, completeness, and provide any necessary clarification of medical/physical data. The Contractor shall certify whether the candidate meets the fitness for duty based on job requirements outlined in the Peace Officer Essential Functions.

The Contractor shall review all PEM examination documents for completion and sign PEM examination reports prior to submitting to the CDCR.

The Contractor shall retain copies of all medical records and reports for a period of three (3) years. The Contractor shall establish a Records Retention Plan to confidentially shred candidate medical records and data after three (3) years in accordance with the State’s Record Retention Schedule. The Contractor’s Records Retention Plan shall also include information regarding the transition of records and data to a successor, and specify steps the Contractor will take after termination of the agreement to continue to provide data and assistance to the successor for a time period not to exceed six (6) weeks after the termination date of this Agreement. The Contractor’s Record Retention Plan shall be submitted to the CDCR for approval and provide updates as requested by the CDCR during the term of the Agreement.

While the PEM examination report is the foundation on which the basis of a candidate’s medical readiness for peace officer employment is based, the final decision as to whether the candidate is ultimately to be appointed to a peace officer classification will be made by the CDCR, based on medical information obtained from the Contractor. The Contractor shall not make job offers or promises of employment or disqualify any candidates.

**Blood Specimen and Analysis**

The Contractor shall include a complete blood count, blood chemistry panel (14 SMAC), Lipid panel, Immunoglobulin G (IgG) Varicella blood test, and Venereal Disease research Laboratory test for all PEM examinations.

If a blood specimen cannot be analyzed due to spillage, breakage, hemolysis, etc., the Contractor shall incur the cost of obtaining another specimen.

**IgG Varicella Blood Test**

The Contractor shall conduct an IgG Varicella Blood Test according to Current Procedural Testing Code 86787, and provide the CDCR with the results.
The Contractor shall provide test documentation in the final PEM examination report and forward to the CDCR within the timeframes specified herein.

**Routine Urinalysis and Urine Drug Screening**

The Contractor shall include a routine urinalysis evaluation for all urine specimens. The Contractor shall follow a strict Chain of Custody protocol for urine specimens for drug screening and ensure that drug testing meets all State Personnel Board Rules on Pre-Employment Drug Testing (Title 2, California Code of Regulations, Section 213).

The Contractor shall adhere to the Chain of Custody protocol as follows:

1. Immediately prior to specimen collection, the candidate shall undergo a hands-on physical examination in which the candidate wears a hospital gown with no other articles of clothing on under the gown, except underwear.

2. While still wearing the hospital gown, an unobserved specimen is collected in a prepared bathroom where the commode water is colored, hot water is off (and cannot be turned on by the candidate) and soap has been removed. Upon receiving the specimen container from the candidate, it is to be checked by medical staff to assure non-contamination by cold water. NOTE: Minimum specimen required is 50 cc. Purses taken to the bathroom must be left in plain view of the door.

3. A label containing the following information shall be filled out by (or initialed by) the candidate and applied to the urine bottle:
   a) Candidate’s name and ID number
   b) Social Security Number
   c) Date
   d) Account number

4. The presiding technician shall place one piece of evidence tape on the cap and sides of the urine bottle. The candidate shall initial the evidence tape on top of the cap.

5. A laboratory request form and Chain of Custody form must be completed and signed.

6. Transport of specimen to laboratory must follow strict “Chain of Custody” protocol.

The Contractor must conduct the drug screen examination by Immunoassay screening. All positive tests must be confirmed by Gas Chromatography/Mass Spectrometry. All confirmed positive specimens and related records must be retained by the laboratory for at least one (1) year or until all related appeals or litigation are concluded, whichever is longer.

The Contractor shall provide retesting of any candidate at the CDCR’s request. Upon notification by the CDCR of any candidate appeals or litigation, the Contractor shall provide retesting of confirmed positive specimens by any laboratory authorized to conduct drug testing at the candidate request and expense.
The Contractor shall ensure that respective samples collected have not been diluted or adulterated by including the respective Creatinine levels for each candidate’s sample. If the sample collected is diluted or adulterated, the Contractor shall collect an observed sample from the candidate no later than five (5) business days from date of receipt of diluted or adulterated results.

The Contractor shall provide a copy of the Chain of Custody form on all drug screens along with the original laboratory report. The Contractor shall test for five drugs utilizing the below cutoff levels:

<table>
<thead>
<tr>
<th>Drug</th>
<th>Immunoassay Screening (ng/ml)</th>
<th>CG/MS Confirmatory Testing (ng/ml)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amphetamine/Methamphetamine</td>
<td>1,000</td>
<td>500</td>
</tr>
<tr>
<td>Cannabinoids</td>
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<td>15</td>
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<tr>
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<td>150</td>
</tr>
<tr>
<td>Opiates</td>
<td>300</td>
<td>300</td>
</tr>
<tr>
<td>Phencyclidine</td>
<td>25</td>
<td>25</td>
</tr>
</tbody>
</table>

**Hearing Examination**

The Contractor shall provide a certified audio logical technician (certified occupational hearing conservationist); a certified nurse technician; a certified audiologist; or an Ear, Nose, and Throat physician to perform the candidate’s Hearing In Noise Test (HINT). The Contractor shall administer the HINT in four test conditions; Quiet, Noise Front, Noise Right, and Noise Left using the automated computer-based HINT test instrument with the applicable TDH-39 headphones. Testing should be done in a sound room that meets current ANSI specifications; although a quiet room without visual distractions is acceptable if a sound room is not available. The Contractor shall conduct the complete headphone assessment protocol within 30 minutes and regularly calibrate the audiometer to the most current ANSI standard. The Contractor shall conduct all hearing tests in a suitably quiet space to assure valid measures at the designated test levels.

Prior to the PEM appointment, the Contractor shall advise candidates that 12 hours preceding administration of the hearing screening protocol, they are required to have no exposure to loud noise of any kind. The Contractor shall administer the HINT test conditions according to the following protocol.

1. Read the written instructions from the HINT User Manual to the subject and answer any questions the subject may have about the test.
2. Position the headphones on the subject and inform the subject that testing will begin with a practice test.
3. Administer an entire 20-sentence practice test in the Quiet condition.
4. Answer any further questions the subject has after the practice test.
5. Administer an entire 20-sentence test list in the Quiet condition.
7. Inform the subject that three different tests in noise will be administered.

8. Administer an entire 20-sentence test list in the Noise Front condition.

9. Administer an entire 20-sentence test list in either the Noise Right or Noise Left condition.

10. Administer an entire 20-sentence test list in the remaining test condition (Noise Right or Noise Left).

The test instrument automatically selects a different sentence list each time a test is performed. The Contractor shall always utilize this method of list selection with each test. The test instrument will automatically display the Speech Reception Threshold (SRT) for each test condition and the Composite SRT.

**Examination Equipment**

1. The Contractor shall conduct examinations in a sound room that meets current ANSI specifications. A quiet room without visual distractions is acceptable if a sound room is not available.

2. The Contractor shall use pure tone audiometers for screening examinations that are manufactured to meet or exceed specifications for wide range audiometers as defined by ANSI Section 3.6-1969 and maintained to meet such specifications.

3. The Contractor shall use non-battery operated pure tone audiometers for hearing examinations.

4. The Contractor shall train audiometric examining personnel in the proper care of the examination equipment.

5. The Contractor shall conduct a brief biological check of the audiometer each day that the equipment is used. The check shall consist of testing each earphone on a person with stable audiometric thresholds that do not exceed 25 dB hearing level at any frequency between 500 Hz and 8000 Hz and comparing the examination results with the subject's baseline audiogram. The subject may be the Audiologist. Deviations of 10 dB or greater shall require an acoustic calibration.

6. The Contractor shall conduct a monthly detailed biological check of the audiometer equipment, which includes a careful listening test of earphones to ensure that the audiometer displays no evidence of cross talk, signal distortion, transient clicks, abnormal noise, or intermittent signal.

Test results obtained with an instrument that has not been calibrated within the last year are not acceptable and must to be repeated at the Contractors expense.

**Examination Equipment Calibration**

- The Contractor shall check the audiometer equipment calibration at each frequency (i.e. 500 Hz, 1000 Hz, 2000 Hz, 3000 Hz, 4000 Hz, 6000 Hz, and 8000 Hz)
acoustically every three (3) months to determine if the equipment meets ANSI specifications. Deviations of 15 dB or greater necessitate calibration.

- The Contractor shall calibrate the audiometric equipment to ANSI Section 3.6-1969 specifications when equipment is placed in service and at least once a year afterward. The Contractor shall meet ANSI specifications for all test frequencies. The Contractor shall maintain a calibration log and store it with the equipment.

Hearing Screening Criteria

Two (2) hearing screening criteria based on the HINT Composite SRT measured in noise and the SRT measured in Quiet are specified below. The Contractor shall adhere to a screening criterion in a HINT Composite SRT of -4.0 dB SNR or less.

- **The screening criterion defined by the Composite SRT in noise** is based on the need for effective speech communication in the background noise environments, where hearing-critical job functions are performed throughout a Correctional Officer's routine day and during responses to incidents. The screening criterion for speech communication in noise may also be expressed as a HINT composite threshold of 71 dB (A) or less.

- **The hearing screening standard for speech communication in Quiet** is based on the average level of soft or whispered speech heard at a short distance (30 dB). The hearing screening criterion for speech communication in Quiet is a HINT SRT of 27 dB (A) or less.

*Over 99% of ontologically normal individuals are also expected to obtain passing scores with these screening criterions.*

Candidates who fail to meet either or both of the screening criteria may elect to be retested. The Contractor shall immediately administer a retest to only those candidates who meet the fail criteria.

The below flowchart summarizes the retesting procedure that the Contractor shall follow when evaluating candidates:
If the candidate fails the SRT, the Contractor shall advise him/her that auditory prostheses are necessary in order to proceed with the hearing examination. When this occurs, the Contractor shall notify the CDCR within one (1) business day. The Contractor shall re-test the candidate at no cost after he/she has been tested and fitted for auditory prostheses by his/her personal physician. The Contractor shall not solicit nor oblige the candidate in any way for the purchase of auditory prostheses, which may be required for him/her to continue in the examination.

Please note: The cost of testing and fitting auditory prostheses shall be at the candidate’s expense.

Supplemental Screening Protocol (for candidate’s with auditory prostheses)

The Contractor shall provide a supplemental screening administered by an audiologist experienced with the type of auditory prostheses used by the candidate. The Contractor shall administer the supplemental screening protocol for candidates with auditory prostheses as follows:

The below flowchart summarizes each step in the supplemental screening procedure:

**Headphone Screening**

Prior to administration of the HINT screening protocol, the Contractor shall ensure that the candidate’s auditory prostheses are functioning properly and adjusted to the physiologically appropriate settings. If the candidate meets the hearing screening criteria when tested with the basic protocol using the TDH-39 headphones, the Contractor shall then administer the helmet check. The Contractor shall retest candidates who fail to meet either or both of the screening criteria. If the candidate passes the retest, the Contractor shall then administer the helmet check. If the candidate fails the retest, the
Contractor shall identify the candidate with a reject status. The helmet check is used to determine whether the helmet can be donned without dislodging the auditory prostheses and determine whether they continue to function properly without acoustic feedback when worn under the helmet. If both of these conditions are satisfied, the candidate is accepted. If either or both of the conditions are not satisfied, the Contractor shall not permit the candidate to proceed further in the examination.

The CDCR shall provide the Contractor with the helmet required for testing. The Contractor shall be responsible for the maintenance, inventory, and operational handling of the helmet throughout the duration of the Agreement. The Contractor shall return the helmet in good quality condition to the CDCR within five (5) business days of the Agreement termination date.

The decision to appoint the candidate to a peace officer classification shall be made by the CDCR, based on the information obtained from the Contractor. The Contractor shall not make job offers, promises of employment, or disqualify any candidate.

**Sound Field Screening**

The Contractor shall provide sound field testing by an audiologist experienced with the type of auditory prostheses used by the candidate at a facility with a sound room large enough to conduct the screening protocol in the sound field. The Contractor shall ensure that the candidate’s auditory prostheses are functioning properly and adjusted to the physiologically appropriate settings. The Contractor shall provide documentation to verify that the loudspeakers in the sound room have been calibrated within the last year and the HINT norms have been appropriately adjusted for sound field testing, along with the printed report summarizing the test results.

In the event that a candidate with an auditory prosthesis cannot be tested with the headphones due to acoustic feedback caused by the headphones, the Contractor shall administer the test to the candidate in the sound field using loudspeakers rather than headphones. Sound field HINT testing is done with the same protocol as headphone HINT testing. The Contractor shall subsequently administer the helmet check to candidates who meet both of the screening criteria during the initial sound field HINT tests. The Contractor shall immediately retest candidates who fail to meet either or both of the screening criteria. If the candidate passes the retest, the Contractor shall then administer the helmet check. If the candidate fails the retest, the Contractor shall indentify him/her with a reject status.

The Contractor shall adhere to the same screening criterion for the sound field HINT as the Quiet SRT of 27 dB (A) or less. However, the criterion for the composite SRT must be based on the adjusted sound field Composite SRT and not on the headphone Composite SRT. The adjusted criterion is defined as the SNR 2.4 dB above the adjusted sound field Composite HINT norm. The HINT test instrument automatically incorporates adjustments to the sound field norms after data input to achieve the appropriate adjustments. If the Quiet or Composite SRTs measured in a sound field fail to meet the screening criteria, the Contractor shall administer a retest to the candidate in the sound field. If either criterion is not met during retesting, the Contractor shall identify the candidate with a reject status. If the sound field Quiet and Composite SRTs meet the screening criteria, either on the initial test or retest, the Contractor shall administer a

-19-
helmet check to the candidate as described above. If the helmet can be donned without dislodging the auditory prostheses and continue to function properly under the helmet, the Contractor shall identify the candidate with an accepted status. If either or both of the conditions are not satisfied, the Contractor shall not permit the candidate to proceed further in the examination.

The decision to appoint the candidate to a peace officer classification shall be made by the CDCR, based on the information obtained from the Contractor. The Contractor shall not make job offers, promises of employment, or disqualify any candidate.

**Reporting Requirements**

The Contractor shall provide two (2) HINT test reports (Narrative and Custom) to the CDCR for each candidate. The Narrative Report summarizes the candidate’s test results and gives information as to whether the candidate met the screening criteria. The Custom Report gives details about the candidate, test conditions, and equipment calibration information. The Contractor shall ensure inclusion of the following options in the Narrative Report: basic demographic information, test site, equipment calibration information, HINT scores in tabular form, and details of each test condition.

The Contractor shall provide electronic and printed reports summarizing the test conditions and results, as well as information about the calibration of the instrument after each candidate is tested.

**Respirator Fit Training Testing**

The Contractor shall perform Respirator Fit Training Testing tasks and assume full responsibility for services performed. The Contractor shall perform services in accordance with state laws and regulations.

Services are to be performed in compliance with CCR Title 8, Subchapter 7, § 5144 (General Industrial Safety Orders for Respiratory Protection), CCR Title 8, Subchapter 7, § 5198 (General Industrial Safety Orders for Lead), CCR Title 8, Subchapter 4, § 1532.1 (Construction Safety Orders for Lead), CCR Title 8, Subchapter 7, § 5208 (General Industrial Safety Orders for Asbestos), CCR Title 8, Subchapter 4, § 1529 (Construction Safety Orders on Asbestos), CCR Title 8, Subchapter 7, § 5192 (General Industrial Safety Orders for Hazardous Substances), CCR Title 8, Subchapter 7, § 5199 (Aerosol Transmissible Diseases), and CCR Title 8, Subchapter 7, § 5097 with Appendices B, C, D, & F (General Industrial Safety Orders for Occupational Noise) Audiometric Testing.

1. Equipment:

   The Contractor shall provide all equipment necessary to perform Respirator Fit examination such as:

   - TSI Inc. Model 8020 Portacount Plus Revision A system
   - TSI Inc. Model 8095 N95-Companion
   - TSI Inc. Portacount system software (programmed to report individual test exercise fit factors and the overall fit factor)
• MSA Advantage 1000 and 3000 APR (small, standard, and large sizes)
• 3M 8210/8210 Plus Cup Style, one size fits all
• Sperian One fit, flat fold, health - 1 Size

The Contractor shall conduct quantitative Respirator Fit Training testing with the Model 8095 N95-Companion, Model 8020 Portacount Plus Revision A system, manufactured by TSI Incorporated, or with a more recently modified version of the Portacount system from the same manufacturer. The Contractor shall conduct Respirator Fit Training testing in a small-enclosed area. The Portacount system relies on the maintaining of airborne particles concentration. If these concentrations cannot be achieved, the Contractor shall use a Model 8026 Particle Generator (a component of the Model 8095 N95-Companion). The Contractor shall purchase the number of Portacount systems it deems necessary to meet the demand. The Contractor shall send each Portacount system to the manufacturer annually for calibration. The Contractor shall sanitize the Respirator Fit Training testing equipment after each fit test.

2. Respirator Fit Testing

The Contractor shall provide the MSA Advantage 1000 and MSA Advantage 3000 (small, standard and large) APR respirator models (i.e. 3M 8210/8210 Plus Cup Style, Sperian One fit, flat fold, health - 1 size, one size fits all) and adaptors for fit testing of candidates. The Contractor shall fit test the MSA Advantage 1000 and MSA Advantage 3000 standard size respirators first, unless there is a clear indication that the standard size is not an appropriate fit for the candidate. If the candidate requires additional fit tests, the Contractor shall determine the appropriate size of the MSA Advantage 1000 respirator to conduct the fit test effectively. The Contractor shall conduct any additional APR respirator fit testing at the Contractor’s expense.

3. Training of Personnel

The Contractor shall provide an Industrial Hygienist (IH), who is knowledgeable in respirator fit testing to train all personnel conducting fit testing with the Portacount system. In addition, the Contractor shall provide a TSI Incorporated representative to conduct onsite training for the IH and each individual conducting fit testing with the Portacount system, on setting up and using the equipment.

4. Fit Testing Exercises

Before a fit test, the Contractor shall ensure that each respirator offered to the candidate is comfortable. The Contractor shall allow the candidate to independently don the respirator and instruct the candidate to wear the respirator for five (5) minutes before the start of the fit test. Prior to the commencement of the fit test, the Contractor shall provide each candidate with a description of the fit test, including a description of the examination exercise and the candidate’s responsibilities during the procedure. During the fit testing procedure, the
Contractor shall instruct the candidate to perform the following six exercises while in a standing position:

- Normal breathing for 1 minute
- Deep breathing for 1 minute
- Slowly turn head from side to side and inhale at the extreme positions for 1 minute
- Slowly move head up and down and inhale in the up position for 1 minute
- Speak and read aloud or count backwards from 100 for 1 minute
- Normal breathing for 1 minute

5. Pass Criterion

The Contractor shall pass candidates who have an overall fit factor above 100, where the overall fit factor is the harmonic mean of the fit factors obtained for each of the six exercises:

\[
\frac{1}{FF1} + \frac{1}{FF2} + \frac{1}{FF3} + \frac{1}{FF4} + \frac{1}{FF5} + \frac{1}{FF6} + \frac{1}{FF7} + \frac{1}{FF8}
\]

The Portacount system software is usually programmed not to report the individual test exercise fit factors. The Contractor shall provide software that is programmed to report individual test exercise fit factors and the overall fit factor.

The Contractor shall provide the candidate and the CDCR with written documentation of each completed fit test to include the candidate’s name and identifying information such as: date of fit test, overall fit factor, the specific respirator used (i.e. manufacturer, model number, NIOSH testing and certification number, and size), name of individual who administered the examination and fit tested the equipment, and his/her signature. If the candidate’s initial fit test is unsuccessful (i.e. obvious/correctible problems in fit detected), the Contractor shall provide one additional opportunity for the candidate to be retested with the same respirator.

**Respirator Use Training**

This portion of testing and related methodologies and accommodations are under active consideration at this time. Updates may be forthcoming. Upon any changes, the Contractor shall immediately be notified by the CDCR in writing. The Contractor shall furnish all labor, materials, training, supplies, equipment, and every other item of expense necessary to perform Respirator Training and Evaluation Services in accordance with Title 8, CCR, Section 5144 and Code of Federal Regulations 1910.134. The Contractor shall not delay any candidate’s PEM examination due to non-availability of either onsite equipment or personnel qualified to perform the examination. The Contractor shall provide competent personnel and maintain the requisite equipment to perform the examination services. The Contractor shall not
require candidates to drive in excess of the established distance parameters for Respirator Fit Testing.

If at any point prior to beginning the Respirator Fit test, a candidate states that he/she cannot participate in a portion of the PEM examination for any reason, the testing is to cease and the CDCR is to be contacted immediately, so that the feasibility of reasonable accommodation can be assessed and/or offered wherever possible.

The CDCR Contact Information:
- Lisa Hoffman, Staff Services Manager I - (916) 255-3843
- Anatole Moore, Staff Services Manager II - (916) 255-3835
- Jennifer Jordan, Assistant Chief - (916) 255-3305

The Contractor and the candidate will be informed by the CDCR of the decision and any possible accommodations as soon as all factors have been assessed.

In the case of out-of-state candidates, if the Contractor’s respirator fit equipment is not available on the day of the candidate’s examination, the Contractor shall arrange for respirator fit testing to be done near the candidate’s place of residence. Should the out-of-state candidate be unable to complete the Respirator Fit Testing at the time of their scheduled exam due to no fault of the Contractor, it will be the candidate’s responsibility to return to California to complete the test.

The Contractor shall provide each candidate with a Respiratory Protection Evaluation Questionnaire (RPEQ). The Contractor shall instruct candidates to bring a completed RPEQ to their PEM examination appointment.

The Contractor shall provide the following services:

1. Evaluate responses from the RPEQ completed by the candidate prior to respirator fit testing.

2. Perform any follow-up testing deemed necessary by the PLHCP prior to respirator fit testing (follow-up testing should be conducted on the day of the PEM examination and prior to any respirator fit test).

3. Provide a written recommendation regarding the candidate’s ability to use a full-face or air-purifying respirator (APR) by completing the Respirator Clearance and Medical Clearance for Respirator Use forms.

The Contractor shall provide the written recommendations to the CDCR based on the candidate’s ability to use all four of the below respirators. The CDCR reserves the right to amend the respirator type and model.

- MSA Advantage 1000 Respirator
- MSA Advantage 3000 Respirator
- 3M 8210/8210 Plus Cup Style, one size fits all
- Sperian One fit, flat fold, health - 1 Size
The Contractor shall provide training to all candidates prior to being fit tested. This training shall, at minimum, consist of the following:

1. Explain and demonstrate how to inspect, put on, remove, use, and check the seals of the respirator.
2. Explain and demonstrate the limitations and the capabilities of the respirator.
3. Explain and demonstrate why the respirator is necessary and how improper fit, usage, or maintenance can compromise the protective effect of the respirator.
4. Explain and demonstrate what to do with the respirator after its use.

The Contractor shall medically screen candidates for use of a full-face APR to be used for protection against chemical agents. Chemical agents currently used by the CDCR to control inmates include, alpha-chloroacetophenone (Chemical Abstracts Registry (CAR) \# 523374) and chlorobenzylidene malonitrile (CAR \# 2698411). The Contractor shall grant medical respirator clearance to candidates after an initial PEM examination utilizing the RPEQ. If the results of this evaluation show evidence of disqualifying medical conditions, the Contractor shall conduct a Pulmonary Function Test (PFT) and/or a more comprehensive PEM examination, if one of the following situations occurs:

1. A candidate responds positively to one or more of the eight (8) questions in Section B of the Respiratory Protection Evaluation Questionnaire and a PFT and/or a PEM examination are determined to be necessary.
2. A candidate must undergo a PEM examination due to observations made during fit testing procedures.

The Contractor shall include any medical tests, examinations, consultations, or diagnostic procedures for PEM examinations, as necessary. Upon completion of the required PEM examinations and in accordance with Title 8, CCR Section 5144, Respiratory Protection; the Contractor shall complete and sign each candidate's Respirator Clearance form. The Contractor shall store the completed Respirator Clearance form in the candidate's medical file and include the following information:

1. Any limitations on respirator use related to:
   - candidate's medical condition(s)
   - workplace conditions
2. Whether the candidate is cleared for respirator use
3. The need (if any) for follow up PEM examinations
4. Statement certifying that the candidate was provided a copy of the written recommendation
Inconclusive Examination Results and/or Candidate Disqualifications

The Contractor shall certify whether the candidate’s current medical fitness will preclude or diminish his/her ability to perform the duties of a peace officer classification as described in Peace Officer Essential Functions. In the event the PEM examination is inconclusive as to the candidate’s ability to perform the essential functions of a peace officer, the Contractor shall repeat the same laboratory test or PEM examination until it is conclusive or investigate the issue further by contacting the candidate’s personal physician and requesting additional medical information pertaining to the issue. If additional laboratory test(s) must be performed, the Contractor shall collect a new specimen(s) from the candidate to complete the re-test(s).

Approximately 75 percent of the PEM examinations require a lab report to be redone, blood pressure recheck, or additional information from the candidate’s personal physician; however, these are only necessary if the PEM examination is inconclusive in relation to the candidate’s ability to perform the essential functions of a peace officer.

The Contractor shall redo any of the below examinations based on inconclusive or abnormal results:

- Visual Acuity Examination
- Color Vision Examination
- General Physical Examination
- Blood Specimen and Analysis
- IgG Varicella Blood Test
- Routine Urinalysis
- Urine Drug Screening
- Hearing Examination
- Respirator Fit Testing
- Respirator Training and Examination

When seeking additional information to reach conclusive vision or PEM examination results from the candidate or the candidate’s personal physician or optometrist, the Contractor shall request the information in writing from the candidate and if applicable, from the candidate’s personal physician(s) or optometrist; as well as include it in the final vision or PEM examination report provided to the CDCR within the timeframes specified herein.

In the event the CDCR medically disqualifies a candidate based on the vision screening or PEM examination findings provided by the Contractor, the candidate may file an appeal with the California State Personnel Board (SPB). Further evaluation of the appeal may require an administrative hearing. In the event that an administrative hearing is needed, the Contractor shall be notified by the CDCR at least five (5) business days in advance of the hearing.

The Contractor shall designate the appropriate medical professional or comparable representative with sound professional knowledge of vision and PEM examination disqualifications. The Contractor’s medical professional or representative shall have knowledge of the case and be able to explain why the candidate’s medical condition
precludes him/her from performing the essential functions of a peace officer classification.

The Contractor’s medical professional or representative shall participate in the administrative hearing via conference call or in person at the State Personnel Board, 801 Capitol Mall, Sacramento, California 95814.

### III. TIME FACTORS

The Contractor shall provide accelerated scheduling priority to candidates with an application number starting with the letter “I” over all other CDCR candidates.

The Contractor shall complete vision and/or PEM examinations for each candidate that has an application number starting with an “I” and a “30 day expedite” notation and submit the final report to the CDCR no later than thirty (30) calendar days (to avoid penalties) from date of the CDCR referral. This process includes: scheduling of appointment and examination, collection of follow-up documentation, and any additional appointments (if necessary). The Contractor shall also submit the final report to the CDCR within thirty (30) calendar days from the date of the CDCR referral.

The Contractor shall complete vision and/or PEM examinations for each candidate that has an application number starting with an “I” and submit all required documents within thirty (30) calendar days (to avoid penalties) from the date of the CDCR referral. This process includes: scheduling of appointment and examination, collection of follow-up documentation, and any additional appointments (if necessary). The Contractor shall also submit the final report to the CDCR within forty-five (45) calendar days from the date of the CDCR referral.

The Contractor shall complete vision and/or PEM examinations for all other candidates and submit all required documents within thirty (30) calendar days (to avoid penalties) from the date of the CDCR referral. This process includes: scheduling the appointment and examination, collection of follow-up documentation, and any additional appointments (if necessary). The Contractor shall also submit the final report to the CDCR within sixty (60) calendar days from the date of the CDCR referral.

The below chart provides a visual illustration of the above mentioned priority hierarchy for scheduling candidate appointments and submitting completed reports to the CDCR.

<table>
<thead>
<tr>
<th>CLASSIFICATION TITLE</th>
<th>TOTAL PROCESSING TIME (maximum)</th>
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<tbody>
<tr>
<td>All candidates with the letter “I” preceding the application number and a “30 day expedite” notation</td>
<td>30 calendar days</td>
</tr>
<tr>
<td>Including, but not limited to:</td>
<td></td>
</tr>
<tr>
<td>• Associate Warden</td>
<td></td>
</tr>
<tr>
<td>• Wardens</td>
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### SCOPE OF WORK

<table>
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<tr>
<th>CLASSIFICATION TITLE</th>
<th>TOTAL PROCESSING TIME (maximum)</th>
</tr>
</thead>
<tbody>
<tr>
<td>All candidates with the letter “I” preceding the application number</td>
<td></td>
</tr>
<tr>
<td>Including, but not limited to:</td>
<td></td>
</tr>
<tr>
<td>• Parole Agent</td>
<td>45 calendar days</td>
</tr>
<tr>
<td>• Medical Technical Assistant-Psychiatric</td>
<td></td>
</tr>
<tr>
<td>• Fire Personnel</td>
<td></td>
</tr>
<tr>
<td>All candidates with no letter preceding the application number</td>
<td></td>
</tr>
<tr>
<td>• Correctional Officer</td>
<td>60 calendar days</td>
</tr>
<tr>
<td>• Youth Correctional Officer</td>
<td></td>
</tr>
<tr>
<td>• Youth Correctional Counselor</td>
<td></td>
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</tbody>
</table>

The Contractor shall maintain the following forms on its website and a supply of hardcopies at each medical facility:

- Peace Officer Health Questionnaire (OPOS 13B-PEM) (POHQ)
- Report of Peace Officer Medical Evaluation (OPOS 13F) (RPOME)
- PEM Unit Medical Release (OPOS 13C3)
- Pre-Employment Drug Screening (OPOS 13C4)
- Respiratory Protection Evaluation Questionnaire (OPOS 13R) (RPEQ)

The Contractor shall instruct candidates to complete, print, and bring these forms to their appointments along with their Scheduling Notices and state issued driver’s licenses or identification cards.

If the candidate does not appear for an appointment, the Contractor shall notify the CDCR within two (2) calendar days of the missed appointment. The Contractor shall not charge the CDCR any rescheduling or no show fee’s for candidate that do not appear for an appointment. The CDCR shall determine if the appointment will be rescheduled. Upon notification by the CDCR to reschedule an appointment, the Contractor shall reschedule the appointment within three (3) business days.

The Contractor shall submit all vision and PEM examination results and any medical/physical files to the CDCR at the below address within thirty (30) calendar days of receiving the contact information from the CDCR.

California Department of Corrections and Rehabilitation  
Office of Peace Officer Selection  
Peace Officer Appointment Section  
9838 Old Placerville Road, Suite B  
Sacramento, CA 95827
When submitting the final vision examination results/reports, the Contractor shall include: Vision Examination Log form, Vision Scheduling Notice, Peace Officer Vision Screening form, Farnsworth D-15 Color Vision Score Sheet (if applicable), and any additional information request notices and required verification documents obtained from the candidate or the candidate’s optometry provider or eye doctor.

When submitting the final PEM examination results/reports, the Contractor shall include: PEM Examination Log form, PEM Scheduling Notice, PEM Unit Medical Release form, Pre-Employment Drug Screening form, POHQ and all submitted attachments, the RPOME, all laboratory and hearing test results, OSHA Medical Questionnaire, RPEQ RPP written recommendation, and quantitative Respirator Fit Test results, and any additional information request notices and required verification documents obtained from the candidate or the candidate’s personal physician(s).

Vision or PEM examination results that have not been received within the specified timeframe of 30 calendar days from the date of CDCR referral are considered late. The Contractor shall receive full payment for reports that are received on time. The Contractor shall incur at least a 5% fee reduction per case for any examination results that are received after 30 calendar days as described in Exhibit B. The Contractor shall not receive payment on late or incomplete examination results/reports until they have been received and/or deemed complete by the CDCR.

When it is determined that additional laboratory tests and/or medical information is required, the Contractor shall notify the CDCR of this action within ten (10) calendar days of the PEM examination or within two (2) calendar days of vision examination.

The Contractor shall schedule examinations for candidates needing further audiological screening within three (3) business days of the initial PEM examination appointment.

IV. DATA AVAILABILITY

The Contractor shall make available and maintain a case processing database as specified in the Information Technology (IT) Specifications (Exhibit A-3). The Contractor shall provide database access to the CDCR via a website, as well as proficient IT personnel that is readily available to address problems and issues or reprogram database capabilities to meet the CDCR needs during business hours (Monday – Friday, 8 a.m. to 5 p.m.).

The Contractor shall provide IT personnel to troubleshoot, communicate with CDCR IT personnel, and efficiently carry out the full scope of responsibilities outlined in the IT Specifications. The Contractor shall provide IT personnel with advanced to expert level knowledge of the Contractor’s database and website to meet the CDCR’s needs, as well as maintain and support them. The Contractor shall provide IT personnel to support the Contractor’s web service technology (i.e. Windows Communication Foundation).

The Contractor shall provide the CDCR with a Web Services Definition Language (WSDL) file that illustrates how to interact with the web service. The Contractor shall provide a single point of contact to act as a liaison between the CDCR and the Contractor’s IT personnel. The Contractor shall provide an IT liaison with an IT background and knowledge base to effectively communicate with both the CDCR and
the Contractor’s IT personnel regarding problems, issues, and/or system (re)programming capabilities.

V. OFFICE PERSONNEL AND BUSINESS HOUR REQUIREMENTS

The Contractor shall provide personnel to perform contract workload, such as scheduling appointments, billing, and to act as liaisons between the CDCR and any subcontractor providers.

The Contractor shall maintain minimum scheduling and office staffing levels listed below:

- One (1) full-time Scheduler/Office Manager
- One (1) Clerical Support or Billing Coordinator

The Contractor’s scheduling and office staffing levels shall meet the current projected CDCR candidate referrals. If the CDCR peace officer hiring projections increase, the Contractor shall hire and train additional scheduling and office staff within thirty (30) calendar days of notification by the CDCR to ensure a continuous scheduling and testing flow.

The Contractor shall provide and maintain a toll-free phone number with voice message capability for candidates use in the event they need to contact Contractor personnel. The Contractor’s toll-free phone number shall be staffed between the hours of 8 a.m. to 5 p.m. (Monday through Friday). The Contractor shall contact candidates via telephone to schedule an appointment or for other matters from 8 a.m. to 7 p.m. (Monday through Friday) and have a caller ID feature, so that the Contractor’s business name is displayed. The Contractor shall also provide business hours to candidates from 8 a.m. to 5 p.m. (Monday through Friday).

The Contractor shall provide office personnel that are proficient in and have access to the Microsoft Office Suite software.

VI. CDCR RESPONSIBILITIES

The CDCR shall provide the Contractor with candidate contact information referred to the Contractor for vision and PEM examination appointments. Additionally, the CDCR shall provide the Contractor with a “sample” vision and PEM Scheduling Notice template prior to the commencement of the Agreement.

The CDCR shall refer candidates to the Contractor for vision examinations separately from PEM examination candidates.

The CDCR shall provide the Contractor with an initial supply of forms prior to the commencement of the Agreement to be completed by the Contractor and candidates. Additional forms shall be available for download via the Contractor’s website. The CDCR shall provide the Contractor with the following forms:

- Peace Officer Vision Screening Form (OPOS 07B)
- Farnsworth D-15 Color Vision Score Sheet
- Peace Officer Vision Verification Form (OPOS 07C)
SCOPE OF WORK

- Peace Officer Health Questionnaire (OPOS 13B-PEM)
- Report of Peace Officer Medical Evaluation (OPOS 13F)
- PEM Unit Medical Release (OPOS 13C3)
- Pre-Employment Drug Screening (OPOS 13C4)
- PEM Examination Log
- Vision Examination Log
- Respiratory Protection Evaluation Questionnaire (OPOS 13R)
- Respirator Clearance (OPOS 13S)
- Medical Clearance for Respirator Use
- CDCR Physical Examination Monthly Invoice

The CDCR shall evaluate all results for candidates who fail both stages of the color vision examinations and make the final determination to qualify or disqualify the candidate. The CDCR shall notify candidates of examination results.

The CDCR shall inform the Contractor on an ongoing basis of any changes in the types of medical condition evaluations to be provided to the candidates.

The CDCR shall reserve the right to conduct audits at examination sites, laboratories, and with the Contractor(s) at any time without prior notification to ensure compliance with specified guidelines and standards.

The CDCR shall reserve the right to approve or reject the Contractor's personnel in advance and disapprove the continuing assignment of the Contractor's personnel found to be unsuitable to perform services provided under this agreement.

The CDCR shall reserve the right to contract with another provider facility within 15 business days, at the Contractor's expense if one of the Contractor's facilities becomes temporarily or permanently non-operative and causes a prolonged delay in scheduling appointments or conducting examinations.

VII. **CDCR PROGRAM MANAGERS**

Office of Peace Officer Selection  
Lisa Hoffman, Staff Services Manager I  
Phone Number: (916) 255-3843  
FAX Number: (916) 255-3301

Office of Peace Officer Selection  
Anatole Moore, Staff Services Manager II  
Phone Number: (916) 255-335  
FAX Number: (916) 255-3301
VIII. **CDCR CONTACT INFORMATION**

Should questions or problems arise during the term of this Agreement, the Contractor should contact the following offices:

**Billing/Payment Issues:**
Headquarters Accounting Office  
Phone Number: (916) 327-0283  
FAX Number: (916) 445-2248

**Scope of Work/Performance Issues:**
Office of Peace Officer Selection  
Contact Person: Lisa Hoffman, Staff Services Manager I  
Phone Number: (916) 255-3843  
FAX Number: (916) 255-3301

Office of Peace Officer Selection  
Anatole Moore, Staff Services Manager II  
Phone Number: (916) 255-335  
FAX Number: (916) 255-3301

**General Contract Issues:**
Contracts Management Branch  
Phone Number: (916) 255-5655  
FAX Number: (916) 255-6187