

ATTACHMENT A

NASA Glenn Research Center PERFORMANCE WORK STATEMENT FOR OCCUPATIONAL HEALTH SERVICES

1.0 INTRODUCTION

The NASA Glenn Research Center (GRC) has a requirement for Occupational Health Services (OHS) at its Lewis Field site. Services include preventive medicine, health promotion and wellness, emergency and therapeutic medicine, occupational medicine, physical fitness and employee assistance programs. This requirement includes providing the necessary management, resources, supplies, services and personnel required to perform the total effort.

All services provided under the OHS contract, which are described in this Statement of Work (SOW), are part of a comprehensive Occupational Health Program managed by the GRC Safety, Health and Environmental Division (SHED). The goals of this program are to promote, maintain and improve the health and wellness of the GRC workforce, with a focus on the prevention, diagnosis, treatment and care of illness and injury caused or aggravated by the work environment; to minimize absenteeism and reduced productivity due to disability, illness, or death; and to protect the overall health of all individuals who visit the Lewis Field site.

The OHS Contractor interfaces primarily with personnel in SHED in the context of individual occupational health programs. The Contractor also interfaces and coordinates with personnel in the Agency Occupational Health Office of the NASA Office of the Chief Health and Medical Officer. Technical direction will be provided to the Contractor by the Contracting Officer's Technical Representative (COTR) or Alternate COTR (ACOTR) in accordance with Clause H.11, Technical Direction.

Work performed under this OHS contract shall be conducted in accordance with all applicable federal, state, and local regulatory requirements, with the NASA and GRC policy and best-practices standards documents listed in Section 12.0, REFERENCED DOCUMENTS and with regulatory and policy documents referenced therein. Work performed under this OHS contract shall comply with specific requirements referenced in individual sections of this Statement of Work (SOW).

1.1 Base Services and Indefinite Quantity Indefinite Delivery (IDIQ) Services

This SOW includes Base Services, described in Sections 1 through 9, and potential Indefinite Quantity Indefinite Delivery (IDIQ) services, described in Section 10.0. Unless specifically superseded in an IDIQ SOW, the Contractor shall meet all requirements, which include technical, quality and

policy/regulatory requirements as stated in Sections 1 through 9, for all work performed under this contract, whether funded as a base service or IDIQ task.

All IDIQ services ordered will be ordered, funded, invoiced and paid under individual IDIQ order numbers.

Proposal pricing shall include all labor, supplies, equipment and services necessary to meet the requirements in the base sections of this SOW, except where specifically noted in Table 1.3. Offerors are directed to Attachment B, Annualized Historical Statistical Data for Contractor-Provided Services, Attachment C, Workforce Demographics, and Table 1.3, Cost Responsibility, for guidance in proposal preparation and pricing.

1.2 Covered Employee Populations

In its broadest scope, this SOW covers the civil servant (CS) and on-site support service contractor (SSC) workforce at Lewis Field and Plum Brook Station (PBS) sites, except where otherwise indicated in specific sections of this SOW or in Table 1.3. Civil servant and SSC workforce demographics are listed in Attachment C, Workforce Demographics.

All services (e.g., medical examinations, counseling, awareness programs, educational activities, emergency and non-emergency medical care, motivational events and health-related services) under the base services sections of this SOW shall be provided at the Lewis Field location only, except where specifically noted in this SOW or in Table 1.3. PBS employees who wish to access Contract-provided services are required to obtain them at Lewis Field.

Services covered under the base services sections of this SOW that are not individualized but are relevant to a general employee population and are provided in group or mass-communication formats shall be made available to the entire GRC workforce without regard for employment status or affiliation. These services include classroom-style training, motivational events, team sports and all Fitness Center programs, as well as all informational materials and services provided electronically via email or the OHS website.

Individualized services covered under the base services sections of this SOW that are provided in a one-on-one setting, such as occupational medical surveillance, immunizations and physical therapy services, shall be made available to Lewis Field and PBS CS and SSC employees, except where specifically noted in the applicable section of this SOW or in Table 1.3.

CS employees shall receive priority consideration when scheduling and providing services, except where otherwise indicated for medical reasons.

1.3 Cost Responsibility

A detailed accounting of coverage scope and cost responsibility for the base services sections of this SOW is provided in Table 1.3 at the end of this section. Historical statistical data quantifying the estimated required volume of each individualized service covered in the base services sections of this SOW is provided in Attachment B, Annualized Historical Statistical Data for Contractor-Provided Services.

Where scope of coverage or cost responsibility are not explicitly specified in Table 1.3 or in Sections 1 – 9 of the SOW, it should be assumed that the Contractor will provide and bear all expenses associated with meeting all requirements of the SOW and that services shall be provided for CS and on-site SSC employees and that no additional fees shall be sought from employees, SSC companies or the government for those services.

1.3.1 Cost-Reimbursable Services Required Under Base Sections of SOW

Most individualized services provided to SSC employees that are required under the base sections of this SOW are offered under a cost-reimbursable arrangement that allows NASA to collect fees for these services from the individual SSC employee or the SSC employee's company. SSC employees must submit a letter from their company management guaranteeing payment on a cost-reimbursable basis prior to receiving any service.

The Contractor shall collect these fees on behalf of NASA for all cost-reimbursable services, in accordance with Table 1.3. The Contractor shall credit these fees back to NASA after deducting any added incurred costs that were not included in proposal pricing, such as special purchased equipment, supplies, and added labor costs. The Contracting Officer (CO) and COTR must be notified before additional costs are incurred, except under extreme emergencies.

No personal insurance coverage or reimbursements shall be sought or accepted for any service provided under this SOW. All services shall be provided as a benefit to employees or in a pay-to-participate arrangement as described in Section 0, independent of an employee's insurance coverage.

1.3.2 Pay-to-Participate Services Provided Under Base Sections of SOW

The Contractor shall provide specific services required under the base sections of the SOW in a cost-reimbursable pay-to-participate arrangement, in accordance with Table 1.3. These include private pilot examinations and physical therapy services (for SSC employees), as indicated in Table 1.3. The individual employee will pay the Contractor or subcontracted service provider directly for the cost of these services. The Contractor shall collect these fees on behalf of NASA, in accordance with Table 1.3, and shall credit these fees back to NASA. These fees are not included in proposal pricing.

Some services required under the base sections of the SOW shall be provided on a pay-to-participate basis for a fee to be paid directly to the Contractor or subcontracted service provider (e.g., the provider of massage therapy services) by the employee. These services are not cost-reimbursable.

The Contractor may also choose to make additional occupational health-related programs, services and materials, which are not required, but which are under the general scope of this SOW, available to individual CS and SSC employees in a pay-to-participate arrangement, for a fee to be paid directly to the Contractor or subcontracted service provider (e.g., the instructor of a specialized subcontracted fitness class) by the employee.

Fees for pay-to-participate services that are not offered on a cost-reimbursable basis (per Table 1.3) are not included in proposal pricing and are therefore not credited back to NASA.

Key to Terms Used in Table 1.3	
Term	Explanation
Cost-reimbursable	Fees collected by the Contractor from employees or SSC companies must be credited back to NASA, after deducting costs of additional incurred expenses (e.g., specialized equipment, supplies or materials or additional labor expenses) not included in proposal pricing. All anticipated costs of providing services shall be included in proposal pricing.
Pay-to-participate	Individual employees pay the Contractor or direct service provider for service or non-covered portion of service. Cost should be included in proposal pricing unless specifically noted in Table 1.3 [Note: a service, such as private pilot examinations, may be both cost-reimbursable and pay-to-participate.]
Covered	Contractor provides service without receiving any additional fees or collecting any fees from employees or SSC companies. Costs should be included in proposal pricing.
Civil Servant (CS)	Government employees assigned to Lewis Field or Plum Brook Station
Support Service Contractors (SSC)	On-site support service contractor employees of organizations with ongoing contracts to provide support or operations for GRC programs or facilities at Lewis Field (excludes construction, repair, and other short-term contracted services).
GRC workforce	Includes CS and SSC employees assigned to Lewis Field and Plum Brook Station as well as other contractors, interns, co-op students, and short-term contractors
Lewis Field workforce	Includes CS and SSC employees assigned to Lewis Field as well as other contractors, interns, co-op students, and short-term contractors
Participation is voluntary	Services shall be made available to specified population. Employees are not required to participate.
Participation is mandatory	Services shall be provided for specified population. Employees who have been identified by management or applicable health/safety program manager are required to participate.

Table 1.3. Cost Responsibility for Specific OHS Contract Services for GRC Population

SOW Section	Service	Coverage
4.1	Health Maintenance Examinations (includes all labwork, examinations and services provided by offsite subcontracted providers)	All CS employees covered. No services for SSC employees. Participation is voluntary for CS employees.
4.2	Medical Clearance for Fitness Center Membership	All CS employees covered. SSC employees, interns and CS retirees pay-to-participate in cost-reimbursable arrangement. Participation is voluntary but is required for Fitness Center membership. [Note: Fitness Center membership also requires fitness screening - see 7.1.1.]
4.3	International Traveler Health Services (includes travel kits and all immunizations provided by offsite subcontracted providers)	All CS employees covered. SSC employees covered under cost-reimbursable arrangement with SSC company management. Services shall be made available for SSC companies to procure at their discretion. Need for service is determined by requirement for official foreign travel.
4.4.1	Annual Influenza Immunization Program	All CS employees covered. SSC employees pay-to-participate in cost-reimbursable arrangement. Participation is voluntary.
5.1	Initial on-site treatment of occupational illness and injury (includes all labwork, supplies, medications and services provided by offsite subcontracted providers)	All CS and SSC employees, other contractors and visitors covered. [No fees shall be charged. No insurance payments shall be sought.]
5.2	Treatment of Acute Non-Occupational Illness and Injury (includes all labwork, supplies, medications and services provided by offsite subcontracted providers)	All CS and SSC employees, other contractors and visitors covered. [No fees shall be charged. No insurance payments shall be sought.]
5.4	Administration of Prescribed Medicine and Tests	All CS employees covered. No services for SSC employees. Participation is voluntary for CS employees. Employees must provide prescription, medication, supplies and any specialized equipment.
6.1.1.1	Surveillance Evaluations for Workers with Specific Potentially-Hazardous Exposures (includes all labwork, supplies, examinations and services provided by offsite subcontracted providers)	All CS employees covered. SSC employees covered under cost-reimbursable arrangement with SSC company management. Services shall be made available for SSC companies to procure at their discretion. [Management of audiometric monitoring program - see 6.3 - shall be included with audiometric monitoring services provided for SSC employees.] Participation is mandatory for CS employees and for SSC employees whose companies contract for services. Need for service determined by applicable GRC occupational health program manager.
6.1.1.2	Surveillance Evaluations for Workers Associated With Hazardous Environments (includes all labwork, examinations and services provided by offsite subcontracted providers)	All CS employees covered. SSC employees covered under cost-reimbursable arrangement with SSC company management. Services shall be made available for SSC companies to procure at their discretion. Participation is mandatory for CS employees and for SSC employees whose companies contract for services. Need for service determined by applicable GRC occupational health program manager.
6.1.2	Certification Examinations (includes all labwork, supplies, examinations and services provided by offsite subcontracted providers)	All CS employees covered. SSC employees covered under cost-reimbursable arrangement with SSC company management. Services shall be made available for SSC companies to procure at their discretion. Participation is mandatory for CS employees and for SSC employees whose companies contract for services. Need for service determined by employee's supervisor or by applicable GRC health/safety program manager.
6.1.3	Flight-Associated exams (includes all labwork, supplies, examinations and other services provided by offsite subcontracted providers)	All CS employees covered. SSC employees covered under cost-reimbursable arrangement with SSC company management. Services shall be made available for SSC companies to procure at their discretion. Participation is mandatory for CS employees and for SSC employees whose companies contract for services. Need for service determined by employee's supervisor or by applicable GRC health/safety program manager.
6.1.3.1	Private Pilot Examinations (includes all labwork, examinations and other services provided by offsite subcontracted providers)	CS employees pay-to-participate in cost-reimbursable arrangement. Fee to CS employees shall represent cost above cost of health maintenance examination. Examinations for CS employees shall be offered as part of health screening examination. SSC employees pay-to-participate in (full) cost-reimbursable arrangement. Participation is voluntary. Examination is requested by the employee.
6.1.4	Special Administrative Examinations (includes all labwork, supplies, examinations and other services provided by offsite subcontracted providers)	All CS employees covered. Employee participation is mandatory. No services for SSC employees. Need for service determined by GRC management.

Table 1.3 Cost Responsibility for Specific OHS Contract Services for GRC Population

SOW Section	Service	Coverage
6.2	Medical support for Workers' Compensation Program	All CS employees covered. Employee participation is mandatory. No services for SSC employees. Need for service determined by GRC management.
6.3	Management of Medical Monitoring Programs (audiometric monitoring) (Includes all evaluations, examinations and services provided by offsite subcontracted provider such as follow-up audiological and otolaryngological evaluations)	All CS employees enrolled in the GRC hearing conservation program are covered. SSC employees covered under cost-reimbursable arrangement with SSC company management. Services shall be made available for SSC companies to procure at their discretion. [This service shall be included with audiometric monitoring services provided for SSC employees - see 6.1.1.2.] Participation is mandatory for CS employees and for SSC employees whose companies contract for services. Need for service determined by outcome of audiometric monitoring (see 6.1.1.2).
6.4	Ergonomics Program - ergonomic assessments	All CS and SSC employees at Lewis Field covered. [Assessments to take place at employee's work site.] Employee participation is voluntary. Need for service determined by individual employee. Services are requested by the employee.
6.5	Prescription Safety Glasses Program - optician services	All CS employees covered. SSC employees covered under cost-reimbursable arrangement with SSC company management. Services shall be made available for SSC companies to procure at their discretion. Participation is mandatory for CS employees and for SSC employees whose companies contract for services. Need for service determined by employee's manager or by applicable GRC occupational health/safety program manager. [Note: supply services covered under IDIQ Section 10.9]
7.1.1	Fitness Center membership (Includes fitness screening and ongoing fitness testing as well as all programs and services except those listed below)	All CS and SSC employees, interns, co-op students, and CS retirees are covered. Participation is voluntary. Requires medical clearance examination (see 4.2) in addition to fitness screening.
7.3	Physical Fitness Program Services	All CS and SSC employees, interns, co-op students, and CS retirees are covered. The Contractor may charge a separate pay-to-participate fee, paid directly to the Contractor or service provider by the employee, for special program offerings proposed by the Offeror that involve the purchase of individual materials, supplies, or subcontracted services, with approval of COTR and CO. [Proposal pricing shall not include fees for special offerings.] Employee participation in specific programs is voluntary.
7.3.6	Physical Therapy Services	All CS employees covered. SSC employees pay-to-participate in cost-reimbursable arrangement. Employee participation is voluntary. Need for service determined by MSC evaluation or by employee request.
8	Employee Assistance Program (Includes services except those listed below)	All GRC workforces covered. [Services provided only at Lewis Field]
8.2.1	Individual Counseling Services	All CS employees covered for up to five sessions per individual, per issue, per year. Coverage includes immediate family; services provided to family members are counted separately. No services for SSC employees. No insurance payments shall be sought for covered visits. Employee participation in counseling services is voluntary.
8.2.2	Individual Consultation Services	All CS employees covered. No services for SSC employees. Participation is voluntary.
9	Health Promotion and Wellness Program (Includes all programs and services except those listed in 9.3 below)	All GRC workforces covered. [Services provided only at Lewis Field.] The Contractor may charge a separate pay-to-participate fee, paid directly to the Contractor or service provider by the employee, for special program offerings proposed by the Offeror that involve the purchase of individual materials, supplies, or subcontracted services, with the approval of COTR and CO. [Proposal pricing shall not include fees for special offerings.] Employee participation in specific programs is voluntary.
9.3	Massage Therapy Services	CS and SSC employees pay-to-participate. Fee is paid directly to service provider by the employee. [Proposal pricing shall not include these fees.] Employee participation is voluntary.
10	Potential IDIQ Requirements	All IDIQ services ordered will be ordered, proposed, funded, invoiced and paid under individual IDIQ order numbers. [Proposal pricing shall not include IDIQ requirements.]

1.4 Integration and Coordination of Required Services

The following major occupational health services and programs are covered under the OHS Contract and are specified in the base services sections of this SOW.

- Preventive Medicine Program (Section 4.0)
- Emergency and Therapeutic Medicine Services (Section 5.0)
- Occupational Medicine Services (Section 6.0)
- Physical Fitness Program (Section 7.0)
- Employee Assistance Program (Section 8.0)
- Health Promotion and Wellness Program (Section 9.0)

Each of these major work elements comprises a comprehensive list of tasks and services that must be integrated into the overall GRC Occupational Health Program managed by SHED. Internal coordination between these elements of the OHS Contractor's operation is also critical, particularly in common areas such as education, awareness, and communication. In addition, participation and leadership, as appropriate, on SHED, GRC and NASA teams and committees, as required under Section 2.6 of this SOW, is an important role that must be accommodated in personnel assignments and staffing plans.

2.0 MANAGEMENT AND ADMINISTRATIVE REQUIREMENTS - GENERAL

The Contractor shall provide comprehensive occupational health services to enhance the health and well-being of the workforce. The Contractor shall provide the necessary expertise and capabilities to effectively operate the Occupational Health Services Program in accordance with this SOW and all policy and regulatory requirements cited in this SOW, including those referenced under Section 12.0, REFERENCED DOCUMENTS.

Services provided under this contract will generally be performed onsite at Lewis Field in Government-provided facilities during normal business hours, Monday through Friday, excluding Federal Holidays, unless otherwise indicated. Services shall be scheduled and provided in a manner that accommodates employees' flexible work schedules.

2.1 Personnel Requirements

The Contractor shall provide the personnel resources to fully meet the requirements of this SOW and all referenced regulatory requirements, policy documents and best-practice standards.

2.1.1 Qualifications

All personnel shall fully meet the educational, credential, and experience requirements for duties performed, as described in this section. Individuals may fill multiple roles, subject to the staffing requirements specified in Section 2.1. Information in this section (2.1.1) is for qualification purposes only and does not presume or in any way suggest staffing levels except where specifically stated. The Offeror shall propose staffing levels and specific personnel assignments to meet the requirements in sections 3-9 of this SOW, in accordance with Attachment B, Annualized Historical Statistical Data for Contractor-Provided Services.

All personnel shall be fully licensed by the State of Ohio in their respective professional fields and maintain in good standing the professional accreditations, certifications and credentials appropriate to their fields and to the functions performed under this contract, including those specifically noted in this section.

All Board certifications must be provided by a board certifying entity in the United States.

The Contractor shall collect and maintain current documentation of all professional credentials for each staff member and shall, when requested by the COTR, provide copies of credential documentation, such as licenses, certifications and resumes.

2.1.1.1 Medical Director

The Medical Director shall be responsible for all services and Contractor personnel activities taking place under this contract. The Medical Director shall provide oversight for all work performed under this contract. The Medical Director shall be the GRC Medical Technical Authority.

The Medical Director shall be assigned to this contract at a minimum staffing level of 80% of full-time and shall be physically located on-site at the MSC.

The Medical Director shall meet all qualifications under Section 2.1.1.4 and all qualifications and requirements of one of the two following options, prior to the full performance date of the contract:

- A. Shall be Board-Certified in Occupational Medicine by the American Board of Preventive Medicine (ABPM).

- B. Shall meet ALL prerequisites for application to take the ABPM exam leading to Board Certification in Occupational Medicine via the Complementary Pathway for physicians who wish to make a mid-career shift into the practice of Occupational Medicine: (<https://www.theabpm.org/public/complementarypathwayannouncement.pdf>) and shall apply to take the exam at the next advertised opportunity.

The Contractor shall obtain COTR approval and shall obtain written consent from the Contracting Officer (CO) before reassigning the role of Medical Director, should a change in personnel become necessary due to illness or other compelling reason. Reassignment of the role of Medical Director is subject to Clause H.14, Key Personnel.

2.1.1.2 Medical Review Officer (MRO)

The Medical Director shall serve as the GRC Medical Review Officer (MRO) for the NASA Drug-Free Workplace Program in accordance with NPR 3792.1, *Plan for a Drug-Free Workplace*. The MRO shall maintain certification by the American Association of Medical Review Officers (AAMRO) or the Medical Review Officer Certification Council (MROCC) of the American College of Occupational & Environmental Medicine (ACOEM).

2.1.1.3 Federal Aviation Administration (FAA) Examiner

Physician(s) who perform flight physicals shall maintain current certification as a Federal Aviation Administration (FAA) Examiner for Class I, II and III flight physicals.

2.1.1.4 All Physicians

All physicians who provide services at the Medical Services Clinic (MSC), except as specifically required in Section 2.1.1.1, shall meet one of the two following requirements:

- A. Board certified in or have completed residency in either a
 - o preventive medicine or
 - o primary care specialty
- B. Have a minimum of two years full-time experience in occupational medicine or other preventive medicine or primary care field.

Board certification in occupational medicine is preferred.

All physicians who provide services at the MSC shall be experienced in evaluating occupational exposures to workplace hazards such as

noise, lasers, radiation and inhalation, contact and ingestion of toxic substances.

All physicians who provide services at the MSC shall be experienced in performing thorough physical examinations, including EKG and basic X-RAY interpretation.

All physicians shall maintain current licensure by the State Medical Board of Ohio.

All physicians who provide services at the MSC shall maintain current American Heart Association (AHA) Advanced Cardiac Life Support (ACLS) certification.

2.1.1.5 Professional Supervisor (PS) of the Audiometric Monitoring Program

The Professional Supervisor (PS) of the Audiometric Monitoring Program must be either a physician or audiologist (see Section 2.1.1.11) with experience in hearing conservation. The PS shall hold (or earn, within one year after contract award) certification as a Professional Supervisor by the Council for Accreditation in Occupational Hearing Conservation (CAOHC). Determinations of work-relatedness shall be made only by a CAOHC-certified Professional Supervisor. The Contractor shall provide evidence of Certification to the COTR if earned after contract award.

2.1.1.6 Physician Assistant

Physician Assistants shall be graduates of an accredited program and possess a Certificate to Prescribe. Physician Assistants shall be licensed to practice in the State of Ohio and have at least five years full-time experience in an occupational medicine environment. Physician Assistants who provide services at the MSC shall maintain current ACLS certification.

The Contractor may choose, but is not required, to assign one or more Physician Assistants as part of the Contractor's staffing plan.

2.1.1.7 Nurse Practitioner

Nurse Practitioners shall maintain current State of Ohio licenses and shall possess a Certificate to Prescribe. Nurse Practitioners shall have at least five years full-time experience in occupational health, emergency, and critical care nursing. Certification as an Occupational Health Nurse Practitioner (OHNP) is preferred. Nurse Practitioners who provide services at the MSC shall maintain current ACLS certification.

The Contractor may choose, but is not required, to assign one or more Nurse Practitioners as part of the Contractor's staffing plan.

2.1.1.8 Nurse (other than Nurse Practitioner)

All nurses shall hold licensure as Registered Nurses. Nurse(s) who supervise, manage, oversee or review occupational medical monitoring examinations shall hold Occupational Health Nurse Specialist (COHNS) certification. All nurses shall maintain current State of Ohio licenses and have at least five years full-time experience in occupational health, emergency, and critical care nursing. Nurses who provide services at the MSC shall maintain current ACLS certification.

2.1.1.9 X-RAY Technician

Personnel performing X-RAYS shall be graduates of an accredited program, maintain current State of Ohio licensure as a General X-ray Machine Operator (GXMO) and be in good standing with the American Registry of Radiologic Technologists. X-ray technicians shall have at least five years full-time experience in a hospital or medical clinic environment and shall maintain current American Heart Association Basic Life Support for Healthcare Providers (BLS) certification.

2.1.1.10 Occupational Hearing Conservationist

All personnel who conduct audiometric monitoring examinations shall hold current certification as an Occupational Hearing Conservationist (COHC) from the Council for Accreditation in Occupational Hearing Conservation (CAOHC).

2.1.1.11 Audiologist

The audiologist who reviews problem audiograms shall maintain current licensure as an audiologist in the State of Ohio. The audiologist shall have at least five years experience in hearing conservation and shall hold (or earn, within one year after contract award) certification as a Professional Supervisor (PS) by the Council for Accreditation in Occupational Hearing Conservation (CAOHC). The Contractor shall provide evidence of Certification to the COTR if earned after contract award.

2.1.1.12 Optician

The optician shall be licensed as a dispensing optician in the State of Ohio and have at least five years full-time experience.

2.1.1.13 Dietician

The dietician shall be a Registered Dietician (RD) with at least five years full-time experience in individual and group counseling as well as health promotion and wellness.

2.1.1.14 Physical Therapist

Physical therapists shall be licensed in the State of Ohio and shall have at least five years full-time experience. Physical therapists shall maintain current American Heart Association Basic Life Support for Healthcare Providers (BLS) certification.

2.1.1.15 Massage Therapist

Massage therapists shall be licensed by the Ohio State Medical Board and have at least five years full-time experience. Massage therapists shall maintain current American Heart Association Basic Life Support for Healthcare Providers (BLS) certification.

2.1.1.16 Specialists

All medical specialists and other professional experts who perform staff or consulting functions under this contract shall possess the commonly recognized terminal degrees, licensure, Board-certifications, and relevant specialty certifications appropriate to their respective professional fields.

2.1.1.17 Employee Assistance Program Counselors

Employee Assistance Program Counselors shall have a minimum of a Masters' Degree in an accredited mental health field such as clinical psychology or social work. Each Counselor shall be licensed in the State of Ohio and have experience in counseling with a minimum of 1000 cases (career to date) that include drug and alcohol assessment and management consultation. Each Counselor shall be certified as an Employee Assistance Professional (CEAP) by the Employee Assistance Professionals Association (EAPA).

The Contractor shall obtain COTR approval and shall obtain written consent from the Contracting Officer (CO) before reassigning the role of Employee Assistance Counselor (primary), should a change in personnel become necessary due to illness or other compelling reason. Reassignment of the role of Employee Assistance Counselor (primary) is subject to Clause H.14, Key Personnel.

2.1.1.18 Fitness Center Director

The Fitness Center Director shall have at least five years full-time experience managing a physical fitness facility and comprehensive physical fitness program.

The Fitness Center Director shall be responsible for all services and Contractor staff activities taking place under Section 7.0 of this SOW. The Fitness Center Director shall report to the Medical Director.

The Fitness Center Director shall be assigned to this contract on a full-time basis.

The Contractor shall obtain COTR approval and shall obtain written consent from the Contracting Officer (CO) before reassigning the role of Fitness Center Director, should a change in personnel become necessary due to illness or other compelling reason. Reassignment of the role of Fitness Center Director is subject to Clause H.14, Key Personnel.

2.1.1.19 Fitness Center Personnel

All Fitness Center personnel shall have a minimum of a Bachelor's Degree in exercise physiology or related field and shall maintain current licensure and certification in their individual professional field, as appropriate, provided by the American College of Sports Medicine, the National Athletic Trainers Association, the American Society of Exercise Physiologists, the National Commission for Health Education Credentialing or comparable credentialing entity.

All Fitness Center personnel shall have previous work experience in a physical fitness facility or program.

All Fitness Center personnel shall maintain American Heart Association Basic Life Support for Healthcare Providers (BLS) certification and or American Red Cross CPR/AED for the Health Care Providers (2 year certificate) and American Red Cross First Aid Certification.

2.1.1.20 Food Safety Inspector

Personnel conducting food safety inspections shall maintain, at a minimum, ServSafe Food Protection Manager Certification.

2.1.2 Continuing Education and Training Requirements

Except where superseded by specific requirements elsewhere in this SOW, all Contract personnel shall hold and maintain, at a minimum, current certifications in First Aid, Cardiopulmonary Resuscitation (CPR) and operation of Automatic External Defibrillators (AEDs) and shall be in compliance with all Occupational Safety and Health Administration (OSHA)-required training for health care providers, including bloodborne pathogens training.

The Contractor shall ensure that Contract personnel attend appropriate continuing education courses, conferences, and seminars annually, or as required, to maintain competency and technical skills and to meet and certification requirements appropriate to their respective roles.

Contractor staff shall participate, as appropriate to work roles and individual professional disciplines, in Videoconference training sessions (ViTS) offered by the NASA Office of the Chief Health and Medical Officer (OCHMO).

In the event that new credentialing requirements are issued by OCHMO, the Contractor shall ensure that all Contract personnel meet the new requirements, either by taking steps to attain such credentials within a reasonable time period, or by implementing personnel replacements.

2.2 Supplies and Equipment

The Contractor shall provide all materials required to perform the contract work as described in this SOW. These include all consumable items such as office supplies, medical and clinical supplies, medications, specialized paper products, travel kits and prescription and non-prescription drugs as well as laundry services, lab and professional services and equipment service and maintenance agreements. The Government will provide standard restroom supplies (toilet paper, paper towels and hand soap) for the restrooms at the MSC and FC. The Government does not provide laundry facilities or equipment.

The Government will provide the equipment and other items listed in Attachment D, Installation-Accountable Government Property.

The Government will provide appropriate desktop and laptop computer stations for the MSC and FC. These computer stations will be provided through the GRC Information Technology (IT) support contract [currently the Outsourcing Desktop Initiative for NASA (ODIN)] and will include standard administrative software licenses such as Microsoft® Office. IT resources will be provided during the contract phase-in period.

The Contractor shall comply with all GRC policies regarding use of Contractor-provided software on NASA IT resources. The Contractor shall comply with all NASA requirements, directives and contract clauses pertaining to computer equipment, hardware, software, information technology, sensitive information and Government equipment. The use of Contractor-owned software shall be approved by the COTR.

The contractor shall provide and ensure the currency of all non-ODIN software, software upgrades, licenses and renewals, including those for NASA-owned software such as HealthCalc (Fitness Center) and OHM (Medical Services Clinic).

2.3 Phase-In Plan

The Contractor shall implement a phase-in plan that ensures continuity of services, full personnel orientation and a smooth transition from the incumbent Contractor. The Contractor shall complete phase-in in all areas covered under the base services sections of this SOW, as well as any IDIQ tasks funded at contract award, within 30-days of the effective date of the contract and shall assume full contract responsibility on the full-performance date of the contract.

2.4 Safety and Health Plan

The Contractor shall develop a site-specific safety and health plan in accordance with NPR 8715.3>Appendix E, Sample Safety and Health Plan for Service or Operations Contracts (http://nodis3.gsfc.nasa.gov/displayDir.cfm?Internal_ID=N_PR_8715_003C_&page_name=AppendixE), and provide the plan to the COTR and CO within 60 days of the effective date of the contract.

2.5 Program Coordination and Communication

The Contractor shall maintain communication with relevant professional staff in OCHMO and in SHED as well as in the surrounding local communities to effectively and efficiently coordinate GRC occupational health programs.

The Contractor shall immediately inform the COTR, ACOTR and CO in cases of emergency involving exposures or hazards that appear to be dangerous to health or life and shall provide recommendations to alleviate the emergency conditions.

The Contractor shall maintain cognizance of Federal, State, and NASA documents and trade publications to determine applicability and impact of any new or proposed regulations or best practices on operations; then alert the COTR and CO, in writing, of any changes affecting this contract and recommend an implementation plan for identified changes.

The Contractor shall immediately communicate to the COTR and CO, in writing, any information regarding Contract personnel, equipment, supplies, facilities or other situations or influences that could affect the successful performance of any element of the SOW.

2.6 Participation on GRC Committees and Teams

Contractor personnel shall participate in GRC and SHED committees and working groups having the common goal of protecting, improving and maintaining the health and wellness of the GRC workforce.

The Contractor shall regularly attend regular meetings of committees and working groups that are related to the scope of services in this SOW. These include the following, but may include others identified by the COTR.

- Contractor Safety Committee (monthly)
- Operations Team (weekly)
- SHED “all-hands” meetings (monthly)
- Safety and Mission Assurance Directorate (SMA) “all-hands” meetings (quarterly)
- Pandemic Awareness Planning (approximately quarterly)

2.6.1 Emergency Preparedness Planning

The Contractor shall participate in GRC emergency response and emergency preparedness planning activities related to Lewis Field and shall integrate acute medical care capabilities into the GRC emergency response plan. Plans shall be coordinated and communicated within SHED and with local external health department(s), state, defense, and federal officials, per direction of the COTR.

2.6.1.1 Emergency Operation Plan and Continuity of Operations Sub-Plan

The Contractor shall participate in the development of an Emergency Operation Plan and a Continuity of Operations sub-plan for providing triage services and medical care at Lewis Field for multiple patients in emergency situations such as natural disasters, pandemics, and incidents involving biological, chemical, radiation and nuclear agents, weapons of mass destruction, and mass-casualty events. The primary objective of the plan shall be to handle multiple patients at the Clinic, but the plan shall address field situations. The plan shall include provisions for handling potentially contaminated patients who walk in to the Clinic and for the treatment of these patients.

The Emergency Operation Plan and Continuity of Operations sub-plan shall include provisions for supporting a Point of Distribution (POD) at Lewis Field.

Emergency preparedness planning shall be coordinated with Critical Incident Stress Management (CISM) plans, as required in Section 8.5.

The Contractor shall develop the Emergency Operation Plan and Continuity of Operations sub-plan within six months of contract award, in collaboration with other emergency preparedness planning stakeholders as described in this SOW, and shall provide copies of the

plan to the CO and COTR ACOTR six months and one year after the full-performance date of the contract and annually thereafter.

The actual implementation of Emergency Medical Services for these and other Center-wide emergencies would be outside the scope of the base services portion of this SOW but is covered under Section 10.1 (IDIQ) Emergency Response Medical Care Directives.

The actual implementation of a POD is outside the scope of the base services portion of this SOW but would be covered under Section 10.2 (IDIQ) Support for Point of Distribution (POD).

The implementation of Critical Incident Stress Debriefing (CISD) services is outside the scope of the base services portion of this SOW but is covered under Section 10.3 (IDIQ) Critical Incident Stress Management (CISM).

2.6.1.2 Emergency Response Drills and Exercises

The Contractor shall participate in and provide support for Lewis Field emergency response table-top exercises and drills, to include at a minimum, one half-day table-top exercise and one half-day simulated emergency drill annually.

The Contractor shall hold quarterly emergency response drills and exercises at the Medical Services Clinic and Fitness Center to ensure and maintain preparedness of Contract personnel.

2.6.2 NASA and GRC Document Development and Review

The Contractor shall assist in the development, update and ongoing annual review of GRC SHED and NASA Agency-wide policies and procedures that are related to the scope of services of this SOW. These include chapters of the NASA Occupational Health Program Procedures, as referenced in Section 12.3, the GRC Occupational Health Programs Manual, as referenced in Section 12.5, and related brochures and pamphlets as well as other materials identified by the COTR.

2.6.3 Participation in Agency Meetings and Videoconferences

Contractor personnel shall support, prepare for and participate in Agency-wide committees and regularly attend off-site national meetings, monthly local videoconference presentations and videoconference training sessions (ViTS) that are related to the scope of services of this SOW. These include the following as well as others identified by the COTR and relevant OCHMO program managers:

- Electronic Health Records System (EHRS)
- Health Promotion and Wellness Team and associated subcommittees
- Occupational Health Meeting (one week annually, held at conference destination typically in south-central US) [attendance shall include, at a minimum, Medical Director, Employee Assistance Program (EAP) Counselor (Primary), Fitness Center Director and at least one Nurse with significant involvement in Occupational Medicine Program]
- NASA Safety Directors' and Occupational Health Program Managers' Meeting (one week annually, held at NASA Kennedy Space Center)
- One special off-site meeting per year organized by OCHMO (Primary EAP Counselor and Fitness Center Director at minimum).

2.6.4 Medical Consultation as Required

Contractor personnel shall respond to requests for expert medical and occupational health advice and guidance for line organizations (e.g., Branches and Divisions), projects, teams, employee groups and GRC management, as approved by the COTR or ACOTR.

2.6.5 Promotion of Occupational Health Program Services

The Contractor shall effectively publicize and promote the services, programs and events covered under this SOW to the GRC workforce with the intent to maximize program visibility and accessibility.

The Contractor shall make use of established vehicles of internal mass communication, such as email, website content, flyers, posters and posting of notices on the "Today at Glenn" website, to inform GRC employees of services, programs, events and related occupational health information of a critical nature.

2.6.5.1 Occupational Health Services Website

The Contractor shall develop and provide current, timely and comprehensive content for GRC Occupational Health Services web pages for the primary purpose of communicating to the GRC workforce the content and availability of Contract-provided and Contract-associated information, services and events. The OHS web page content shall be provided to the SHED web curator for posting and coordination with other web pages maintained by SHED.

2.7 Contract Management Reviews and Evaluation

The Contractor shall conduct, participate in and provide input for, as requested by the COTR or ACOTR, periodic reviews and evaluations, which may include the following and others, as directed by the COTR:

Tri-annual audits of GRC Occupational Health Programs by OCHMO (scheduled for May, 2011, and tri-annually thereafter).
Annual internal reviews of SHED occupational health programs
Monthly self-evaluations and periodic audits of OHS Contractor programs covered under this SOW

2.7.1.1 Contractor Self-Evaluation

The contractor shall implement a comprehensive self-evaluation and process that fosters continuous improvement in each area of contract work under the SOW. The evaluation process shall include a process and instrument for acquiring customer feedback on services provided in Sections 4-9 of the SOW, statistical measures of all services provided and other measurable contract activity, customer feedback and other Contractor performance metrics for evaluation, analyses of performance metrics, comprehensive report template, and a process for incorporating the results of the evaluation into ongoing operations to achieve continuous improvement.

The evaluation and reporting shall encompass all Contract-associated activity performed by Contractor personnel as well as by subcontractors and affiliates (providers whose services are made available directly to employees on a pay-to-participate basis) who provide any of the services covered in this SOW.

Prior to the full performance date of the contract, the Contractor shall develop, for COTR approval, the self-evaluation process, statistical measures, performance metrics, customer feedback instrument and report template described in Sections 2.7.2 and 2.7.3 below. The Contractor shall provide these materials to the COTR and CO before the full performance date of the contract.

2.7.2 Contract Reports

The Contractor shall prepare and submit the Monthly Contract Status/Technical Activity Report to the COTR, ACOTR and CO on a monthly and annual basis. The Contractor shall utilize the report template provided under section 2.7.1.1 for the purpose of documenting monthly contract status and activity (henceforth called "Monthly Contract Status/Technical Activity Report"). Reports shall document activity in key contract areas for the preceding reporting

period. The report shall also include cumulative totals of activity over the entire contract performance period. For all activities which result in a collection of funding, the report shall include an additional separate listing of these services rendered, prices charged, and a total of all funding collected during the month. This shall also include a cumulative total over the entire contract period.

The report shall include a narrative summary and evaluation, tabular presentation of statistical data, performance metrics as described in Section 2.7.3, analyses of statistical data and performance metrics, as well as a specific plan for addressing sub-par performance and for continuously improving performance on each metric. The Government will also evaluate Contractor performance accordance with Clause H.19, Contractor Evaluation and Deduct.

Statistical data included in Contract Status/Technical Activity reports shall explicitly note when the same service or event is reported in more than one category. For example, if a test or service, such as an audiometric examination, is included in a larger service, such as a health maintenance examination, it shall also be tracked and reported separately if the specific test or service is specifically required under this SOW. Statistical data presentations shall clearly identify the components of larger services and programs that are also separately reported, and the statistics for those component tests or services shall be cross-referenced. Where applicable, statistical measures shall include reporting of separate CS and SSC data as well as total measures for the larger workforce.

The Contractor shall provide a final Contract Status/Technical Activity Report to the CO and COTR with total contract cumulative data in each area.

Reports shall be prepared in accordance with applicable regulations, policies and directives concerning patient confidentiality, including those listed in Section 2.8.

2.7.3 Contract Performance Metrics

The Contractor shall utilize a comprehensive system of metrics that covers key elements of contract performance, as specified in the base services sections of this SOW. Performance goals shall be developed for each metric.

The Contractor shall implement and maintain a process for assessing quantitative performance metrics at regular intervals not to exceed one

month. This process shall include analysis of trends and prediction of future metrics.

Metrics shall include the results of Customer Feedback Assessments, as described in Section 2.7.3.1. Metrics shall be included in the monthly and annual reports as required in Section 2.7.2.

The Government will also evaluate Contractor performance in accordance with Clause H.19, Contractor Evaluation and Deduct.

2.7.3.1 Customer Feedback Assessments

The Contractor shall utilize a Customer Feedback assessment process to quantify, document, track and assess customer satisfaction for key elements of the contract that involve interface with non-Contract personnel. The process shall ensure that statistically representative data is acquired and presented.

Customer Feedback assessments shall be used to acquire both qualitative and quantitative data. Customer Feedback assessment responses are mailed directly from the customer to the COTR. After COTR review, customer responses will be returned to the Contractor for inclusion in the Monthly Contract Status/Technical Activity Report and for record keeping purposes.

2.8 Contract Records Management

The Contractor shall maintain electronic document records of all newly-created written products, administrative communications and operational procedures required for the implementation of the contract work as well as records of employee certification and training, and other auditable activities.

All contract communications and records are subject to Clause H.22, Release of Sensitive Information, and shall be maintained by the Contractor according to the following, as applicable:

5 U.S.C. § 552a NPD 1382.17	Privacy Act of 1974 NASA Privacy Act System of Records Notices (NASA 10HIMS—Health Information Management System)
NPR 1382.1 14 CFR §1212 P.L.104-191	NASA Privacy Procedural Requirements NASA Privacy Act Regulations Health Insurance Portability and Accountability Act of 1996 (HIPAA)
29 CFR §1904	Recording and Reporting Occupational Injuries and Illnesses

Medical Quality Assurance records shall be maintained in accordance with NPD 1850.1, NASA Medical System Quality Assurance and NPR 1850.1, Quality Assurance of the NASA Medical Care System.

All records are the property of NASA. At the completion or termination of this contract, the Contractor shall leave all Government-owned data at Glenn Research Center. The Contractor shall ensure the portability of all medical data to allow its transfer to other systems if required by the Government.

The Contractor shall provide NASA or authorized representative access to all Government records. The Government reserves the right to inspect, audit, and copy record holdings. All records, both paper and electronic, shall be available for Agency Medical quality control review.

3.0 MANAGEMENT AND ADMINISTRATIVE REQUIREMENTS – MEDICAL SERVICES CLINIC OPERATIONS

The Contractor shall provide all personnel, supplies, materials and resources to operate the Medical Services Clinic. The MSC shall provide services for the GRC workforce, contractors, and visitors as described in the base services sections of this SOW.

3.1 Clinic Facility

The MSC is located in the Employee Services Building (Building 15) on the Lewis Field campus. The 3800-ft² facility consists of 4 patient exam rooms, audiometric evaluation room with booth, X-ray room, lab draw/stress test room, spirometer/vision/tonometry test room, dirty utility room, meds room, reception/waiting area and staff offices.

Except where specifically noted in this SOW, or in case of emergencies requiring field response, all medical services provided under the base services sections of this SOW shall be provided at the MSC.

The Contractor shall ensure the regular upkeep and management of the MSC. NASA will provide maintenance and repair for the MSC. The Contractor shall coordinate with the on-site maintenance contractor and other contractors regarding Government-furnished maintenance services, after approval by the COTR.

The Contractor shall conduct periodic assessments of the condition of MSC facilities and recommend to the COTR changes that would contribute to the effectiveness of operations.

3.2 Hours of Operation

The MSC shall be available during normal GRC hours of operation, excluding Federal holidays.

The MSC hours of operation shall be, at a minimum, Monday through Friday 7:00 AM through 11:30 AM and 12:30 PM through 4:00 PM.

The MSC shall be available to respond to emergencies during the lunch period.

3.3 Staffing Levels

The Contractor shall staff the MSC to accommodate scheduled appointments, same-day and walk-in sick care appointments and emergency care of illness and injury.

The Contractor shall respond to changing service requirements, including work resulting from unexpected surges or reductions, regulatory or policy changes, budgetary adjustments or other factors and shall prioritize activities to best accomplish the intent of the SOW.

At a minimum, one certified health professional (Nurse, Nurse Practitioner, Physician or Physician Assistant) shall be on duty at all times, including during the lunch period and other times of reduced operations such as special one-day events and staff training programs or meetings that require the clinic staff to be away from the MSC.

3.3.1 Replacements for Absences

The contractor shall provide comparably-qualified replacement staff for any staff member on or before the second day of absence. All replacement staff shall be subject to the same professional standards of conduct, training and credentialing that apply to Contractor employees who regularly provide support under this contract. Replacement employees shall be familiar with the SOPs for the relevant SOW element(s) prior to performing any work under this contract.

3.3.2 Male and Female Practitioners Available for Physicals

The Contractor shall ensure that both male and female practitioners are available to perform physical examinations offered under Section 4.0. Patients shall be offered the choice of male or female practitioner when scheduling appointments.

3.4 Cleanliness and Hygiene

The Contractor shall ensure the cleanliness and orderliness of the MSC. The Contractor shall coordinate housekeeping practices with the Government-furnished janitorial services.

The Contractor shall establish and implement an infection control program to minimize the transmission of disease.

3.4.1 Medical Waste Management

The Contractor shall collect, store and package medical waste in accordance with GLM-QS-8500.1>Chapter 6, Medical Waste Management>Section 6.3, Guidelines for Waste Handling Area User (<http://smad-ext.grc.nasa.gov/shed/pub/epm/epm26-MED-WASTE%2840%29.pdf>). The Contractor shall attend on-site training in the handling of infectious waste, provided by the GRC Waste Management Team.

Medical waste disposal services will be provided by the GRC Waste Management Team.

3.5 Clinic Supplies and Equipment

The Contractor shall provide all materials, supplies and services required for the effective operation of the MSC under all base services sections of this SOW. The Government will provide the equipment and other items listed in Attachment D, Installation-Accountable Government Property.

3.5.1 Equipment Maintenance, Repair and Calibration

The Contractor shall calibrate, maintain, repair, and, where appropriate, recommend replacement of MSC equipment in accordance with applicable NASA, GRC and regulatory requirements, best-practices guidelines and manufacturers' recommendations, whichever is more conservative, and shall ensure that all equipment is within calibration and in proper working order at all times.

The Contractor shall establish agreements for preventive and corrective maintenance, performance checks, repair services, and calibration for the X-RAY machine, audiometer and all other clinic equipment, as appropriate, and shall provide those services. Current agreements will automatically terminate on the full performance date of the contract.

Diagnostic X-ray equipment shall be surveyed and inspected biannually by a qualified medical physicist to ensure compliance with

U.S. Food and Drug Administration (FDA) requirements as specified in Section 4.15.e and 4.15.f of the most recent version of NPR 1800.1.

The Contractor shall immediately inform the COTR and CO of any equipment malfunction or deterioration that has the potential to adversely affect the quality of services provided under the contract.

3.5.2 Replacement Planning and Procurement

The Contractor shall prepare and submit to the COTR and CO an annual equipment replacement plan for Government-furnished equipment and shall implement the plan as approved by the COTR.

The Contractor shall provide the services necessary to research, identify, evaluate and recommend specific new and replacement equipment for the Medical Services Clinic. The Contractor shall specify, purchase, receive, and accept the equipment, as directed by the COTR, in accordance with applicable NASA Procurement policies.

Equipment purchase costs are excluded from the base services portion of this SOW but are covered under Section 10.4 (IDIQ), Purchase of Medical Services Clinic and Fitness Center Equipment. Labor and other administrative costs associated with equipment purchases are covered under this Section (3.5.2) of the SOW.

The contractor shall update the equipment listing as items are purchased under the IDIQ portion of the contract and shall provide an updated equipment listing to the CO and COTR six months and one year after the full-performance date of the contract and annually thereafter. All equipment shall become the property of the Government.

3.5.3 Medicines and Medical Supplies

The Contractor shall provide all medications and medical supplies necessary to operate the OHS contract as described in the base services sections of this SOW. These shall include serums for immunizations and inoculations, pain medications, antibiotics, supplies and medications for treating acute allergic reactions and over-the-counter medications.

The Contractor shall maintain a sufficient stock of medications and supplies to effectively perform the work covered in the base services sections of this SOW. The Contractor shall purchase only those medicines and supplies necessary for the effective operation of the

MSC under the base services sections of this SOW with the following exception.

The Contractor shall also purchase those medicines and supplies necessary to perform the potential IDIQ task covered in Section 10.1, Emergency Response Medical Care Directives. The Contractor shall maintain an inventory of medications and medical supplies consistent with the Emergency Operation Plan and Continuity of Operation Sub-Plan, as described in Section 2.6.1.1 of this SOW and OCHMO Emergency Preparedness guidelines (<http://ohp.ksc.nasa.gov/policies/pdf/WMDEmergencyPreparednessGuidelines.pdf>) and checklist (<http://ohp.ksc.nasa.gov/policies/pdf/WMDEmergencyPreparednessChecklist.pdf>).

The Contractor shall ensure that all medical supplies and drugs used in patient care are properly labeled with non-expired dates.

The Contractor shall ensure that all medications are stored appropriately.

3.6 Off-Site Service Providers

The Contractor shall provide the services of off-site providers where appropriate to fulfill the requirements of the base services sections of this SOW. Such services shall include those specified in this section, which cannot efficiently be performed onsite due to specialized equipment, labor or supply requirements.

3.6.1 Mammography Services

The Contractor shall provide baseline and annual mammography screening services as part of civil servant health maintenance examinations, per the requirements in Section 4.1.

The Contractor shall make arrangements with a minimum of three geographically-distributed fixed-facility sites that offer convenient access and scheduling for eligible employees.

Mammography service providers shall be accredited by the American College of Radiology.

3.6.2 Ophthalmologist Services

The Contractor shall provide for complete ophthalmic examinations for all civil servant employees who are enrolled in the Laser Program, per the requirements of Section 6.1.1.2.

The Contractor shall conduct the examinations in accordance with the most recent version of NPR 1800.1>Appendix C>Section 2>Table F, Hazardous Environments/Workplace Examinations (most recent version is http://ohp.ksc.nasa.gov/policies/pdf/1800_Appendix_G_Version_24_Jan_2010.pdf).

Ophthalmic examinations shall be performed by a physician who is Board-certified in ophthalmology and licensed to practice in the State of Ohio.

3.6.3 Travel Immunizations

The Contractor shall establish subcontract relationships with local travel clinics to provide specialized travel immunizations that cannot be stocked or are unavailable at the MSC at time of need. The Contractor shall refer civil servant employees receiving international traveler health services, covered in Section 4.3, to these clinics.

3.6.4 Clinical Laboratory Services

The Contractor shall provide the services of an accredited clinical laboratory to meet the requirements in this SOW.

The Contractor shall maintain a Clinical Laboratory Improvement Amendments (CLIA) certificate for waived laboratory tests.

The Contractor shall arrange for laboratory specimens to be picked up daily and for results to be transmitted to the MSC electronically and by hard copy.

The Contractor shall ensure the confidentiality of electronically transmitted laboratory results.

The contractor shall prepare and handle specimens according to the laboratory's specifications.

3.6.5 Radiologist Services

The Contractor shall provide the services of a Board-Certified radiologist to read and interpret X-RAYS from the MSC. All asbestos- and silica-related chest X-RAYS shall be read by a qualified "B" reader. Radiologist services shall include a written report. All X-RAY film and other media shall be returned to the MSC and shall become the property of the Government.

3.7 Standard Operating Procedures

The Contractor shall develop Standard Operating Procedures for the MSC. SOPs shall address methods, procedures, equipment and training to be used in completing the requirements of the base services sections of this SOW. The Contractor shall provide a copy of SOPs to the COTR and ACOTR six months and one year after the full-performance date of the contract and annually thereafter.

The Contractor shall ensure that all Contract personnel are trained in the SOPs and have knowledge of and access to their location at all times.

The Contractor shall maintain, review and update SOPs as necessary.

SOPs shall become the property of NASA.

The Contractor shall operate the MSC in accordance with NASA and GRC directives, policies and guidelines, including the management-directed principles of the NASA Medical Quality Assurance Program. The Contractor shall develop, maintain and implement a medical quality assurance program that evaluates all aspects of medical care provided in compliance with the most recent version of NPR 1800.1 and NPR 1850.1. The Contractor shall provide a copy of the written medical quality assurance program six months and one year after the full-performance date of the contract and annually thereafter.

3.8 Medical Services Clinic Records Management

The Contractor shall provide administrative support for medical services through the use of a health information management system that supports physical examination management, patient scheduling and notification, reception desk operations, and records management with the capability for statistical and analytical data collection and retention.

The Contractor shall make use of the existing Government-owned Occupational Health Manager (OHM) software or an alternate contractor-provided system with equivalent functionality, after COTR approval.

3.8.1 Employee Medical Records

The Contractor shall maintain accurate and complete medical records of all MSC patients for NASA. Current patient records will be made available to the Contractor in their existing form during the contract phase-in period.

The Contractor shall maintain an accurate and complete electronic database of patient medical records.

The Contractor shall ensure that patient medical records, whether Government-furnished or Contractor-developed, are securely and confidentially maintained in accordance with the following, as applicable:

5 U.S.C. § 552a NPD 1382.17	Privacy Act of 1974 NASA Privacy Act System of Records Notices (NASA 10HIMS—Health Information Management System)
NPR 1382.1 14 CFR §1212 P.L.104-191	NASA Privacy Procedural Requirements NASA Privacy Act Regulations Health Insurance Portability and Accountability Act of 1996 (HIPAA)
29 CFR §1904	Recording and Reporting Occupational Injuries and Illnesses
29CFR §1910.1020	Access to Medical and Exposure Records

The Contractor shall ensure access to an employee's medical records upon receipt of a signed release by the employee or receipt of a notarized designation by the employee or appropriate third party.

The Contractor shall comply with patient directions regarding the release of individual medical information and shall obtain any required consent forms prior to the release of the information.

All medical records (both hard copy and electronic records) shall remain the property of the Government.

3.8.1.1 NASA Electronic Health Records System (EHRS)

The Contractor shall transition existing health data management from paper and existing electronic records into the Agency-wide EHRS within six months of initial implementation (expected "go-live" to occur during FY 2011), per the requirements in Section 3.8.1.1. The Contractor shall create electronic records in EHRS for all existing

patient records and for all new patient encounters and shall transfer critical historical data as appropriate. The Medical Director shall establish a policy for identifying historical data to be imported into EHRS.

The Contractor shall archive existing paper records once EHRS is fully operational.

NASA will provide the EHRS software and annual upgrades and license renewals for this software.

The Contractor shall participate in all training sessions on the EHRS system (Medgate™ GX Occupational Health Software, to be provided by NASA), including Agency-wide Videoconferences (ViTS) as well as a 3-day course to be held at GRC for all MSC personnel, and shall ensure that all Contract personnel become adequately trained in the use of EHRS.

The Contractor shall extract all historical audiometric monitoring data on all hearing conservation program participants and enter the data into EHRS.

The Contractor shall use the EHRS for the generation of reports and metrics.

4.0 PREVENTIVE MEDICINE PROGRAM

The Contractor shall provide a preventive medicine program to promote, maintain, and improve the physical and psychological well-being of the workforce.

4.1 Health Maintenance Examinations

The Contractor shall provide voluntary annual health maintenance examinations for all civil servant employees.

4.1.1 Performance Criteria

The Contractor shall offer examinations in accordance with the most recent version of NPR 1800.1>Appendix C>EXAMINATION PROTOCOLS>Section 6, Voluntary Health Maintenance (most recent version is http://ohp.ksc.nasa.gov/policies/pdf/1800_Appendix_G_Version_24_Jan_2010.pdf). Additional tests and procedures may be performed, consistent with standard medical practice, based upon the employee's age, gender, general physical condition and risk factors.

The Contractor shall initiate scheduling of employee appointments for annual health maintenance examinations with a minimum 30-day advance notice to assure flexibility in rescheduling if circumstances dictate. The Contractor shall coordinate health maintenance physical examinations with Occupational Medicine examinations covered in Section 6.1 to the maximum extent practicable for employees who are enrolled in medical monitoring programs or who require other job-related examinations.

4.1.2 Complete Physical Examination

The Contractor shall offer a complete physical examination at three-year intervals during the employee's birth month. The complete physical examination shall be conducted by a physician or nurse practitioner.

4.1.2.1 Included Components – Complete Physical Examination

Complete physical examinations shall include the components listed in the most recent version of NPR 1800.1>EXAMINATION PROTOCOLS C>Section 6>Table A, Complete Health Maintenance Examination.

4.1.3 Partial Physical Examination

The Contractor shall offer a partial physical examination in the interim years during the employee's birth month.

4.1.3.1 Included Components – Limited Physical Examination

Partial physical examinations shall include the components listed in the most recent version of NPR 1800.1>Appendix C>Section 6>Table B, Annual Health Maintenance Examination (most recent version is http://ohp.ksc.nasa.gov/policies/pdf/1800_Appendix_G_Version_24_Jan_2010.pdf).

4.1.4 Distribution of Exam Results

The examination shall include a review and discussion of examination findings and recommendations with the employee.

The Contractor shall provide a report with a narrative summary of the employee's health. This narrative shall note any conditions that warrant further attention by the employee's personal physician or other healthcare providers, including those specified in Section 4.1.5. The Contractor shall provide a copy of this report to the employee.

4.1.5 Follow-up and Monitoring of Abnormal Findings

The Contractor shall provide coordination, follow-up and monitoring of abnormal findings detected as a result of health maintenance examinations within the following scope and schedule:

4.1.5.1 Hypertension

The Contractor shall offer blood pressure evaluation and referral as well as consultation with the employee's private physician until adequate therapeutic control has been established.

4.1.5.2 Hyperlipidemia

The Contractor shall offer quarterly review with referral to and consultation with the employee's private physician until adequate therapeutic control has been established.

4.1.5.3 Substance Abuse Problems

The Contractor shall provide counseling and referral to EAP for employees where possible substance abuse is suspected through medical observation, interview or supervisor recommendation.

4.1.5.4 Other Conditions

The Contractor shall conduct follow-up and interim medical histories of employees having conditions requiring treatment by their private medical provider.

4.1.5.5 Exercise Prescriptions

The Contractor shall provide exercise prescriptions and referral to the Physical Fitness Program, where appropriate, as part of the health maintenance examination report and examination review discussion.

4.1.5.6 Nutrition Program Referrals

The Contractor shall provide referrals to the Dietician for nutrition counseling, where appropriate, as part of the health maintenance examination report and examination review discussion.

4.1.5.7 Employee Assistance Program Referrals

The Contractor shall provide referrals to the Employee Assistance Program, where appropriate, as part of the health maintenance examination report and examination review discussion.

4.2 Medical Clearance for Fitness Center Membership

The Contractor shall provide required medical clearance for civil servant employees for Fitness Center membership in accordance with the most recent version of NPR 1800.1>Appendix C>EXAMINATION PROTOCOLS>Section 6>Table C, Fitness Center Clearance (most recent version is

http://ohp.ksc.nasa.gov/policies/pdf/1800_Appendix_G_Version_24_Jan_2010.pdf) to identify any potential or actual health problems and minimize risks.

The Contractor shall provide medical clearance for Fitness Center membership for SSC employees, NASA civil servant retirees and other individuals who are eligible for FC membership on a cost-reimbursable pay-to-participate basis, for a fee to be paid directly to the Contractor by the individual or the individual's company (for SSC employees).

The Contractor shall provide periodic medical clearance renewal for Fitness Center participants as specified in the most recent version of NPR 1800.1>Appendix C>Section 6>Table C (most recent version is http://ohp.ksc.nasa.gov/policies/pdf/1800_Appendix_G_Version_24_Jan_2010.pdf).

4.3 International Traveler Health Services

The Contractor shall provide examinations, travel counseling and immunizations in accordance with the most recent version of NPR 1800.1>Appendix C> EXAMINATION PROTOCOLS>Section 5>Table C, International Traveler (most recent version is http://ohp.ksc.nasa.gov/policies/pdf/1800_Appendix_G_Version_24_Jan_2010.pdf), for employees who have work-related international travel plans. These services shall be provided within two weeks of initial request.

International traveler health services for SSC employees shall be provided on a cost-reimbursable basis.

The Contractor shall provide all immunizations required by local, State, Federal and international laws or regulations and shall offer other immunizations in accordance with Center for Disease Control guidelines or as requested by NASA. The Contractor shall refer employees to local travel clinics for immunizations that cannot be stocked or are unavailable at the MSC at time of need.

The Contractor shall certify international medical clearances from private medical physicians, when requested by the employee, as an alternative providing the examinations and immunizations required under this section (4.3).

The Contractor shall provide an overseas medical kit to the international traveler, appropriately stocked with over-the-counter medications and supplies relevant to foreign business travel. The Contractor may restock and reissue returned travel kits.

The Contractor shall provide, prior to travel on international assignments, information on emergency medical evacuation insurance provided through an Agency-wide contract with International SOS.

4.4 Immunization Programs

The Contractor shall offer occupational-health-related immunizations compatible with good public health and preventive medicine initiatives. Immunizations shall be made available to employees on a voluntary basis.

4.4.1 Annual Influenza Immunizations

The Contractor shall offer and provide to civil servant employees, influenza immunizations during the flu season in accordance with vaccine availability and the Centers for Disease Control and Prevention (CDC) guidelines for order of eligibility.

The Contractor shall offer influenza immunizations to SSC employees on a cost-reimbursable pay-to-participate basis, to be paid directly to the Contractor by the employee or employee's company.

4.4.2 Special Immunization Directives

The Contractor shall respond to special immunization directives issued by OCHMO. Special immunization directives, such as the H1N1 vaccine, would be outside the scope of the base services portion of this SOW but are covered under Section 10.5, (IDIQ) Protocols Required by OCHMO.

4.5 Integration into GRC Occupational Health Program

Preventive Medicine services shall be integrated with the other elements of the Occupational Health Services contract.

5.0 EMERGENCY AND THERAPEUTIC MEDICINE SERVICES

The Contractor shall provide initial emergency care, consisting of medical evaluation, medical diagnosis and treatment for injury and illness, to all GRC personnel, visitors and others who require emergency treatment at GRC during business hours. These services are provided at the GRC Medical Services Clinic.

The Contractor shall infrequently provide emergency medical services and oversight at Lewis Field sites and facilities other than the MSC. The primary emergency medical response is provided by ambulance services from adjacent communities and is entirely outside the scope of the OHS contract.

5.1 Initial On-Site Treatment of Occupational Illness and Injury

The Contractor shall provide medical treatment, on a walk-in basis, to CS and SSC employees having an occupational injury or illness, inclusive of applicable diagnostic tests, within the capabilities of the GRC Medical Services Clinic.

The Contractor shall refer patients to an appropriate local medical facility or physician for additional or supplemental treatment. The Contractor shall provide initial follow up on employees who have returned from a lost time illness or injury.

5.1.1 Incident Reporting Information System (IRIS)

The Contractor shall support the Incident Reporting Information System (IRIS), a comprehensive Agency-wide web-based system that tracks work-related illnesses and injuries.

The Contractor shall enter basic information into IRIS and provide support for associated reviews and reports related to work-related injuries and illnesses for employees who visit the Medical Services Clinic for initial medical treatment.

The Contractor shall initiate data entry in IRIS within 24 hours of initial evaluation.

5.2 Treatment of Acute Non-Occupational Illness and Injury

The Contractor shall provide medical treatment, on a walk-in basis, to CS and SSC employees having a non-occupational injury or illness, within the capabilities of the GRC Medical Services Clinic.

The Contractor shall evaluate any patient presenting with minor acute non-occupational illnesses and injuries. If the diagnosis is apparent and minimal treatment (e.g., first aid) without release from work is appropriate, requiring no follow-up, then treatment shall be rendered and the individual returned to duty. If these conditions warrant diagnostic or consultative services beyond that available at the GRC Medical Services Clinic, or if a private physician's services shall be necessary to ensure comprehensive evaluation or treatment following first care necessary for stabilization and transport, the individual shall be referred to the private physician rather than being given further treatment at the GRC Medical Services Clinic. Treatment beyond the initial care for non-occupational illness or injury is the responsibility of the individual.

5.3 Emergency Medical Services for Center-Wide Emergencies

The Contractor may be required to prepare for or provide medical response for unusual emergency situations, particularly those involving multiple victims such as natural disasters, vehicle and airplane crashes, facility accidents and terrorist attacks. Emergency Medical Services for these and other Center-wide emergencies would be outside the scope of the base services portion of this SOW but are covered under Section 10.1 (IDIQ) Emergency Response Medical Care Directives.

5.4 Administration of Prescribed Medicine and Tests

The Contractor shall administer treatments, medications, or tests (such as shots, blood pressure checks, hormonal therapy, or other tests) for CS employees when prescribed by the employee's private physician if these on-site activities enable the employee to remain at work for the balance of the normal work shift or are otherwise in the best interest of the Government. Services requested by the employee's private physician must be in writing. An OHS Contractor physician shall evaluate and approve, as appropriate, the written request. The employee shall furnish all necessary medications and required specialized equipment.

5.5 Medical Support for Automated External Defibrillators (AED)

The Contractor shall provide medical oversight for the GRC Center-wide AED Program (70 AEDs at Lewis Field and PBS sites) and ensure that medical protocols meet the requirements of the GRC AED Program, in accordance with GLM-QS-1800.1>Chapter 18 (<http://smad-ext.grc.nasa.gov/shed/pub/ohpm/ohpm18-aed.pdf>).

The Medical Director shall serve as the physician-of-record for the GRC AED Program.

The Contractor shall coordinate with and provide technical guidance to the GRC AED Program Lead in the planning and execution of these services.

The Contractor may be required to manage and implement the AED Program for GRC. Management and implementation of the AED program are outside the scope of the base services portion of this SOW but are covered under Section 10.6 (IDIQ) Automated External Defibrillator (AED) Program.

5.5.1 CPR Training and Certification

The Contractor shall provide training (either AHA AED/BLS or American Red Cross AED/CPR training or equivalent) leading to

certification and certification maintenance for Lewis Field and PBS AED responders.

5.6 Integration into GRC Occupational Health Program

Emergency and Therapeutic Medicine services shall be integrated with the other elements of the Occupational Health Services contract.

6.0 OCCUPATIONAL MEDICINE SERVICES

The Contractor shall provide comprehensive Occupational Medicine services for the GRC workforce in accordance with the most recent version of NPR 1800.1 and GLM-QS-1800.1.

A certified occupational health nurse (COHN-S) shall manage, oversee or and/or review all functions and activities covered under this section (6.0) and shall serve as the liaison with SHED program managers responsible for specific occupational health programs.

6.1 Occupation-Related Examinations and Evaluations

The Contractor shall provide the occupation-related medical evaluations listed in the most recent version of NPR 1800.1>Appendix C>Physical Examination Matrix>Sections 1 – 5 (most recent version is http://ohp.ksc.nasa.gov/policies/pdf/1800_Appendix_G_Version_24_Jan_2010.pdf), which include physical examinations as well as laboratory and other tests as appropriate. These evaluations include pre-employment, pre-placement, surveillance, job certification, fitness-for-duty/ability-and-risk determination, special purpose and other evaluations as medically necessary. All evaluations shall be conducted in accordance with the detailed Examination Protocols specified in the most recent version of NPR 1800.1>Appendix C>EXAMINATION PROTOCOLS C>Sections 1 – 5 or OSHA (most recent version is http://ohp.ksc.nasa.gov/policies/pdf/1800_Appendix_G_Version_24_Jan_2010.pdf), Department of Transportation (DOT), American National Standards Institute (ANSI), Nuclear Regulatory Commission (NRC) or other applicable regulatory agencies, whichever is more stringent.

These evaluations shall be provided for Lewis Field and PBS civil servant and SSC employees in accordance with Table 1.3, except where noted in this Section (6.1) or in Table 1.3.

6.1.1 Medical Monitoring and Surveillance Programs

The Contractor shall provide medical monitoring and surveillance evaluations for CS and SSC employees.

Medical monitoring and surveillance evaluations for SSC employees are procured at the discretion of the SSC organization on a cost-reimbursable basis in accordance with Table 1.3, to be paid to the Contractor by the SSC organization.

The Contractor shall coordinate with the respective GRC Occupational Health program managers in the planning, execution and follow-up of medical monitoring duties in the context of the comprehensive programs. The responsible GRC program manager will provide the Contractor with the names of employees requiring occupation-related medical evaluations. The Contractor shall coordinate Occupational Medicine evaluations with health maintenance physical examinations covered in Section 4.1 of this SOW to the maximum extent practicable for CS employees who are enrolled in medical monitoring programs or who require other job-related evaluations covered in this section.

The Contractor shall provide medical support for the development, implementation, and conduct of employee training programs as requested by individual GRC occupational health program managers.

The Contractor shall acquire and maintain familiarity with the requirements and GRC-specific implementation of the comprehensive occupational health programs associated with medical monitoring duties included in this SOW. Such familiarity shall include personal protective equipment, employee training, exposure assessments and workplace conditions.

6.1.1.1 Surveillance Evaluations for Workers with Specific Potentially-Hazardous Exposures

The Contractor shall provide baseline and periodic medical evaluations for employees who have been identified by GRC as having potentially hazardous exposures to the agents listed in the most recent version of NPR 1800.1> Appendix C> Physical Examination Matrix> Section 1, Specific Potentially Hazardous Exposures (most recent version is http://ohp.ksc.nasa.gov/policies/pdf/1800_Appendix_G_Version_24_Jan_2010.pdf). Evaluations are currently being provided for the following agents:

Arsenic
Asbestos
Cadmium

Chromium
Lead
Mercury
Polychlorinated Biphenyls (PCB)
Silica Dust

The Contractor shall conduct the examinations in accordance with the most recent version of NPR 1800.1> Appendix C> Examination Protocols> Section 1, Surveillance Examinations for Workers with Specific Potentially Hazardous Exposures (most recent version is http://ohp.ksc.nasa.gov/policies/pdf/1800_Appendix_G_Version_24_Jan_2010.pdf).

The Contractor shall coordinate with the GRC Operations Team Lead to determine appropriate corrective action following the receipt of alerts relative to newly recognized health hazards, carcinogens, mutagens, and other agents. In the absence of a regulatory or NASA standard, the Contractor shall follow National Institute for Occupational Safety and Health (NIOSH) criteria documents or other guidance for medical surveillance of exposed personnel.

6.1.1.2 Surveillance Evaluations for Workers Associated with Hazardous Environments

The Contractor shall provide baseline and periodic medical evaluations for employees who have been identified by GRC as being associated with hazardous environments or workplaces or exposed to the agents listed in the most recent version of NPR 1800.1> Appendix C> Physical Examination Matrix> Section 2, Hazardous Environments/ Workplace Examinations (most recent version is http://ohp.ksc.nasa.gov/policies/pdf/1800_Appendix_G_Version_24_Jan_2010.pdf). Evaluations are currently being provided for employees associated with the following hazardous environments:

Lasers (ophthalmic examinations)
Noise (audiometric monitoring)

The Contractor shall conduct the examinations in accordance with the most recent version of NPR 1800.1> >Appendix C> Examination Protocols > Section 2, Hazardous Environments/Workplace Examinations (most recent version is http://ohp.ksc.nasa.gov/policies/pdf/1800_Appendix_G_Version_24_Jan_2010.pdf).

The Contractor shall perform a fit-check of an appropriate Hearing Protective Device (HPD) and provide fitting retraining, as necessary, at the time of the employee's annual audiometric evaluation.

The Contractor shall coordinate with the GRC Hearing Conservation Program (HCP) Manager in the planning and execution of the Audiometric Monitoring Program and hearing protector fit-check and training services, in accordance with GLM-QS-1800.1>Chapter 3 (<http://smad-ext.grc.nasa.gov/shed/pub/ohpm/ohpm3-hcp.pdf>).

The Contractor shall provide the HCP Manager with digital files of audiometric monitoring data for employees enrolled in the HCP.

Audiometric monitoring services provided for SSC organizations shall be provided in conjunction with audiometric monitoring program management services covered in Section 6.3.1.

6.1.2 Certification Examinations

The Contractor shall provide baseline and periodic certification examinations for CS and SSC employees who have been identified by GRC as being assigned to perform duties listed in the most recent version of NPR 1800.1> Appendix C> Physical Examination Matrix> Section 3, Certification Examinations (most recent version is http://ohp.ksc.nasa.gov/policies/pdf/1800_Appendix_G_Version_24_Jan_2010.pdf). Examinations are currently being provided for employees in the following categories:

- Crane Operator/Ground Floor/Remote-Operation/High/Cabin/Pulpit [includes towmotors]
- Occupational Respirator Use [This examination shall include pulmonary function testing in addition to the requirements referenced above.]
- Soldering

The Contractor shall conduct the examinations in accordance with the most recent version of NPR 1800.1>Appendix C> Examination Protocols> Section 3, Certification Examinations (most recent version is http://ohp.ksc.nasa.gov/policies/pdf/1800_Appendix_G_Version_24_Jan_2010.pdf).

Certification examinations for SSC employees are procured at the discretion of the SSC organization on a cost-reimbursable basis in accordance with Table 1.3, to be paid to the Contractor by the SSC organization.

6.1.3 Flight-Associated Examinations

The Contractor shall provide baseline and periodic certification examinations for CS and SSC employees who have been identified by GRC as being assigned to perform duties listed in the most recent version of NPR 1800.1> Appendix C> Physical Examination Matrix> Section 4, Flight Activities (most recent version is http://ohp.ksc.nasa.gov/policies/pdf/1800_Appendix_G_Version_24_Jan_2010.pdf). Examinations are currently being provided for employees in the following categories:

- First Class Airman's Medical Certificate
- Second Class Airman's Medical Certificate
- Third Class Airman's Medical Certificate

The Contractor shall conduct the examinations in accordance with the most recent version of NPR 1800.1>Appendix C> Examination Protocols > Section 4, Flight Activities (most recent version is http://ohp.ksc.nasa.gov/policies/pdf/1800_Appendix_G_Version_24_Jan_2010.pdf).

Flight-associated certification examinations for SSC employees are procured at the discretion of the SSC organization on a cost-reimbursable basis in accordance with Table 1.3, to be paid to the Contractor by the SSC organization.

6.1.3.1 Private Pilot Examinations

The Contractor shall make private pilot flight examinations available to civil servant employees on a cost-reimbursable pay-to-participate basis at the time of their annual health maintenance examination. The Contractor shall charge a fee that represents the cost of the examination above the cost of an annual health maintenance examination, to be paid directly to the Contractor by the employee.

The Contractor shall make private pilot flight examinations available to SSC employees on a cost-reimbursable pay-to-participate basis for a fee to be paid directly to the Contractor by the employee.

The Contractor shall conduct the examinations in accordance with the most recent version of NPR 1800.1>Appendix C> Examination Protocols > Section 4, Flight Activities (most recent version is http://ohp.ksc.nasa.gov/policies/pdf/1800_Appendix_G_Version_24_Jan_2010.pdf).

6.1.4 Special Administrative Examinations

The Contractor shall provide Fitness-for-Duty and Return-to-Work evaluations for CS employees as requested by GRC management.

These examinations shall be conducted as specified in the most recent version of NPR 1800.1>Appendix C> Examination Protocols >Section 5, Special Administrative Examinations (most recent version is http://ohp.ksc.nasa.gov/policies/pdf/1800_Appendix_G_Version_24_Jan_2010.pdf).

6.1.4.1 Support for NASA Drug-Free Workplace Program

The MRO shall review all drug test results and discuss any positive or false positive results with the employee.

6.2 Medical Support for Federal Workers' Compensation Program

The Contractor shall provide medical support for the GRC Federal Workers' Compensation Program (FWCP). The Medical Director shall be responsible for the medical aspects of civil servant Workers' Compensation cases. This shall include providing medical evidence to the GRC FWCP Officer for claims that do not appear to be work-related. (Case management services are provided by the GRC FWCP Officer.)

The Contractor shall provide ongoing management of care, referral, and follow-up until the case is resolved or maximum medical improvement has been reached.

After the employee's personal physician has issued a clearance to return to duty, the Contractor shall perform a Return-to-Work medical evaluation and provide a Return-to-Work certificate and statement of any need for job modifications or accommodations, as appropriate.

6.3 Management of Medical Monitoring Programs

The Contractor shall assume responsibility for providing comprehensive medical monitoring programs for civil servant employees as described in this section.

The Contractor shall make use of medical monitoring data to identify trends that may be associated with the work environment, investigate those trends and recommend actions required for prevention.

The Contractor may be required to conduct detailed epidemiological analyses and studies to investigate disease trends or data from health maintenance examinations, medical monitoring evaluations or other sources that suggest a possible link to workplace hazards. These services are not included in the base services portion of this SOW but are covered under Section 10.7 (IDIQ), Epidemiological Studies.

6.3.1 Audiometric Monitoring Program

The Contractor shall assume responsibility for managing the audiometric monitoring component of the GRC Hearing Conservation Program. The Contractor shall provide a qualified individual to serve as the Professional Supervisor of the Audiometric Monitoring component of the Hearing Conservation Program, per the requirements in Section 2.1.1.5.

The Contractor shall provide the services of an audiologist to perform data review for hearing-loss-related concerns such as Standard Threshold Shift (STS) cases, other problem audiograms, and ability and risk determination requests. The audiologist shall provide the Medical Director with a written interpretation summary for each case that includes a determination of work-relatedness (for purposes of recordability), as appropriate, and recommendations for clinical audiological and/or medical (otolaryngologist) follow-up.

The Contractor shall provide clinical audiology and otolaryngology follow-up evaluations. Unless the problem has been determined by a qualified physician to be non-work-related prior to the follow-up evaluation, these evaluations shall be covered under this section of this SOW. Follow-up evaluations for employees whose hearing loss has been determined by a qualified physician to be non-work-related are the responsibility of the employee.

The Contractor shall provide comparable audiometric monitoring program management services for SSC organizations at the discretion of the SSC organization. Services shall be provided on a cost-reimbursable basis, to be paid to the Contractor by the SSC organization. These services shall be provided in conjunction with audiometric monitoring services provided under Section 6.1.1.2.

6.3.2 Bloodborne Pathogens

The Contractor shall assume responsibility for managing and implementing the GRC Bloodborne Pathogens Program per the requirements of GLM-QS-1800.1>Chapter 11 (<http://smad-ext.grc.nasa.gov/shed/pub/ohpm/ohpm11-bloodborne.pdf>). The Bloodborne Pathogens Program shall meet all requirements set forth in the most recent version of NPR 1800.1> Chapter 2 (Occupational Medicine)>Section 2.12 (http://nodis3.gsfc.nasa.gov/displayDir.cfm?Internal_ID=N_PR_1800_01C_&page_name=Chapter2).

The Contractor shall coordinate with and provide technical guidance to the GRC Operations Team in the planning and execution of this program.

6.4 Ergonomics Program

The Contractor shall schedule and provide ergonomic assessments for civil servant and SSC employees at the Lewis Field site who request such assessments. Assessments shall be conducted at the employee's worksite and shall include a report with recommendations for the employee. Ergonomic assessments and recommendations shall be conducted in accordance with GLM-QS-1800.1>Chapter 15 (<http://smad-ext.grc.nasa.gov/shed/pub/ohpm/ohpm15-ergo.pdf>).

The Contractor shall participate in the development and maintenance of the GRC Ergonomics Program.

The Contractor shall coordinate with and provide technical guidance to the GRC Ergonomics Program Lead in the planning and execution of these services. The Contractor shall ensure that all Contractor and NASA personnel performing ergonomic assessments are appropriately trained and shall arrange for and provide such training for all individuals who conduct assessments.

The Contractor may be required to manage a comprehensive ergonomics program for GRC. Those services are not included in the base services portion of this SOW but are covered under Section 10.8 (IDIQ) Ergonomics Program.

6.5 Prescription Safety Glasses Program

The Contractor shall provide on-site optician services a minimum of four half-days per month and supply services for prescription safety glasses. The services shall consist of fitting, displaying, repairing, and adjusting of prescription safety glasses. The Contractor shall provide and maintain all equipment required to supply these services.

The Contractor shall make the services of the Prescription Safety Glasses Program available to SSC employees on a full-cost-reimbursable basis.

Employees must supply a current prescription at the time of the optician appointment.

The Contractor shall provide dispensing services for prescription safety glasses. These services and all supplies and materials related to filling orders for safety glasses are outside the scope of the base services section of

this SOW and are included in Section 10.9 (IDIQ) Dispensing of Prescription Safety Glasses.

6.6 Medical Screening and Monitoring for Research Using Human Test Subjects

The Contractor may be required to provide medical screening and monitoring for GRC-sponsored research investigations involving the use of human test subjects. Such services are outside the scope of the Base Services portion of this SOW but are covered under Section 10.10 (IDIQ) Medical Screening and Monitoring for Research Using Human Test Subjects.

6.7 Medical Clearances for Mishap Investigation Interim Response Team

The Contractor may be asked to provide medical clearances and immunizations for members of a GRC Mishap Investigation Interim Response Team (ITR). Such services are outside the scope of the base services portion of this SOW but are covered under Section 10.11 (IDIQ) Medical Clearances for Mishap Investigation Interim Response Team (IRT).

6.8 Integration into GRC Occupational Health Program

Occupational Medicine services shall be integrated with the other elements of the Occupational Health Services contract.

7.0 PHYSICAL FITNESS PROGRAM

The Contractor shall provide for the Lewis Field civil servant and SSC workforce a comprehensive physical fitness program that includes individual and group programs based on emerging national level trends as well as on GRC-driven data.

The Physical Fitness Program shall be managed by the Fitness Center Director.

The Physical Fitness Program shall include the operation of the GRC Fitness Center facility as well as associated programs, events, and services that take place at the Fitness Center or elsewhere on the GRC grounds.

The Contractor may make use of GRC grounds, running track and athletic fields for the activities of the Physical Fitness Program. Management of grounds and fields other than the Fitness Center will be provided by NASA.

7.1 Management of Fitness Center Operations

The Contractor shall operate the GRC Fitness Center, located in Building 341. The Fitness Center is a standalone building that includes a cardiovascular area (treadmills, stationary bikes, elliptical machines,

stairclimbers and rowing machines), strength training area (Nautilus, pulley machines and free weights), group exercise class area (with stability balls, Pilates rings, jump ropes, steps, dumbbells, tubing, and body bars), office area, private exercise testing and consultation area, locker room and shower facilities and storage closets.

The Contractor shall provide all personnel, supplies, services, materials and resources to operate the Fitness Center (FC). The FC shall provide services for the Lewis Field CS and SSC workforce as described in Section 7.1.1.

7.1.1 Membership

Membership in the Fitness Center is available to all civil servant employees and retirees, onsite support service contractors, co-op students and interns.

The Contractor shall develop and implement programs to attract new members, encourage regular participation by new and current active members and re-attract inactive members who are still eligible for FC membership.

7.1.1.1 Member Screening and Clearance

The Contractor shall provide fitness screening for potential Fitness Center members who have been medically cleared per Section 4.2 of this SOW prior to granting FC membership. The Contractor shall ensure that medical clearances for FC membership are up-to-date for all FC members.

The Contractor shall determine the minimum level of fitness and screening required for FC membership and shall communicate those requirements to the GRC workforce.

The Contractor shall provide ongoing fitness testing for FC Members who wish to assess their progress.

7.1.1.2 Orientation and Instruction

The Contractor shall provide an orientation and specific instruction on the proper use of FC equipment to all new FC members and as needed thereafter.

7.1.2 Hours of Operation

The Contractor shall operate the FC such that FC services are available for members between the hours of 6:00 AM and 7:00 PM, at a minimum, on all weekdays, excluding Federal holidays, except where

directed otherwise by the COTR or ACOTR. The locker room shall remain open until 7:30 PM.

FC services and program and class offerings shall be compatible with GRC flexible work schedules such that members are able choose options that do not interfere with work responsibilities.

7.1.3 Staffing Levels

The Contractor shall respond to changing service requirements, including work resulting from unexpected surges or reductions, regulatory or policy changes, budgetary adjustments or other factors and shall prioritize activities to best accomplish the intent of the SOW.

The Contractor shall provide adequate staffing to permit safe conduct and proper supervision of activity at all times. At a minimum, one certified fitness professional shall be on duty at all times when the Fitness Center facility is open and when Physical Fitness Program activities are taking place on the Lewis Field campus.

7.1.3.1 Replacements for Absences

The contractor shall provide comparably qualified replacement staff on or before the second day of absence for any Fitness Center staff member. All replacement staff shall be subject to the same professional standards of conduct, training and credentialing that apply to Contractor employees who regularly provide support under this contract. Replacement employees shall be familiar with the SOPs for the relevant SOW element(s) prior to performing any work under this contract.

7.1.4 Standard Operating Procedures

The Contractor shall develop and maintain a written GRC Physical Fitness Program policy document, in accordance with the most recent version of NPR 1800.1> Chapter 3 (Fitness Centers)>Section 3.3 (http://nodis3.gsfc.nasa.gov/displayDir.cfm?Internal_ID=N_PR_1800_001C_&page_name=Chapter3). The Contractor shall provide a copy of the Physical Fitness Program document to the COTR and ACOTR six months and one year after the full-performance date of the contract and annually thereafter.

The Contractor shall develop Standard Operating Procedures (SOPs) for the FC. SOPs shall address methods, procedures, equipment and training to be used in completing the requirements of Section 7.0 of this SOW. The Contractor shall provide a copy of the SOPs to the

COTR and ACOTR six months and one year after the full-performance date of the contract and annually thereafter.

The Contractor shall ensure that all Contract personnel are trained in the SOPs and have knowledge of and access to their location at all times.

The Contractor shall maintain, review and update SOPs as necessary.

SOPs shall become the property of NASA.

7.1.5 Fitness Center Records Management

The Contractor shall maintain accurate and complete records of all FC members for NASA. The Contractor shall maintain records of FC activities and services and shall collect and make use of FC data to track outcome measures and evaluate program effectiveness.

The Contractor shall make use of the existing Government-owned HealthCalc 2009.1.1 software or an alternate contractor-provided system with equivalent functionality, after COTR approval.

Fitness Center records, both hard copy and electronic, are the property of the Government.

The Contractor shall ensure that FC member records, whether Government-furnished or Contractor-developed, are securely and confidentially maintained in accordance with the following, as applicable:

5 U.S.C. § 552a	Privacy Act of 1974
NPD 1382.17	NASA Privacy Act System of Records Notices (NASA 10HIMS—Health Information Management System)
NPR 1382.1	NASA Privacy Procedural Requirements
14 CFR §1212	NASA Privacy Act Regulations
P.L.104-191	Health Insurance Portability and Accountability Act of 1996 (HIPAA)

7.1.6 Safety, Emergency Equipment and Procedures

The Contractor shall provide proper supervision of FC participants.

The Contractor shall administer emergency medical services, such as CPR, AED and first aid, as appropriate, in accordance with GRC procedures for emergency medical response.

7.2 Management of Facility

The Contractor shall ensure the regular upkeep and management of the FC such that the facility is safe and aesthetically pleasing. NASA will provide maintenance and repair for the FC. The Contractor shall coordinate with the on-site maintenance contractor and other contractors regarding Government-furnished maintenance services, after approval by the COTR.

The Contractor shall conduct periodic assessments of the condition of FC facilities and recommend to the COTR changes that would contribute to the effectiveness of operations.

The Contractor shall maintain the volleyball court. The Government will provide maintenance for the athletic fields.

7.2.1 Cleanliness and Hygiene

The Contractor shall ensure the cleanliness and orderliness of the FC and shall maintain the sanitation of the exercise equipment. The Contractor shall coordinate housekeeping practices with Government-furnished janitorial services.

7.2.1.1 Infectious Waste Management

The Contractor shall collect, store and package infectious waste in accordance with GLM–QS–8500.1>Chapter 6, Medical Waste Management>Section 6.3, Guidelines for Waste Handling Area User (<http://smad-ext.grc.nasa.gov/shed/pub/epm/epm26-MED-WASTE%2840%29.pdf>). The Contractor shall attend on-site training in the handling of infectious waste, provided by the GRC Waste Management Team.

Infectious waste disposal services will be provided by the GRC Waste Management Team.

7.2.2 Fitness Center Supplies and Equipment

The Contractor shall provide all materials required to operate the Physical Fitness Program. These include all consumable items such as office and locker room supplies, specialized paper products, fitness and sports program supplies as well as professional services, laundry services, equipment service and maintenance agreements and software licenses not provided by the GRC IT support contract (currently ODIN). The Government does not provide laundry facilities

or equipment. FC members provide and launder their own towels for personal use.

Lockers shall be made available at no cost to users on a first-come-first-served basis. FC members are required to provide their own locks for lockers, if desired, and must remove them at the conclusion of each FC visit.

The Government will provide the exercise equipment and other items listed in Attachment D, Installation-Accountable Government Property.

The Government will provide the FC with wired access to the GRC network, which is suitable for administrative purposes. The Contractor shall provide DIRECTV® service for the exercise areas.

7.2.2.1 Maintenance and Repair of Fitness Center Equipment

The Contractor shall calibrate, maintain, repair, and, where appropriate, recommend replacement of Fitness Center equipment in accordance with applicable NASA, GRC and regulatory requirements, best-practices guidelines and manufacturers' recommendations, whichever is more conservative, and shall ensure that all equipment is within calibration and in proper working order at all times.

The Contractor shall establish and provide maintenance, service, and calibration agreements for all FC equipment as appropriate and shall provide those services.

The Contractor shall immediately inform the COTR of any equipment malfunction or deterioration that has the potential to adversely affect the quality of services provided under the contract.

7.2.2.2 Replacement Planning and Procurement

The Contractor shall prepare and submit to the COTR an annual equipment replacement plan for Government-furnished equipment and shall implement the plan as approved by the COTR.

The Contractor shall provide the services necessary to research, identify, evaluate and recommend specific new and replacement equipment for the Fitness Center. The Contractor shall specify, purchase, receive, and accept the equipment, as directed by the COTR, in accordance with applicable NASA Procurement policies.

Equipment purchase costs are excluded from the base services portion of this SOW but are covered under Section 10.4 (IDIQ), Purchase of Medical Services Clinic and Fitness Center Equipment. Labor and

other administrative costs associated with all equipment purchases are covered under this Section (7.2.2.2) of the SOW.

The contractor shall update the equipment listing as items are purchased under the IDIQ portion of the contract. The Contractor shall provide an updated equipment listing to the CO and COTR six months and one year after the full-performance date of the contract and annually thereafter. All equipment shall become the property of the Government.

7.3 Physical Fitness Program Services

The Contractor shall implement and manage individual and group physical fitness programs that include physical and rehabilitative therapy and exercise programs, stress management, blood pressure normalization, special health enhancement programs, aerobic exercise to improve cardiovascular tone, anaerobic exercise and other programs.

The Contractor may choose to make additional specialized programs, classes, services and materials available to employees in a pay-to-participate arrangement, with the approval of the COTR and CO. For such programs, participating employees would pay a fee directly to the instructor or service provider.

7.3.1 Standards and Criteria

The Physical Fitness Program shall be compatible with standards promulgated by the American College of Sports Medicine.

7.3.2 Group Classes

The Contractor shall provide a variety of classes for the improvement of cardiovascular conditioning, endurance, strength and flexibility. Classes shall be offered at varying times to maximize compatibility with flexible work schedules.

Group classes are typically fully subscribed and have historically been offered during approximately 50% of daily FC operating hours.

7.3.3 Strength Conditioning and Rehabilitation Programs

The Contractor shall develop and monitor individualized strength training and rehabilitation programs for FC members.

The Contractor shall monitor the progress of individual members and modify the member's program accordingly.

7.3.4 Personal Training Services

The Contractor shall offer and provide personal training services to employees who request such services.

7.3.5 Implementation of Exercise Prescriptions

The Contractor shall implement exercise prescriptions as ordered by the MSC. The Contractor shall provide one-on-one attention and service to members who undertake medically prescribed fitness programs or regimens.

The Contractor shall monitor the progress of individual members in terms of physiological responses and modify the member's exercise prescription accordingly.

7.3.6 Physical Therapy Services

The Contractor shall provide on-site physical therapy consultations and physical therapy services for CS employees. These services may include limited massage, manipulation, stretching or other treatment within the scope of the facility, or recommendations for off-site or at-home treatment to reduce lost-time due to injury or illness.

The Contractor shall make physical therapy consultations and services available to SSC employees on a cost-reimbursable pay-to-participate basis, for a fee to be paid directly to the Contractor by the employee.

The Contractor shall require a medical referral from the MSC or from the employee's private physician prior to providing physical therapy services.

7.3.7 Team Sports Programs

The Contractor shall organize and manage intra-center team sports programs for the GRC workforce.

7.3.8 Motivational Activities and Special Events

The Contractor shall implement special programs that include weight loss, weight management and fitness challenges. These programs shall be provided as part of the Health Promotion and Wellness Program (Section 9.0 of this SOW).

The Contractor may be required to plan and implement additional events and programs that are beyond the scope of the base services portion of this SOW. Such events and programs are covered in Section 10.12 (IDIQ), Health, Wellness and Fitness Events and Services.

7.3.9 Integration into GRC Occupational Health Program

The Physical Fitness Program shall be integrated with the other elements of the Occupational Health Services contract

8.0 EMPLOYEE ASSISTANCE PROGRAM

The Contractor shall provide and manage the GRC Employee Assistance Program (EAP) to assist GRC CS employees, their families, and GRC management with issues that adversely impact the employee's job performance.

The Contractor shall implement the EAP in accordance with the Employee Assistance Professionals Association (EAPA) Standards and Professional Guidelines for Employee Assistance Programs (<http://www.eapassn.org/files/public/EAPStandards10.pdf>). One (or more) EAP Counselor(s) shall be assigned to the OHS contract on a full-time (or minimum of one full-time-person-equivalent) basis. One EAP Counselor shall be designated as the primary Counselor for program management purposes.

The Contractor shall develop and maintain a written GRC Employee Assistance Program policy document, in accordance with the most recent version of NPR 1800.1> Chapter 5 (Employee Assistance Program) (http://nodis3.gsfc.nasa.gov/displayDir.cfm?Internal_ID=N_PR_1800_01C_&page_name=Chapter5). The Contractor shall provide a copy of the Employee Assistance Program policy document to the COTR and ACOTR six months and one year after the full-performance date of the contract and annually thereafter.

8.1 Facilities

The Contractor shall provide on-site counseling services in the GRC EAP Office between the hours of 8 AM and 4:30 PM, at a minimum, Monday through Friday. The 185-ft² office is located at Lewis Field in Building 15, Room 105A.

Offsite counseling services shall be available through a network of providers in the Northeast Ohio area that offer weekday, evening and weekend appointments.

The Contractor shall associate with and have access to detoxification care units in a variety of cost categories to provide employees with treatment plan options that best meet their health insurance, financial status and social situation needs.

8.2 Scope of Program

The Contractor shall implement a comprehensive program of services and programs that are designed to meet the needs of individuals, groups, management, and the broader GRC workforce.

The Contractor shall provide individual services that include assessment, treatment planning, referral, short-term counseling and consultation, follow-up, and coordination with other NASA offices, such as Human Resources, regarding case planning and outcomes.

The Contractor shall provide managerial/supervisory services that include assistance in employee EAP referral, employee support guidance, back-to-work meeting assistance, employee conduct and performance guidance, and supervisor training and education.

The Contractor shall provide organizational assistance that includes violence prevention, support groups, employee orientations, education and outreach and other services in coordination with the Health Promotion and Wellness Program (Section 9.0).

The Contractor shall provide crisis management and critical incident assistance as part of a Critical Incident Stress Management Program.

8.2.1 Individual Counseling Services

The Contractor shall provide EAP services that include problem identification; assessment and short term counseling; referral to appropriate community or professional resources for long term treatment and rehabilitation; and follow-up services for effective readjustment after treatment.

The Contractor shall maintain the program with a goal of restoring the employee's job performance to the fullest level of functioning by using therapeutic services.

The Contractor shall provide EAP services for conditions that include work-related issues; mental health; stress; family, personal, relationship or social issues; dependent care; legal or financial concerns; alcohol abuse; and drug abuse.

8.2.1.1 Availability and Access

The Contractor shall provide EAP counseling services to civil servants, their immediate family members within the same household, and other legal dependents covered by the employee's health benefit plan.

The Contractor shall provide counseling as a result of employee or family self-referral, management referral or MSC referral.

Emergency after-hours EAP consultations are available by telephone 24 hours per day, seven days per week, via a Government-provided service contracted through ProtoCall:

<http://www.protocallservices.com/employee-assistance/>. Information on this service will be provided during the contract phase-in period.

8.2.1.2 Short-Term Counseling Services

The Contractor shall offer and provide short-term counseling of up to five visits per issue or concern, per individual, per year, at no cost to the individual employee or family member (e.g., three family members seeking counseling on the same issue would each be eligible for up to five visits per year related to that issue). The EAP counselor shall determine the appropriate number of visits on a case-by-case basis. Should there be a need for more than five counseling sessions, the EAP Counselor shall assist the employee with finding a provider under the employee's health plan.

8.2.1.3 Coordination with External Providers

The Contractor shall select and maintain a referral list with a wide range of local professional providers and professional services for employee and family referrals.

The Contractor shall periodically review and evaluate the services of external providers.

8.2.1.4 Follow-up Process

The Contractor shall maintain a follow-up process to monitor the employee's progress.

The Contractor shall assist employees in returning to their position and job duties at the level required in their job description.

8.2.2 Individual Consultation Services

The Contractor shall offer and provide, at no cost to CS employees, eldercare and childcare individual consultation and referral services and, at a minimum, annual single-session legal consultation and financial planning services.

8.2.3 Support Group Facilitation

The Contractor shall facilitate, publicize and coordinate the implementation and scheduling of health- and wellness-related support group meetings.

8.2.4 Management Support

The Contractor shall provide consultation and education for GRC management in a variety of areas such as workplace violence, stress, conflict and Drug-Free Workplace issues.

8.2.5 Domestic Violence Awareness Program

The Contractor shall implement a domestic violence awareness program that includes domestic violence awareness training, in accordance with the most recent version of NPR 1800.1> Chapter 5. Employee Assistance Program (EAP)>Section 5.7.7.1 (http://nodis3.gsfc.nasa.gov/displayDir.cfm?Internal_ID=N_PR_1800_01C_&page_name=Chapter5).

8.3 EAP Records Management

The Contractor shall maintain EAP case records and provide annual reports as required by the most recent version of NPR 1800.1.

The Contractor shall make use of NASA-provided Medcomp EAP Caseware 20/20 case management system software (<http://www.medcompsoftware.com/Caseware2020.htm>) to track and manage individual counseling records. This software will be provided by NASA OCHMO during the contract phase-in period.

The Contractor's EAP Counselor shall ensure that EAP records are securely and confidentially maintained at both on-site and off-site locations in accordance with the following, as applicable:

5 U.S.C. § 552a
NPD 1382.17

NPR 1382.1
14 CFR §1212
P.L.104-191

Privacy Act of 1974
NASA Privacy Act System of Records
Notices (NASA 10HIMS—Health
Information Management System)
NASA Privacy Procedural Requirements
NASA Privacy Act Regulations
Health Insurance Portability and
Accountability Act of 1996 (HIPAA)

EAP records, both hard copy and electronic, are the property of NASA.

8.4 Integration into GRC Occupational Health Program

The EAP shall be integrated with the other elements of the Occupational Health Services contract.

Non-individualized EAP services, such as educational and awareness sessions on EAP-related topics, shall be provided as part of the Health Promotion and Wellness Program (Section 9.0 of this SOW).

8.5 Critical Incident Stress Management (CISM) Program

The Contractor shall manage the Critical Incident Stress Management (CISM) Program for Lewis Field and Plum Brook Station in coordination with Emergency Preparedness Planning described in Section 2.6.1.

The Contractor shall maintain, review and update the GRC CISM Plan as necessary. The CISM Plan shall address the immediate and subsequent impact of catastrophic events on individuals or groups by providing intervention that minimizes the occurrence of post-trauma resulting from any critical incident and augments recovery activities for populations having normal reactions to abnormal events.

The CISM shall include the designation of a Critical Incident Stress Debriefing (CISD) team.

The CISM Plan is the property of NASA.

The Contractor shall provide a copy of the CISM Plan to the COTR and ACOTR six months and one year after the full-performance date of the contract and annually thereafter.

8.5.1 Critical Incident Stress Debriefing (CISD) Process

The Contractor shall maintain a Critical Incident Stress Debriefing (CISD) process plan for providing defusing and debriefing sessions, as well as providing one-on-one interventions, referral and follow-up services

The CISD process shall be integrated into the CISM plan and GRC emergency preparedness plans.

8.5.1.1 Critical Incident Stress Management (CISM)

The Contractor may be required to implement the CISD process or provide critical incident stress management among the Lewis Field or

PBS workforce and community for emergencies such as disasters and violence. Employee Assistance Program services for these and other emergencies would be outside the scope of the base services portion of this SOW but are covered under Section 10.3 (IDIQ), Critical Incident Stress Management.

9.0 HEALTH PROMOTION AND WELLNESS PROGRAM

The Contractor shall establish and maintain a comprehensive and integrated Health Promotion and Wellness Program (HPWP) to facilitate employee awareness, increase health knowledge and support behavioral modification to the maximum extent among the largest possible spectrum of the GRC workforce. The Health Promotion and Wellness Program shall reflect the results of customer feedback assessments as well as the Contractor's assessment of the needs of the GRC workforce. The HPWP shall provide the awareness, educational and motivational components of each of the elements covered under the base services sections of this SOW and shall encompass the full range of topics and issues covered by each of those elements.

The Contractor may charge a separate pay-to-participate fee, paid directly by the employee to the Contractor or service provider, for special program offerings that involve the purchase of individual materials, supplies, or subcontracted services. Such fees shall be imposed only with the approval of the COTR.

9.1 Nutrition Program

The Contractor shall provide a comprehensive Nutrition Program that includes nutrition counseling, awareness, education and support. The Nutrition Program shall be coordinated with other health promotion objectives, including fitness and well-being (e.g., topics associated with the Employee Assistance Program).

9.1.1 Nutrition Counseling Services

The Contractor shall provide nutrition counseling to support medical, weight-loss, and health objectives and respond to the interests and concerns of the GRC workforce.

9.1.2 Nutrition Education Activities and Services

The Contractor shall offer nutrition education activities and services that include a minimum of two multi-session Dietician-led weight loss programs annually.

9.2 Food Safety Inspections

The Contractor shall conduct monthly risk-based food safety inspections of the Lewis Field cafeteria and the Lewis Little Folks Day Care Center. Inspections shall follow the methodology set forth in the FDA Food Code 2009: Annex 5 - Conducting Risk-based Inspections, Part 4, Risk-based Inspection Methodology (<http://www.fda.gov/Food/FoodSafety/RetailFoodProtection/FoodCode/FoodCode2009/ucm187947.htm>).

The Contractor shall provide to the COTR, ACOTR and CO a comprehensive monthly report of each inspection and shall maintain a system for tracking and documenting the resolution of inspection findings.

9.3 Massage Therapy Services

The Contractor shall provide the GRC workforce with on-site access to the services of a Licensed Massage Therapist on a pay-to-participate basis. The cost of massage therapy services will be paid directly to the provider by the individual employee. The Contractor shall provide all supplies and equipment required for the performance of this service.

NASA will provide a suitable space for massage therapy services.

9.4 Smoking Cessation Programs

The Contractor shall implement a smoking cessation program that is focused on preventing tobacco use among the workforce, promoting tobacco use cessation, eliminating exposure to secondhand smoke and providing education about tobacco-related health disparities.

9.5 Lectures and Seminars

The Contractor shall schedule and provide informational sessions, workshops and seminars on a wide range of topics that cover the elements of the base services sections of this SOW.

The Contractor shall provide a Sign Language interpreter or real-time transcription service on request for hearing impaired employees who attend Contractor-sponsored classroom-style informational events and training classes.

9.6 Educational Materials

The Contractor shall distribute and post appropriate print and electronic educational materials, such as pamphlets and newsletters, on a broad range of topics that cover the occupational health elements of this SOW.

9.7 Support for Employee Training Programs

The Contractor shall provide technical guidance and support for organizationally-sponsored health-related employee training programs on health-, fitness-, and wellness-related topics.

9.8 Support for Agency-Wide Health Promotion Campaigns

The Contractor shall participate on the NASA Agency-wide Health Promotion and Wellness Team and support Agency-wide quarterly health promotion topics.

9.9 First Aid Training

The Contractor shall provide, on a semi-annual basis, first aid training in accordance with American Red Cross or American Heart Association training requirements. The Contractor shall provide testing to allow employees to receive certification.

The Contractor shall support organizational needs by providing program review, training at staff meetings and medical advice regarding the resupplying of First Aid kits. The Contractor shall serve in an advisory role for organizational first aid needs.

9.10 Full-Day Health and Safety Fairs

The Contractor may be required to plan and implement full-day health and safety fairs and other major events at the Lewis Field or PBS sites. Additional staffing for an event and any direct costs such as equipment rental, supplies and food associated with a full-day event would be outside the scope of the base services portion of this SOW but are covered under Section 10.12, (IDIQ) Health, Wellness and Fitness Events and Services.

9.11 Integration into GRC Occupational Health Program

The Health Promotion and Wellness Program shall encompass the entire scope of health, fitness, and wellness issues and topics covered by the base services sections of this SOW. The HPWP shall integrate these issues and shall be integrated with the other elements of the Occupational Health Services SOW.

10.0 POTENTIAL INDEFINITE QUANTITY INDEFINITE DELIVERY (IDIQ) REQUIREMENTS

The Contractor may be required to provide additional medical services and special medical support that are outside the scope of the base services portion of this SOW. Such services and support, described in this section, will be separately funded according to the specific requirement.

The requirements listed below MAY be ordered as IDIQ items throughout the contract period of performance in accordance with Clause H.4, Indefinite Quantity.

In the event that items or services requested under this IDIQ requirement utilize existing personnel resources (where labor funding is already covered under the base service requirements), additional funding will not be provided for current paid staff working on IDIQ services without additional time required for the item or service ordered.

All IDIQ services ordered will be ordered, proposed, funded, invoiced and paid under individual IDIQ order numbers.

10.1 Emergency Response Medical Care Directives

The Contractor shall apply its full resources, as appropriate, toward providing medical response for Lewis Field campus emergencies that are outside the scope of the base services section of this SOW. Such situations include those involving mass casualties related to disasters and violence, vaccine distribution and healthcare services for pandemics and other public health crises and response for other unanticipated incidents.

The Contractor shall provide diagnosis and treatment outside of normal Medical Services Clinic operating hours when requested by the COTR or ACOTR in cases of emergencies, such as significant facility accidents or other major events where injuries are present.

Emergency response services shall take precedence over other work.

Implementation of this IDIQ item will be discussed during the contract phase-in period.

This requirement represents an infrequent need, estimated at less than one per year.

10.2 Support for Point of Distribution (POD)

The Contractor shall provide staffing to support the operation of a Point of Distribution (POD) at Lewis Field and/or PBS sites, in accordance with the

Local Emergency Management Agency (LEMA) direction and in collaboration with other Government and community organizations.

This requirement represents an infrequent need, estimated at less than one per year.

10.3 Critical Incident Stress Management (CISM)

The Contractor shall provide Critical Incident Stress Debriefing (CISD) services for the Lewis Field and/or Plum Brook Station civil servant and SSC workforce and communities, as applicable, in response to emergencies such as disasters and violence. CISD services shall be deployed to Lewis Field and/or PBS sites in accordance with the Critical Incident Stress Management (CISM) plan covered under the Employee Assistance Program, as described in Section 8.5 of this SOW.

Implementation of this IDIQ item will be discussed during the contract phase-in period.

This requirement represents an infrequent need, estimated at less than one per year.

10.4 Purchase of Medical Services Clinic and Fitness Center Equipment

The Contractor shall purchase new and replacement equipment for the Medical Services Clinic and the Fitness Center. The Contractor shall specify, purchase, receive, and accept the equipment, as directed by the COTR, in accordance with applicable NASA procurement policies.

Labor and other administrative costs associated with equipment purchases are covered under the base services sections of this SOW.

10.5 Protocols Required by Office of the Chief Health and Medical Officer (OCHMO)

The Contractor shall implement medical protocols in response to direction from OCHMO and/or by request of the COTR. Such protocols may include the distribution of special-purpose vaccines to the GRC CS and/or SSC workforce at Lewis Field and/or PBS sites.

10.6 Automated External Defibrillator (AED) Program

The contractor shall administer, maintain and oversee the GRC Automated External Defibrillator (AED) Program for Lewis Field and PBS sites and shall assign a responsible AED task lead to coordinate activities, provide operational oversight of the program and ensure that routine AED

maintenance checks are performed. A total of approximately 70 AED units are installed at Lewis Field and PBS.

Medical oversight and training for the AED Program are covered under Section 5.5 of this SOW.

10.7 Epidemiological Studies

The Contractor shall conduct or coordinate detailed epidemiological analyses and studies to investigate disease trends or data from health maintenance examinations, medical monitoring evaluations or other sources that suggest a possible link to workplace hazards.

This requirement represents an infrequent need, estimated at less than one per year.

10.8 Ergonomics Program

The Contractor shall assume responsibility for managing, implementing, and staffing the GRC Ergonomics Program beyond the assessments and program development responsibilities covered in Section 6.4 of this SOW. Such responsibility includes, but may not be limited to, policy development and review, site assessments, employee interviews and ergonomic assessments, injury data review, technical support for management and employee meetings; as well as developing and conducting ergonomics training programs, recommending and coordinating the availability of solutions and equipment, promoting the program and integrating it with other GRC occupational health programs.

10.9 Dispensing of Prescription Safety Glasses

The Contractor shall provide dispensing services and all materials and supplies required to fill orders for prescription safety glasses that are placed with the optician, as described in Section 6.5 of this SOW.

All safety glasses provided shall meet or exceed the standards for frames and lenses specified in ANSI Z87.1-2003.

Implementation of this IDIQ item will be discussed during the contract phase-in period.

10.10 Medical Screening and Monitoring for Research Using Human Test Subjects

The Contractor shall provide medical screening and monitoring for GRC research that involves the use of human test subjects, in accordance with

JSC CPHS Handbook 20483, “JSC Committee for the Protection of Human Subjects – Guidelines for Investigators Proposing Human Research for Space Flight and Related Investigations” (<http://cphs.nasa.gov/>). Medical screening and monitoring services will comprise pre-screening, screening including physical examination and laboratory tests, and on-site medical monitoring of the research activity.

10.11 Medical Clearances for Mishap Investigation Interim Response Team (IRT)

The Contractor shall provide medical evaluations and immunizations for Mishap Investigation Interim Response Team (IRT) members and provide medical clearances for possible deployment to remote locations. NASA will provide clearance criteria, specific evaluation protocol and immunization requirements.

10.12 Health, Wellness and Fitness Events and Services

The Contractor shall implement health, wellness, and fitness events and services beyond those covered in Section 9.0 under the base services portion of this SOW. Such events could include full-day health and safety fairs for the Lewis Field CS and SSC workforce at the Lewis Field or PBS sites, covered in Section 9.10. Planning for such events would be included under the base services portion of this SOW; additional staffing for an event and any direct costs such as equipment rental, supplies and food would be covered by an IDIQ task.

11.0 ACRONYMS USED IN THIS SOW

AAMRO	American Association of Medical Review Officers
ABPM	American Board of Preventive Medicine
ACLS	Advanced Cardiac Life Support
ACOEM	American College of Occupational & Environmental Medicine
ACOTR	Alternate COTR
AED	Automated External Defibrillator
AHA	American Heart Association
ANSI	American National Standards Institute
BLS	Basic Life Support
CAOHC	Council for Accreditation in Occupational Hearing Conservation
CDC	Centers for Disease Control and Prevention
CEAP	Certified Employee Assistance Professional
CISD	Critical Incident Stress Debriefing
CISM	Critical Incident Stress Management

CO	Contracting Officer
COHC	Certified Occupational Hearing Conservationist
COHN-S	Certified Occupational Health Nurse - Specialist
COTR	Contracting Officer's Technical Representative
CPR	Cardiopulmonary Resuscitation
CS	civil servant
DOT	U.S. Department of Transportation
EAP	Employee Assistance Program
EHRIS	Electronic Health Record System
EMS	Emergency Medical Services
FAA	Federal Aviation Administration
FC	Fitness Center
FDA	US Food and Drug Administration
FWCP	Federal Workers' Compensation Program
GRC	Glenn Research Center
HCP	Hearing Conservation Program
HIPAA	Health Insurance Portability and Accountability Act
HPD	Hearing Protective Device
HPWP	Health Promotion and Wellness Program
IDIQ	Indefinite Quantity Indefinite Delivery
IRIS	Incident Reporting Information Service
IRT	Interim Response Team
IT	Information Technology
JSC	NASA Johnson Space Center
KSC	NASA Kennedy Space Center
LEMA	Local Emergency Management Authority
MRO	Medical Review Officer
MROCC	Medical Review Officer Certification Council
MSC	Glenn Research Center Medical Services Clinic
NIOSH	National Institute for Occupational Safety and Health
NPD	NASA Policy Directive
NPR	NASA Procedural Requirement
NRC	Nuclear Regulatory Commission
OCHMO	NASA Office of the Chief Health and Medical Officer
ODIN	NASA Outsourcing Desktop Initiative for NASA
OHS	Occupational Health Services
OSHA	US Occupational Safety and Health Administration
PBS	Glenn Research Center Plum Brook Station
POD	Point of Distribution
PS	Professional Supervisor of the Audiometric Monitoring Component of a Hearing Conservation Program
RD	Registered Dietician
SHED	Glenn Research Center Safety, Health, and

	Environmental Division
SMA	Glenn Research Center Safety and Mission Assurance Directorate
SOP	Standard Operating Procedure
SOW	Statement of Work
SSC	Support Service Contractor
STS	Standard Threshold Shift
ViTS	Video Teleconferencing Service

12.0 REFERENCED DOCUMENTS

12.1 Regulatory Standards

29 CFR §1910.1030 Bloodborne Pathogens
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=standards&p_id=10051

29 CFR §1960 Basic Program Elements for Federal Employee Occupational Safety and Health Programs and Related Matters
http://www.osha.gov/pls/oshaweb/owastand.display_standard_group?p_toc_level=1&p_part_number=1960

5 U.S.C. §552a Privacy Act of 1974
<http://www.justice.gov/opcl/privstat.htm>

14 CFR §1212 NASA Privacy Act Regulations
http://ecfr.gpoaccess.gov/cgi/t/text/text-idx?c=ecfr&tpl=/ecfrbrowse/Title14/14cfr1212_main_02.tpl

Public Law 104-191 Health Insurance Portability and Accountability Act of 1996 (HIPAA)
<http://aspe.hhs.gov/admsimp/pl104191.htm>

29 CFR §1904 Recording and Reporting Occupational Injuries and Illnesses
http://ecfr.gpoaccess.gov/cgi/t/text/text-idx?c=ecfr&tpl=/ecfrbrowse/Title29/29cfr1904_main_02.tpl

29 CFR §1910.1020 Access to Medical and Exposure Records
http://www.osha.gov/pls/oshaweb/owadisp.show_document?p_table=STANDARDS&p_id=10027

12.2 NASA Agency-Wide Policy Directives

NPD 1800.2 NASA Occupational Health Program
<http://nodis3.gsfc.nasa.gov/displayDir.cfm?t=NPD&c=1800&s=2C>

NPD 8710.2 NASA Safety and Health Program Policy
<http://nodis3.gsfc.nasa.gov/displayDir.cfm?t=NPD&c=8710&s=1D>

NPD 1382.17 NASA Privacy Act System of Records Notices (NASA 10HIMS—Health Information Management System)
<http://nodis3.gsfc.nasa.gov/displayDir.cfm?t=NPD&c=1382&s=17H>

NPD 1850.1 NASA Medical System Quality Assurance
<http://nodis3.gsfc.nasa.gov/displayDir.cfm?t=NPD&c=1850&s=1>

12.3 NASA Agency-Wide Procedural Requirements

NPR 1800.1 NASA Occupational Health Program Procedures (most recent version)
<http://nodis3.gsfc.nasa.gov/displayDir.cfm?t=NPR&c=1800&s=1C>

NPR 1850.1 Quality Assurance of the NASA Medical Care System
<http://nodis3.gsfc.nasa.gov/displayDir.cfm?t=NPR&c=1850&s=1>

NPR 1441.1 NASA Records Retention Schedules
<http://nodis3.gsfc.nasa.gov/displayDir.cfm?t=NPR&c=1441&s=1D>

NPR 3792 Plan for a Drug-Free Workplace
<http://nodis3.gsfc.nasa.gov/displayDir.cfm?t=NPR&c=3792&s=1B>

NPR 1382.1 NASA Privacy Procedural Requirements
<http://nodis3.gsfc.nasa.gov/displayDir.cfm?t=NPR&c=1382&s=1>

NPR 8715.1 NASA Occupational Safety and Health Programs
<http://nodis3.gsfc.nasa.gov/displayDir.cfm?t=NPR&c=8715&s=1>

NPR 8715.3 NASA General Safety Program Requirements
http://nodis3.gsfc.nasa.gov/displayDir.cfm?Internal_ID=N_PR_8715_003C_&page_name=main

12.4 NASA Agency-Wide Occupational Health Guidelines

AED Guidelines
<http://www.ohp.nasa.gov/policies/docs.html?t=aed>

Credentialing and Privileging

<http://www.ohp.nasa.gov/policies/pdf/CredentialingAndPrivilegingChecklist.pdf>

Critical Incident Stress Management Services Guidelines

<http://www.ohp.nasa.gov/policies/docs.html?t=stressmgt>

Desk Guide for the Prevention of and Response to Workplace Violence

<http://nasapeople.nasa.gov/references/deskguides.htm>

Emergency Crash Cart

<http://www.ohp.nasa.gov/policies/pdf/EmergencyCrashCartChecklist.pdf>

Emergency Preparedness for Weapons of Mass Destruction

<http://www.ohp.nasa.gov/policies/docs.html?t=wmd>

Environment of Care

<http://www.ohp.nasa.gov/policies/pdf/EnvironmentOfCareChecklist.pdf>

Infection Control

<http://www.ohp.nasa.gov/policies/pdf/InfectionControlChecklist.pdf>

Medication Management

<http://www.ohp.nasa.gov/policies/docs.html?t=medmgt>

NASA Medical Quality Assurance Program

<http://www.ohp.nasa.gov/policies/docs.html?t=medqual>

Nutrition Technical Bulletin

<http://www.ohp.nasa.gov/policies/pdf/NutritionTechnicalBulletin.pdf>

Pandemic Plan

<http://www.ohp.nasa.gov/policies/docs.html?t=pandemic>

Physical Exam

http://www.ohp.nasa.gov/policies/pdf/1800_Appendix_G_Version_24_Jan_2010.pdf

Solar Safe Program

<http://www.ohp.nasa.gov/policies/pdf/SolarSafeProgram.pdf>

12.5 Glenn Research Center Policy Documents

GLM-QS-1800.1

Glenn Research Center Occupational Health
Programs Manual

<http://smad-ext.grc.nasa.gov/shed/pub/ohpm/ohpm-manual.pdf>

GLM-QS-8500.1 Glenn Research Center Environmental Programs
Manual

<http://smad-ext.grc.nasa.gov/shed/pub/epm/epm-manual.pdf>

GLM-QS-1700.1 Glenn Research Center Safety Manual

<http://smad-ext.grc.nasa.gov/shed/pub/gsm/gsm-manual.pdf>

12.6 Other Referenced Documents

JSC CPHS Handbook 20483 JSC Committee for the Protection of Human
Subjects – Guidelines for Investigators
Proposing Human Research for Space Flight
and Related Investigations

<http://cphs.nasa.gov/>

ANSI Z87.1-2003 Occupational and Educational Personal Eye
and Face Protection Devices

EAPA (Employee Assistance Professionals Association) Standards and
Professional Guidelines for Employee Assistance Programs

(<http://www.eapassn.org/files/public/EAPStandards10.pdf>).

FDA Food Code 2009: Annex 5 - Conducting Risk-based Inspections, Part 4,
Risk-based Inspection Methodology

(<http://www.fda.gov/Food/FoodSafety/RetailFoodProtection/FoodCode/FoodCode2009/ucm187947.htm>).

12.7 Other Resources

NASA Occupational Health Web site

<http://www.ohp.nasa.gov>

NASA Online Directives Information System (NODIS) Library

<http://nodis3.gsfc.nasa.gov/>