## SEX OFFENDER TREATMENT PROGRAM (ON SITE SURVEY REPORT)

Certificate #	Expiration Date:
Program Name	Date of Survey
Program Address	
Telephone Number	
Legal Entity:	
Director:	
Surveyor:	
Survey Recommendation:	
Full	Provisional
Recommended Expiration Date	
General Information: Public	Private
Profit	Non-Profit
Hours and Days of Operation	
Total Groups Per Week	
Total Number Enrolled in Each Group_	
Total Staff Per Group	
Psychiatrist on Staff	
Referral Psychiatrist if none on Staff	

Approved by:

Date:

Survey Key:

C – Compliance N – Non - Compliance P – Partial Compliance I - Inapplicable

GOALS AND OBJECTIVES	С	Ν	Р	Ι	COMMENTS
Clients have a lifetime Management Plan					
Is TX paired with on-going objectives, Assessments of					
progress and with external sources of control?					
Abel/Polygraph/D/A Screenings					
Is Relapse/re-offense prevention incorporated into					
treatment?					
Policy describing how the SVP waives confidentiality of					
evaluation, treatment, case management, supervision and					
criminal history information to allow all TX staff and					
supervisory staff equal access to accurate information					
Provide list of all sex offender specific training attended by					
all staff.					
Policy describing appropriate training and experience in the					
dynamics, TX approaches and supervisory techniques					
demonstrated to be most effective in modifying the behavior					
of sex offenders and safeguarding the community					
Treatment Philosophy including cognitive/behavioral					
therapies as cornerstone of TX of SVP					
Provide a copy of program certification to offender and					
criminal justice authority having jurisdiction prior to the					
beginning of treatment.					
PROGRAM STANDARDS					
The program/provider has had a minimum of 3 years					
experience Treating Sex Offenders					
Treatment components include cognitive restructuring,					
values clarification, identification of risk factors,					
enhancement of coping skills, impulse control, relapse					
prevention, etc.					
Offender Specific Individual Treatment Plan (ITP) contains					
measurable treatment goals, objectives and treatment					
interventions, indicates persons responsible for TX and					
supervision. Demonstrates collaboration of all criminal					
justice and TX agencies responsible for TX and supervision					
Offender attends at least monthly counseling sessions					

	С	N	Р	Ι	COMMENTS
Program ensures that victim protection and restitution are					
integral to sex offender TX and management. Victim					
notification is VICTIM DRIVEN. Family reunification					
goals are family driven, with victim's best interest as					
driving force.					
Program provides access to physician evaluation and					
prescription of anti-androgen and other pharmacological					
therapies when indicated.					
Two co-therapists for each clinical group that exceeds 8 sex					
offenders. Didactic groups may involve larger participant					
numbers per each counselor. Each sex offender must attend					
at least one clinical group per month.					
The program refers sex offenders to specialized ancillary					
services when necessary (substance abuse, MR, Mental					
Illness, etc.)					
Program keeps accurate records of TX (Notes for each					
session, six month TX summary to be shared with					
responsible criminal justice, correctional, probation and					
parole authorities)					
Immediate notice shall be given of serious violations of					
program rules to responsible criminal justice, correctional,					
probation and parole authorities. In cases where the SVP is					
not under supervision, reports shall be generated quarterly to					
SOAB and notification will be made immediately to the					
SOAB for non-compliance with treatment.					
Case conferences shall occur monthly with team members					
from parole and probation, other TX services, criminal					
justice agencies, and social service agencies Case conferences are documented with a sign off that					
includes all attendees					
TX modifications are made and documented as a result of					
inter-agency case conferenceTX staff interaction with SVP includes compassion for the			-	-	
humanity of the offender while recognizing the offender's					
criminal behavior as reprehensible					
Clinical polygraph testing is used with all SVP's and					
incorporated into ITP at least once every six months					
meorporated into TTF at least once every six months		I	I	I	

	С	N	Р	Ι	COMMENTS
Polygraph operators adhere to the standards of best practice					
established for the administration of clinical polygraphs					
with sex offenders and possess the credentials needed to					
practice their profession					
Plethysmographic assessments, when used, are conducted					
under the standards of ATSA					
The ABEL Assessment, when used, shall be administered					
under the current guidelines established by its originator					
Assessment results, including physiological measures, are					
communicated to the criminal justice agency having					
jurisdiction over the offenders supervision with					
documentation of such in offenders record					
Provider can demonstrate policies/procedures that manages					
staff counter transference, stress, burnout and isolation,					
including peer review and continuous quality improvement					
measures					
SVP treatment shall be provided by clinicians who meet or					
exceed the minimum standards for education, training and					
experience established by the ASTA and who are licensed to					
practice in their respective discipline in Pennsylvania					
Medication prescribed and monitored by a PA Licensed					
physician					
Provide a copy of signed and witnessed limits of					
confidentiality form					
Separate Limit of Confidentiality form for SVP under					
supervision of PBPP					
All SVP's prior to entering treatment shall be informed in					
writing that disclosures made during TX concerning					
criminal activity shall be reported immediately to that					
appropriate law enforcement agency					
Extensive Consent to TX is reviewed and signed by each					
offender prior to beginning TX (includes applicable laws,					
regulations and program rules and coordination)					
Written informed consent shall be obtained before the					
administration of pharmaceutical, physiological, and					
aversive interventions					

	С	N	Р	Ι	COMMENTS
The potential Consequences for failure to comply with treatment are explained to offender in writing					
Aversive interventions shall be utilized only after approval by a Provider Ethical Treatment Committee					
Provider shall comply immediately by phone and in writing (fax) to the duty to immediately notify the SOAB or criminal justice authorities having legal jurisdiction over offender supervision of the SVP's. failure to comply with TX as provided by 42 Pa CSA 9799.4. Note of compliance shall be in offenders record					