

Idaho Sexual Offender Management Board

Standards and Guidelines for

Adult Sexual Offender Management Practices



*Edition 2019
Revised 12/2019*

Table of Contents

| | |
|-------------------------------------------------------------------------------------------------|-----------|
| Section 1: Introduction and Overview..... | 1 |
| I. National Landscape, Precedence For Standards And Guidelines..... | 1 |
| II. Background And Legislative Mandate In Idaho..... | 2 |
| III. Intended Scope And Applicability..... | 3 |
| IV. Guiding Principles, Underlying Tenets..... | 3 |
| V. Recognized Limitations And Additional Considerations..... | 5 |
| Section 2: Psychosexual Evaluations and Evaluators..... | 8 |
| I. General Considerations | 8 |
| II. Proper Scope, Purposes For Conducting Psychosexual Evaluations | 9 |
| III. Assessment Methods And Procedures..... | 11 |
| IV. Format, Framework For Written Psychosexual Evaluation Reports | 13 |
| V. Areas Of Focus For Psychosexual Evaluations..... | 14 |
| VI. Categories Of Psychosexual Evaluator Certification..... | 20 |
| VII. Central Roster Of Psychosexual Evaluators..... | 21 |
| VIII. Psychosexual Evaluator Certification Representation..... | 22 |
| IX. Minimum Requirements For Psychosexual Evaluator Certification For Adult Sex Offenders | 233 |
| X. Requirements For Certification As A Senior/Approved Psychosexual Evaluator | 24 |
| XI. Requirements For Certification As An Associate/Supervised Psychosexual Evaluator | 26 |
| XII. Requirements For Certification As A Provisional/Supervised Psychosexual Evaluator..... | 30 |
| XIII. Continuing Education/Ongoing Professional Development Requirements | 32 |
| XIV. Conditional Waiver | 34 |
| XV. Reciprocity | 35 |
| XVI. SOMB Decisionmaking Processes For Certifying Psychosexual Evaluators..... | 35 |
| XVII. Certification Period..... | 38 |
| Section 3: Specialized Treatment and Treatment Providers | 40 |
| I. General Considerations | 40 |
| II. Broad Goals And Objectives Of Specialized Treatment..... | 41 |
| III. Informed Consent And Treatment Agreements..... | 41 |
| IV. Treatment Guided By Assessment | 42 |
| V. Treatment Methods, Modalities, And Engagement..... | 43 |

| | | |
|--------|-------------------------------------------------------------------------------------------------------------------|----|
| VI. | Targets Of Treatment | 45 |
| VII. | Responsivity Factors And Special Populations | 46 |
| VIII. | Treatment Progress And Completion | 47 |
| IX. | Documentation..... | 48 |
| X. | Categories Of SOMB-Certified Specialized Treatment Providers..... | 49 |
| XI. | Central Roster Of Certified Sex Offender Treatment Providers | 51 |
| XII. | Representations As A Certified Sex Offender Treatment Provider | 51 |
| XIII. | Minimum Requirements For SOMB Certification As A Sex Offender Treatment Provider For Adult Sex Offenders | 52 |
| XIV. | Requirements For Certification As A Senior/Approved Sex Offender Treatment Provider | 53 |
| XV. | Requirements For Certification As An Associate/Supervised Sex Offender Treatment Provider ... | 55 |
| XVI. | Requirements For Certification As A Provisional/Supervised Sex Offender Treatment Provider... | 59 |
| XVII. | Continuing Education/Ongoing Professional Development Requirements | 61 |
| XVIII. | Conditional Waiver | 62 |
| XIX. | Reciprocity | 63 |
| XX. | SOMB Decisionmaking Processes For Certifying Sex Offender Treatment Providers..... | 64 |
| XXI. | Certification Period..... | 66 |

Section 4: Post-Conviction Sex Offender Polygraph Examinations and Examiners68

| | | |
|-------|-----------------------------------------------------------------------------------------------------------------------|-------|
| I. | General Considerations | 68 |
| II. | Adopted Standards For Post-Conviction Sex Offender Polygraph Testing..... | 70 |
| III. | Certification Of Post-Conviction Sex Offender Polygraph Examiners | 109 |
| IV. | Central Roster Of Certified Post-Conviction Sex Offender Polygraph Examiners | 110 |
| V. | Representations As A Certified Post-Conviction Sex Offender Polygraph Examiner | 1100 |
| VI. | Minimum Eligibility Requirements For SOMB Certification As A Post-Conviction Sex Offender Polygraph Examiner | 112 |
| VII. | Requirements For Senior Certification As A Senior/Approved Post-Conviction Sex Offender Polygraph Examiner | 113 |
| VIII. | Requirements For Certification As An Associate/Supervised Post-Conviction Sex Offender Polygraph Examiner | 11513 |
| IX. | Continuing Education/Ongoing Professional Development Requirements Error! Bookmark not defined. | |
| X. | Conditional Waiver | 116 |
| XI. | SOMB Decisionmaking Processes For Certifying Post-Conviction Sex Offender Polygraph Examiners | 116 |

| | |
|---------------------------------------------------------------------------------------------|-------------------------------------|
| XII. Certification Period..... | 118 |
| Section 5: Application Process and Disciplinary and Complaint Procedures | 121 |
| I. APPLICATION PROCESS..... | Error! Bookmark not defined. |
| II. APPLICATION FEES..... | 140 |
| III. CERTIFICATION DENIAL, SUSPENSION, REVOCATION, RESTRICTION OR MONITORING | Error! Bookmark not defined. |
| IV. DISCIPLINARY PROCESS..... | 139 |
| Section 6: Quality Assurance for Community Providers..... | 145 |
| I. General Considerations | 145 |
| II. Quality Assurance Pertaining To Psychosexual Evaluations..... | 146 |
| III. Quality Assurance Pertaining To Sex Offender-Specific Treatment..... | 149 |
| IV. Quality Assurance Pertaining to Post Conviction Sexual Offender Polygraph Examiner..... | 150 |
| Appendices..... | 152 |
| Psychological Testing Qualifications | 153 |
| Required Format For Adult Psychosexual Evaluation Reports..... | 154 |
| Sex Offender Risk and Protective Factors Checklist..... | 156 |
| Adult Sex Offender Protective Factors..... | 159 |
| Notice And Consent For Psychosexual Evaluation..... | 161 |
| Idaho Sex Offender Treatment Monthly Status Update..... | 163 |
| Idaho Sex Offender Treatment Quarterly Progress Report | 164 |

Section 1: Introduction and Overview

I. NATIONAL LANDSCAPE, PRECEDENCE FOR STANDARDS AND GUIDELINES

Throughout the country, policymakers in over half of the states have developed state-level sex offender management policy groups, including sex offender management boards, as a mechanism to advance sound sex offender management efforts. Such entities may be fairly broad and all-encompassing in their scope and mandates (e.g., generally addressing sex offender management issues and concerns), designed with more narrow mandates (e.g., developing formal standards or guidelines), or a combination of these functions, and that the objectives include¹:

- Modeling and supporting the establishment of multi-agency collaborative partnerships to ensure the integration of the various system components that play key roles in sex offender management;
- Advancing well-informed, research-supported state laws and agency policies to shape practices; and
- Providing practitioners system-wide with specialized knowledge, proper training, and skills to implement those laws and policies effectively, with ongoing quality assurance mechanisms.

National organizations have taken leadership roles by integrating research and promising strategies into standards and guidelines for assessing, treating, and managing sex offenders.² In turn, many state-level policy teams, including sex offender management boards in multiple states, have built upon such parameters to create minimum requirements, standards, and guidelines in their respective states that guide and inform sex offender management policy initiatives and case management practices.

¹ See Center for Sex Offender Management (CSOM, 2010). *Advancing sex offender management efforts through state-level policy groups*. Silver Spring, MD.

II. BACKGROUND AND LEGISLATIVE MANDATE IN IDAHO

The Idaho Criminal Justice Commission (ICJC) and the various agencies represented on the ICJC have demonstrated a long-standing commitment to promoting public safety by advancing sex offender management efforts in the State of Idaho. Subsequent to a series of expert informational forums and training events convened for legislators, agency officials, and practitioners in the State of Idaho, the ICJC commissioned an independent review of the state's policies and practices specific to sex offender management, in order to gauge the extent to which current policies and practice are consistent with the contemporary research-informed and promising strategies and to obtain accompanying recommendations in these areas. Among the priorities identified in the 2010 report were the following:³

- Strengthen the Sexual Offender Classification Board standards and guidelines for psychosexual evaluations to promote consistency and alignment with contemporary research and practices;
- Establish statewide standards and guidelines for sex offender-specific treatment; and
- Establish a multidisciplinary, policy-level entity (e.g., a sex offender management board) charged specifically with the advancement and oversight of sound sex offender management policies and practices system-wide.

In 2011, the Idaho Legislature established the Sexual Offender Management Board (SOMB) – replacing the Sexual Offender Classification Board (SOCB) – to develop, advance, and oversee sound sexual offender management policies and practices statewide (Section 18-8312, Idaho Code). Included among the mandates for the Idaho SOMB are to establish standards for psychosexual evaluations; establish standards for sexual offender treatment programs based on current and evolving best practices; establish qualifications for and develop and administer an approval/certification process for professionals who conduct psychosexual evaluations, provide treatment to sexual

³ The full report can be accessed at http://www.idoc.idaho.gov/sites/default/files/webfm/documents/about_us/ICJC%20Final%20CSOM%20Report%20April%2010%202010_1.pdf

offenders, or conduct post-conviction polygraphs of sexual offenders; and set forth and administer accompanying quality assurance procedures. The SOMB was granted the authority to promulgate rules to carry out these and other provisions.

III. INTENDED SCOPE AND APPLICABILITY

- A. The standards and guidelines as outlined in this working document apply to professionals conducting psychosexual evaluations pursuant to Section 18-8316, Idaho Code; professionals providing treatment to adult sexual offenders as ordered or required by the Court, Idaho Department of Correction, Idaho Commission of Pardons and Parole; professionals conducting post-conviction sexual offender polygraphs as ordered or required by the Court, Idaho Department of Correction or Idaho Commission of Pardons and Parole; and other individuals to whom conformity to SOMB standards is required. However, these standards and guidelines can ideally provide consistency and direction for any and all professionals conducting these services in the State of Idaho to promote risk-reduction and risk-management involving sex offenders and thereby enhancing public safety.
- B. These standards and guidelines are designed to complement existing statutes or provisions, administrative rules, relevant agency policies or operating procedures, or promulgated ethical codes or practice requirements/parameters established for regulated professions.

IV. GUIDING PRINCIPLES, UNDERLYING TENETS

This working SOMB document of standards and guidelines is intended to be grounded within a framework of the following guiding principles and tenets:

- A. The rights, needs, and interests of victims and their families must remain a priority at all phases of the system in the State of Idaho. Policies, operating procedures, and practices cannot be exclusively offender-focused.
- B. The individual rights, needs and interests of children who have been sexually abused within the family must remain a priority in all aspects of community

response and intervention systems over the interests of parental or family interests. All phases of response to child sexual abuse should be designed to promote the best interests of children rather than focusing primarily on the interests of adults.

- C. The prevention and management of sexual offending behavior is a complex issue that requires a multifaceted set of policies and strategies.
- D. Individuals who engage in sexual offending behavior are a heterogeneous population who vary in multiple ways (e.g., demographics, criminal history, level of functioning, degree of psychosexual disturbance, etiological factors, motivation to change, nature of intervention needs, and short- and long-term recidivism risk). As such, intervention and management strategies in the State of Idaho must be designed to take into account these differences.
- E. A multidisciplinary, comprehensive, collaborative sex offender management system in the State of Idaho can contribute to risk-reduction and risk management among individuals who have engaged in sexual offending behaviors. The range of entities and disciplines includes, but is not limited to, state- and agency-level policymakers, the courts, victim advocates, prevention specialists, clinical evaluators, treatment providers, institutional and community-based practitioners, release decision makers, supervision agencies, and other relevant stakeholders.
- F. Outcomes and resources in the State of Idaho will be maximized when sex offender management policies, operating procedures, and practices are grounded in current research and implemented with fidelity.
- G. Professionals responsible for implementing risk-reduction and risk-management strategies in the State of Idaho require specialized training, ongoing professional development, and supervision and support to maximize their knowledge, skills, competency and effectiveness.
- H. Intervention needs and recidivism risk of individuals who engage in sexual offending behavior change over time. Policies and operating procedures in the State of Idaho must require assessment-driven case management to ensure that

interventions and strategies for a given individual are developed and adjusted in accordance with an individual's current risk, needs, and circumstances.

- I. Sound data must be consistently collected and routinely analyzed to examine the quality, consistency, efficiency, impact, and effectiveness of current approaches in the State of Idaho and to guide future efforts.
- J. Policies, operating procedures, and practices should be reviewed and adjusted to align with contemporary research findings and other advances in the field.
- K. Sex offender management strategies are a necessary aspect of promoting public safety and reducing sexual victimization in the State of Idaho, but are not sufficient in and of themselves. Rather, resources and efforts must also be prioritized toward the primary prevention of sexual abuse, including, but not limited to, early intervention and public education.
- L. Evaluation, ongoing assessment, treatment and behavioral monitoring of individuals who engage in sexual offending behavior should be non-discriminatory, humane and bound by the rules of ethics and law. Offending individuals and their families shall be treated with dignity and respect, without discrimination based on race, religion, gender, sexual orientation, disability or socio-economic status, by all members of the multidisciplinary team regardless of the nature of the sexual offending behavior.

V. RECOGNIZED LIMITATIONS AND ADDITIONAL CONSIDERATIONS

- A. These SOMB standards and guidelines address several important areas of practice – namely evaluation and treatment, and to a lesser degree, supervising sex offenders in the community – but are not designed to be all-encompassing or to represent the full range of procedures and practice components necessary for a comprehensive system of sex offender management in the State of Idaho.
- B. At the time of its development, this working document was based on current research and generally accepted promising practices, to the extent possible, particularly with respect to providing specialized evaluation and treatment services.

- a. Because the sex offender management field continues to evolve, these standards and guidelines must not be considered static.
 - b. These standards and guidelines must be reviewed and adjusted to align with contemporary research findings and other advances in the field over time.
 - c. The Idaho SOMB recognizes that post-implementation, independent external reviews of the established standards and guidelines are an important mechanism for facilitating the ongoing currency of these standards and guidelines and gauging the fidelity of their implementation.
- C. These minimum requirements, standards, and guidelines for specialized evaluation, treatment, polygraph, and/or other management services represent an important step toward facilitating a consistent, informed, and effective sex offender management system in the State of Idaho by providing clarity and direction to support sound evaluation, treatment, and other management practices statewide. Complementary quality assurance provisions are designed to provide yet another mechanism to advance the integrity and effectiveness of Idaho’s sex offender management system in this regard.
- a. The Idaho SOMB recognizes, however, that the establishment of such minimum requirements and expectations, standards and guidelines, and quality assurance protocols is not a panacea.
 - b. The quality and effectiveness of the sex offender management system in Idaho is further contingent upon agencies’ and practitioners’ individual and collective commitments to responsible, ethical, and well-grounded practices.
 - c. It is, therefore, incumbent upon each professional to assume personal responsibility for adhering to these SOMB standards and guidelines and other ethical codes and standards for their respective professions, to encourage and support the adherence of their seasoned colleagues to the SOMB standards and guidelines; to participate in and support ongoing professional development activities that promote alignment with contemporary research-informed and promising practices; and to contribute

to the refinement, enhancement, and expansion of the Idaho SOMB standards and guidelines and other guiding resources over time.

Section 2: Psychosexual Evaluations and Evaluators

The provisions of this section govern the procedures relating to (a) the certification of professionals approved by the Idaho SOMB to conduct or assist with the conduct of psychosexual evaluations of adults convicted of sex offenses or sex offense-related crimes (as referenced in Section 18-8314, Idaho Code) and (b) evaluators' required practices with respect to conducting such evaluations, for use in criminal proceedings as ordered by the court pursuant to Section 18-8316, Idaho Code, and other purposes defined in this section.

I. GENERAL CONSIDERATIONS

- A. A person certified by the SOMB to conduct or assist with the conduct of psychosexual evaluations in accordance with the minimum requirements outlined in this section is expected to:
 - a. Adhere to the ethical principles and codes, and any and all practice standards and guidelines, for the person's respective discipline/area of professional licensure as promulgated by the licensing body;
 - b. Conduct testing in accordance with the person's licensing body, qualifications and experience. Outside sources should be utilized to interpret required testing that is beyond the person's training and expertise (see appendix for psychological testing qualification standards);
 - i. The SOMB may require verification of qualifications to conduct applicable testing.
 - c. Be knowledgeable of statutes and scientific data relevant to specialized sex offender evaluation;
 - d. Be committed to community protection and safety; and
 - e. Conduct evaluation procedures in a manner that ensures the integrity of testing data and the humane and ethical treatment of the individual, and communicates information using professional and non-biased language.
- B. When decision making for an individual requires a current psychosexual evaluation, an evaluator shall not represent an evaluation that was conducted on

the individual more than 1 year prior as being current, without taking reasonable and appropriate steps to ensure its currency with respect to the:

- a. Individual's legal status;
- b. Required content of the written report as set forth in this section;
- c. Required assessment methods and tools utilized for the evaluation as set forth in this section;
- d. Accompanying results, findings, and recommendations contained in the evaluation, which may involve, but are not limited to, the individual's level of recidivism risk, specialized treatment needs, and other management interventions.
- e. Such updated or current psychosexual evaluation shall follow the format and standards established in this section.

II. PROPER SCOPE, PURPOSES FOR CONDUCTING PSYCHOSEXUAL EVALUATIONS

- A. Pursuant to Sections 18-8314 and 18-8316 of the Idaho Code, a psychosexual evaluation conducted in accordance with this section is to be completed after a finding of guilt to inform sentencing and other disposition decisions
- B. A psychosexual evaluation conducted in accordance with this section shall be written utilizing the frame/format as outlined by the SOMB. The evaluation should be written in a manner that allows all readers to understand its content regardless of the reader's background and experience. The SOMB values and respects professional discretion, judgment, and style regarding the conduct of psychosexual evaluations, provided that the evaluator addresses the minimum requirements and operates within the parameters set forth in this section. A report that does not comply with the prescribed format shall not be represented as meeting the psychosexual evaluation criteria for the purposes described in this section.
- C. A psychosexual evaluation conducted in accordance with this section – and generally, for all other circumstances in which a psychosexual evaluation is being requested or conducted – is designed for the primary purposes of identifying the

level of recidivism risk, victim typology, treatment needs, responsivity, and amenability of the individual being evaluated.

- D. A psychosexual evaluation conducted in accordance with the standards and requirements set forth in this section may be further appropriate for informing other post-conviction decisions, provided that the use of such an evaluation is not prohibited, overriding, or incompatible with any statutory or other legal provisions of the Idaho Code, administrative rules, or other statutory expectations, requirements, or regulations in Idaho. These additional appropriate uses may include:
 - a. Treatment planning;
 - b. Probation, post-release supervision, or other case management planning;
 - c. Significant custody status change, such as from incarceration to community;
 - d. Release decision making; and
 - e. Registration and community notification.

- E. The SOMB does not regulate psychosexual evaluations completed for purposes other than those defined herein. However, under no circumstances shall an evaluator conduct a psychosexual evaluation in accordance with this section – or generally in all other circumstances under which a psychosexual evaluation is requested or conducted – for the explicit purposes of:
 - a. Attempting to substantiate or refute criminal allegations of sexual abuse made during the course of, or subsequent to, the following:
 - i. Law enforcement investigations;
 - ii. Social services/child protective services investigations;
 - iii. Domestic/family law proceedings such as child custody or parental fitness;
 - iv. Pending, previously resolved, or unresolved civil or criminal or juvenile/family court matters;
 - b. Establishing the factual basis of any civil, criminal, or other court proceedings, or ascertaining an evaluator’s opinions or assertions regarding

the guilt or innocence of the individual being evaluated during the course of any proceedings; or

- c. Attempting to generate or offer the evaluator's opinions or assertions regarding the individual's absolute risk/potential for engaging in sexually abusive or offending behavior or refraining from engaging in such behavior.

III. ASSESSMENT METHODS AND PROCEDURES

- A. Informed Consent. An evaluator conducting psychosexual evaluations in accordance with this section shall afford the individual being evaluated (and/or their legal guardian) to provide informed consent/assent and document accordingly in writing. The evaluator shall utilize the SOMB "Notice and Consent for Psychosexual Evaluation" form (see appendix). The SOMB form may be supplemented with additional evaluation consent/assent form(s) as desired by the evaluator.
- B. Multiple Methods and Information Sources. An evaluator conducting psychosexual evaluations in accordance with this section shall utilize multiple assessment methods and information sources to support the comprehensiveness, reliability, and validity of the findings and recommendations of the evaluation. Minimally required data sources and assessment methods and processes shall include the following:
 - a. Structured clinical interviews;
 - b. Official law enforcement documents must be reviewed if available;
 - c. Other official records (e.g., victim statements, prior evaluations, treatment, social services, juvenile and/or adult criminal justice agencies);
 - d. Psychometrically sound measures for assessing intellectual, personality, functional, substance abuse, and other psychological factors;
 - e. Research-based instruments specifically designed to assess normative and deviant sexual interests, attitudes, arousal, and/or preferences; and
 - f. Research-supported risk assessment tools and protocols with currency in the field and which are designed to promote systematic and objective

assessment of risk factors and recidivism risk among sexually abusive individuals.

- g. The methods and assessments used by the evaluator should comport with the same requirements for the admissibility of expert testimony as outlined in Idaho Rules of Evidence, Rule 702 and *Daubert v. Merrell Dow Pharmaceuticals, Inc.*, 509 U.S. 579, 113 S. Ct. 2786 L. Ed. 2d 469 (1993).
- C. When conducting a psychosexual evaluation in accordance with this section, an evaluator shall employ assessment methods, procedures, and instruments appropriate for responding to these and other factors. Consider factors such as age, cultural/spiritual, language, development, level of functioning, physical and other limitations/disabilities. Address possible implications of these factors on the methods and processes used.
- D. An evaluator shall disclose and document all sources of information and methods used to conduct the psychosexual evaluation.
- E. Offender Participation. The individual being evaluated (and/or their legal guardian) may refuse or decline to participate in any testing, assessment measure, or protocol used for a psychosexual evaluation conducted pursuant to this section. Under this circumstance, the evaluator shall:
 - a. Notify the individual being evaluated (and/or their legal guardian), when an evaluation is being mandated or ordered by the courts or other authorities, there may be consequences of such decision;
 - b. Make reasonable efforts to obtain the signature of the individual (and/or their legal guardian) on a written statement/form indicating the individual's refusal or declination and include this form as an appendix to the psychosexual evaluation report;
 - c. Document the individual's refusal or declination in the body of the written evaluation report; and
 - d. Document in the written evaluation report any implications of the refusal or declination on the reliability and validity of the findings and accompanying recommendations.

- F. An evaluator shall provide recommendations commensurate with the assessed level of risk, research-supported risk factors, protective factors, and intervention needs as supported in the body of the report.
- G. An evaluator shall provide findings, conclusions, recommendations, and responses to referral questions that are congruent with the scope of the purposes of psychosexual evaluations as set forth in this section.
- H. Departures from Established Criteria. Any departures from the minimum expectations and requirements for psychosexual evaluations as specified in this section shall be specifically noted in the written evaluation report and any implications for the findings and recommendations for the evaluation.

IV. FORMAT, FRAMEWORK FOR WRITTEN PSYCHOSEXUAL EVALUATION REPORTS

- A. Required Format for Written Reports. Evaluators shall frame/format the written reports using the following headers in order to promote consistency in the organization and presentation of material, comprehensiveness of the reports, and familiarity/ease of use for consumers of these reports:
 - a. Preliminary Statement.
 - b. Identifying Information.
 - c. Synopsis.
 - d. Referral Information and Nature of Evaluation.
 - e. Confidentiality.
 - f. Sources of Information.
 - g. Mental Status Examination and Psychological Symptoms.
 - h. Background, Criminal and Social History.
 - i. Description of Current Offense(s).
 - j. Sexual History Behavior.
 - k. Psychological Test Results.
 - l. Current DSM Diagnosis.
 - m. Specialized Risk Assessment Measures and Measures of Sexual Behavior.
 - n. Risk Factors (*Attach Sex Offender Risk and Protective factors Checklist*)

- i. Static factors
 - ii. Dynamic factors
 - o. Protective Factors. (Attach *Sex Offender Risk and Protective Factors Checklist*)
 - p. Risk Level.
 - q. Potential for Future Harm. (Optional but encouraged)
 - r. Resources for Community Protection, Amenability for Treatment, and Recommended Treatment Focus.
 - s. Additional Suggestions for Management. (Optional)
- B. An evaluator shall incorporate, under the above organizing headers/format, the specific areas of focus detailed in this section.
- C. The printed name, highest attained degree, license, and certification designation must appear at the end of the report, and the report must be signed and dated by the evaluator.
- a. An evaluation conducted by an Associate/Supervised Psychosexual Evaluator, must be reviewed, verified and co-signed by the Senior/Approved Psychosexual Evaluator who supervised the development of the evaluation that the findings are accurate.

V. AREAS OF FOCUS FOR PSYCHOSEXUAL EVALUATIONS

- A. An evaluator conducting psychosexual evaluations in accordance with this section shall assess and explore each the following elements during the course of the psychosexual evaluation: Inquiries into these elements must be thorough and documented in the evaluation to identify or rule-out all of the risk and protective factors listed in the check list. The elements listed below are not exhaustive and evaluators are encouraged to make additional inquiries as needed to fully evaluate a person’s risk and protective factors.
- a. Preliminary Statement to be Included in Evaluations:
 - “Risk classification is the examinee’s assessed risk to re-offend when compared to other sex offenders, not compared to the general population. Furthermore, the risk to re-offend is not reflective of the level of harm

experienced by the victim. For consideration of victim harm, the reader is encouraged to consider information from other sources such as victim impact statements, hospital records, or other relevant sources.”

b. Identifying Information.

Examinee name, birth date, age, date of evaluation, criminal case, etc.

c. Synopsis.

i. Risk level conclusion, identified as being in Low, Moderate or High risk category;

ii. Conclusion regarding examinee’s amenability for treatment; and

iii. Identification of most pertinent information to be considered by the court as supported in body of report, including what lead to conclusions regarding risk and amenability for treatment (could include static, dynamic, and protective factors).

d. Referral Information and Nature of Evaluation.

i. Identification of how the examinee was referred for evaluation;

ii. Statement regarding structure of the evaluation; and

iii. Idaho Codes that are followed.

e. Confidentiality.

i. Statement regarding evaluation confidentiality and how this was explained to examinee; and

ii. Informed consent form. (see appendix)

f. Sources of Information.

i. List of tests, measures; and

ii. Collateral information, interviews, other relevant sources.

g. Mental Status Examination and Psychological Symptoms.

i. Standard mental status information and relevant psychological symptoms identified during interview; and

ii. Appearance and behavior observation.

Description of examinee’s appearance and behavior during interview.

h. Background, Criminal and Social History.

- i. Developmental history (e.g., family dynamics, exposure to violence, maltreatment);
 - ii. Interpersonal relationships (e.g., nature and quality of past and current relationships such as family, peers, intimate partners);
 - iii. Medical history;
 - iv. Mental health history (i.e., client and family), including previous diagnosis and treatment efforts;
 - v. History of harm to self or others;
 - vi. Education, employment, and/or military history;
 - vii. Prior and current criminality or delinquency (e.g., including antisocial attitudes and values, psychopathy, juvenile delinquency, adult criminal history, violence or aggression) (*access criminal history, Idaho court repository or other official records*);
 - viii. Substance use and/or abuse;
 - ix. Prior responses to juvenile or adult justice system or other interventions (e.g., institutional/custodial conduct or adjustment, compliance with conditions of supervision, compliance/completion of other court orders, social services plans);
 - x. Family of origin history;
 - xi. Recreation/leisure;
 - xii. Cultural/spiritual; and
 - xiii. Capacity to identify problems and appropriate solutions.
- i. Description of Current Offense(s).
Description of current offense(s) of conviction (including official version as documented in police reports or other official records, victim statements, and the version of the individual being evaluated).
 - j. Sexual History Behavior.
 - i. Sexual development, early sexual experiences;
 - 1. Ages 0 through 5
 - 2. Ages 6 through 12

3. Ages 13 through 17
 4. Adulthood (age 18 +)
- ii. History of age-appropriate, consensual, non-coercive sexual relationships;
 - iii. History of experiences involving being subjected to non-consensual or coercive sexual behaviors (e.g., sexual victimization);
 - iv. Historical and current sexual interests, fantasies, practices/behaviors;
 - v. Sexual functioning, sexual dysfunction;
 - vi. Use of sexually-oriented materials or services (e.g., magazines, sexually explicit video games, videos and other programming, Internet sites, telephone sex lines, adult establishments);
 - vii. Prior sexual offender treatment;
 - viii. Intent of individual related to treatment;
 - ix. Offense-related sexual arousal, interests, and preferences;
 - x. Evidence or characteristics of paraphilias;
 - xi. History of sexually abusive behaviors, both officially documented and unreported (if identified through credible records or sources);
 - xii. Number of victims as identified through credible records or sources;
 - xiii. Current and previous victim-related factors (e.g., age, gender, nature of relationship);
 - xiv. Contextual elements of sexually abusive behaviors (e.g., frequency and duration; apparent motivators; patterns; circumstances; access to victims; degree of planning; use of threats, coercion, or force);
 - xv. Attitudes supportive of sexually abusive behavior; and
 - xvi. Demonstrated level of insight, self-disclosure, denial, and minimization relative to the sexually abusive behavior.
- k. Psychological Test Results. Testing for personality and mood, and intellectual functioning are required; remaining categories are recommended for assessment as indicated but are at the discretion of the evaluator. The

evaluator must provide an independent interpretation of the test results and not simply copy test results into the evaluation.

- i. Personality and mood – must use at least one of:
 1. MMPI-2
 2. MCMI-III
 3. PAI
 - ii. Intellectual functioning testing – must use one of:
 1. Shipley-2 (preferred)
 2. WAIS-IV (preferred)
 3. Other validated assessment tool
 - iii. Psychopathic tendencies – such as:
 1. PPI-R
 2. PCL-R (Hare)
 3. Other validated assessment tool
 - iv. Substance abuse – such as:
 1. SASSI-3
 2. GAIN-I
 3. Other validated assessment tool
 - v. Additional optional testing, but not exclusive to:
 1. STAXI-2 (anger)
 2. HCR-20
 3. SVR-20
 4. LSI-R
- i. DSM Diagnosis.
Presenting diagnosis from the current version of the Diagnostic and Statistical Manual of Mental Disorders.
- m. Specialized Risk Assessment Measures and Measures of Sexual Behavior.
All risk assessments must be used in accordance with the assessment’s standards. The evaluator will determine whether use of a specific assessment

is appropriate based on the individual case. If a required assessment is not used, the provider must explain why.

- i. Risk assessment must include the following measures:
 1. STATIC-99 or STATIC-99R
 2. STABLE 2007
- ii. Measure of sexual behavior must include:
 1. MSI-II
- iii. Additional optional measures, but not exclusive to:
 1. ACUTE 2007
 2. SORAG
 3. VASOR
 4. Viewing time measure (e.g. Abel screen)
 5. Phallometric testing
 6. Polygraph
- n. Risk Factors.

The evaluation must support the identification of or rule out any research supported static and dynamic-risk factors identified on the *Risk and Protective Factors Checklist* (see appendix). The *Risk and Protective Factors Checklist* will be attached to the evaluation.
- o. Protective Factors

The evaluation must support the identification or rule-out of any research supported protective factors identified on the *Risk and Protective Factors Checklist* (see appendix). The Risk and Protective Factors Checklist will be attached to the evaluation.
- p. Risk Level

Provide an estimated risk level as low, moderate, or high. The estimated risk level shall be commensurate with assessment findings, identified research-supported risk and protective factors, and intervention needs as supported in the body of the report. An estimated risk level of low-moderate or moderate-high is not acceptable.

- q. Potential for Future Harm. (Optional but encouraged)
 - i. Demonstrated level of awareness or insight into potential harm/impact on the victim(s) and others (e.g., perspective-taking and empathic abilities and actions); and
 - ii. Most likely type of victim and potential harm they could experience based on literature.
- r. Amenability for Intervention and Treatment
- s. Additional Suggestions for Management. (Optional)

Any additional suggestions may include identification of additional concerns with an explanation of why special management may be needed.

VI. CATEGORIES OF ADULT PSYCHOSEXUAL EVALUATOR CERTIFICATION

A. Pursuant to the statutory mandate and authority afforded to the SOMB, to be eligible to conduct adult psychosexual evaluations in accordance with this section, an individual must be formally certified by the SOMB. The 3 established categories of certification are:

- a. **Senior/Approved Psychosexual Evaluator.** A Senior/Approved Psychosexual Evaluator is a clinical professional who is currently authorized by the SOMB to:
 - i. Independently conduct adult psychosexual evaluations in accordance with the requirements and standards for such evaluations as outlined in this section; and
 - ii. Is authorized to provide direct clinical supervision to individuals certified as an Associate/Supervised Psychosexual Evaluator, a Provisional/Supervised Psychosexual Evaluator, or who are otherwise seeking certification to conduct or assist with adult psychosexual evaluations.
- b. **Associate/Supervised Psychosexual Evaluator.** An Associate/Supervised Psychosexual Evaluator is a professional who is currently authorized by the SOMB to conduct adult psychosexual evaluations only under the clinical supervision of a Senior/Approved Psychosexual Evaluator in good standing.

A person certified as an Associate/Supervised Psychosexual Evaluator may independently conduct testing and assessments in accordance with their training and education as well as interviews and report preparation. Final adult psychosexual evaluation reports that have been conducted by an Associate/Supervised Psychosexual Evaluator must be reviewed and signed as approved by a Senior/Approved Psychosexual Evaluator.

- c. **Provisional/Supervised Psychosexual Evaluator.** A Provisional/Supervised Psychosexual Evaluator is a professional with limited clinical experience and specialized training who is currently authorized by the SOMB to assist with the conduct of adult psychosexual evaluations only under the clinical supervision of a Senior/Approved Psychosexual Evaluator with additional mentoring by an Associate/Supervised Psychosexual Evaluator in good standing as directed by a Senior/Approved Psychosexual Evaluator, and whose work products must be reviewed and signed by a Senior/Approved Psychosexual Evaluator in good standing. A person with a Provisional/Supervised Psychosexual Evaluator certificate is not a certified evaluator for the purposes of Section 18-8303, Idaho Code. This level of certification does not allow for independent submission of final adult psychosexual evaluation reports.
- B. The SOMB shall certify the evaluator to conduct or assist with conducting psychosexual evaluations of adult sex offenders based on the minimum educational, experience, specialized training, and other criteria set forth in this section.

VII. **CENTRAL ROSTER OF PSYCHOSEXUAL EVALUATORS**

- A. The SOMB shall maintain a complete and current official roster of all Senior/Approved Psychosexual Evaluators, Associate/Supervised Psychosexual Evaluators and Provisional/Supervised Psychosexual Evaluators to minimally include the:
 - a. Name of the evaluator;

- b. Business name, address, telephone number, and other contact information;
 - c. Level of certification as designated by the SOMB;
 - d. Expiration date of the certification period as designated by the SOMB; and
 - e. Population for which the evaluator is authorized by the SOMB to conduct evaluations (adult).
- B. The SOMB shall ensure the accuracy and currency of the official roster by updating the roster at a minimum of quarterly or as otherwise necessary and indicating on the official roster the date on which it was updated.
 - C. The SOMB shall publish the central roster on the SOMB's website and make the written roster otherwise available upon request.
 - D. A psychosexual evaluator certified by the SOMB has a continuing duty and obligation to maintain eligibility under this section if desiring to remain on the central roster.
 - E. The SOMB may remove an individual from the official roster of psychosexual evaluators for reasons as outlined in these standards.

VIII. PSYCHOSEXUAL EVALUATOR CERTIFICATION REPRESENTATION

- A. A person conducting or assisting with the conduct of adult psychosexual evaluations in accordance with this section shall clearly and accurately indicate their level and scope of certification as either a Senior/Approved Psychosexual Evaluator, an Associate/Supervised Psychosexual Evaluator or a Provisional/Supervised Psychosexual Evaluator when:
 - a. Making oneself available to accept referrals for adult psychosexual evaluations;
 - b. Advertising oneself as a psychosexual evaluator;
 - c. Communicating with the courts, other professionals, or the public regarding their certification to conduct or assist with the conduct of adult psychosexual evaluations;
 - d. Providing informed consent to clients and/or their legal guardians at the time of the evaluation; and

- e. Signing the written adult psychosexual evaluation report.
- B. In accordance with Section 18-8314, Idaho Code, no person shall claim or imply oneself to be a certified psychosexual evaluator pursuant to this section, or use a title or any abbreviation that implies that the person is a certified psychosexual evaluator pursuant to this section, unless so certified by the SOMB and currently in good standing on the official roster of psychosexual evaluators.

IX. MINIMUM REQUIREMENTS FOR PSYCHOSEXUAL EVALUATOR CERTIFICATION FOR ADULT SEX OFFENDERS

- A. A person who conducts or assists with the conduct of an adult psychosexual evaluation in accordance with this section must meet the eligibility criteria and minimum requirements as set forth in this section and be certified by the SOMB as a Senior/Approved Psychosexual Evaluator, an Associate/Supervised Psychosexual Evaluator or a Provisional/Supervised Psychosexual Evaluator.
- B. A person certified by the SOMB to conduct or assist with the conduct of adult psychosexual evaluations has a continuing duty to notify the SOMB in writing should circumstances result in the ineligibility of the evaluator to meet the minimum requirements for the level of certification designated by the SOMB.
- C. The minimum requirements for certification by the SOMB as a psychosexual evaluator include criteria, requirements, and expectations in the following categories:
 - a. Formal educational requirements;
 - b. Professional licensure requirements;
 - c. Clinical experience requirements;
 - d. Specialized training requirements; and
 - e. Continuing education/ongoing professional development requirements.
- D. A person certified by the SOMB to conduct or assist with the conduct of adult psychosexual evaluations shall secure and maintain professional liability insurance coverage.

- E. For purposes of clinical practice supervision for Associate/Supervised Psychosexual Evaluator certification, “supervision” is generally considered as face-to-face direct contact, documented teleconferencing, and/or interactive video conferencing using a ratio of 1 hour of clinical supervision for every 20 hours of direct service provided. If no approved supervisor is available within a 50 mile radius, applicants may submit a request to the SOMB to utilize an alternate supervisor.
- F. For purposes of clinical practice supervision for Provisional/Supervised Psychosexual Evaluator certification, “supervision” is considered as face-to-face direct contact for the first 250 hours of direct services provided. “Supervision” during the remaining period a person is certified as a Provisional/Supervised Psychosexual Evaluator shall be at a face-to-face direct contact ratio of 1 hour of clinical supervision for every 15 hours of direct service provided.
 - a. Clinical supervision for purposes of Provisional/Supervised Psychosexual Evaluator certification may not meet standard requirements for professional licensure. An educational program or licensure supervision may exceed the supervision requirements for SOMB certification.

X. REQUIREMENTS FOR CERTIFICATION AS A SENIOR/APPROVED PSYCHOSEXUAL EVALUATOR

To be eligible for SOMB certification as a Senior/Approved Psychosexual Evaluator, a person must:

- A. Formal Education Requirements. Possess an advanced/graduate degree (e.g., master’s, doctoral) in an applied clinical practice field such as psychiatry, psychology, counseling, or social work from an accredited university or college and program of study, preferably with an emphasis on the application of forensic clinical practice and for which a bachelor’s degree was a pre-requisite.
- B. Professional Licensure Requirements.
 - a. Possess a valid Idaho license to practice as a psychiatrist, psychologist, social worker, professional counselor, or marriage and family therapist, with such

license issued by the appropriate/respective regulatory body for the discipline or profession;

- b. Maintain such licensure for the duration of the certification period authorized by the SOMB; and
- c. Remain in good standing with the licensing body for the regulated profession, and not currently be under formal sanction or suspension of practice for ethical or other disciplinary matters.

C. Clinical Experience and Specialized Training Requirements.

- a. Engaged in a combination of direct, face-to-face clinical practice with adult sex offenders and received specialized training for a minimum of 1500 hours.
 - i. Clinical practice is defined as face-to-face when possible, sex offender evaluation, assessment, individual and/or group treatment, case staffing/planning, and crisis management;
 - ii. Of the 1500 hours requirement, a minimum of 500 combined clinical practice and specialized training hours shall have been accumulated within the 3 years immediately preceding the initial application for SOMB certification as a Senior/Approved Psychosexual Evaluator;
 - iii. Of the 1500 hours requirement, a minimum of 500 hours shall be specific to conducting adult psychosexual evaluations;
 - iv. Of the 1500 hours requirement, no more than 300 hours shall be attributed to supervised case staffing/planning or crisis management; and
 - v. Of the 1500 hours requirement, a minimum of 60 hours or a maximum of 375 hours may be attributed to specialized training.
 - vi. A minimum of 30 hours of specialized training shall be specific to the assessment and evaluation of adult sex offenders.
 - vii. No more than 16 hours of training specific to the treatment of victims of sexual abuse can be used to count toward the minimum number of specialized training hours.
- b. Specialized training may be in a combination of areas such as:

- i. Contemporary research regarding the etiology of sexually abusive behavior;
 - ii. Research-identified risk factors for the development and continuation of sexually abusive/offending behavior for adults;
 - iii. Contemporary research and practice in the areas of assessment, treatment, and management of adult sex offenders;
 - iv. Research-supported, sex offender-specific risk assessment tools for adults; and
 - v. Physiological assessment of deviant sexual arousal and/or interests.
 - vi. A person seeking dual certifications applicable to adult and juvenile populations may have a combination of adult and juvenile-centered training. However, at least 20 training hours applicable to adult sex offenders is required within the 60 specialized training hours minimum.
- c. Conducted a minimum of 9 adult psychosexual evaluations within the past 3 years, at least 3 of which have been conducted within the year preceding the initial application for certification as a Senior/Approved Psychosexual Evaluator.
 - d. A person seeking certification as a Senior/Approved Psychosexual Evaluator who is unable to meet the required clinical experience and/or psychosexual evaluation requirements and/or specialized training requirements within the designated 3-year time-frame may apply for conditional waiver consideration, as outlined in this section
 - e. The clinical experience requirements should be met by working with adult clients in order to be eligible for SOMB-certification to conduct evaluations of adults. The SOMB may consider experience with combined populations (adults and juveniles) on a case by case basis.

XI. REQUIREMENTS FOR CERTIFICATION AS AN ASSOCIATE/SUPERVISED PSYCHOSEXUAL EVALUATOR

To be eligible for SOMB certification as an Associate/Supervised Psychosexual Evaluator, a person must:

- A. Formal Education Requirements. Possess an advanced/graduate degree (e.g., master's, doctoral) in an applied clinical practice field such as psychiatry, psychology, counseling, or social work from an accredited university or college and program of study, preferably with an emphasis on the application of forensic clinical practice and for which a bachelor's degree was a pre-requisite.
- B. Professional Licensure Requirements.
 - a. Possess a valid Idaho license to practice as a psychiatrist, psychologist, social worker, professional counselor, or marriage and family therapist, with such license issued by the appropriate/respective regulatory body for the discipline or profession;
 - b. Maintain such licensure for the duration of the certification period authorized by the SOMB; and
 - c. Remain in good standing with the licensing body for the regulated profession, and not currently be under formal sanction or suspension of practice for ethical or other disciplinary matters.
- C. Practice under a current and formal clinical supervision agreement approved by the SOMB as specified in the Formal Clinical Supervision Agreement section.
- D. Clinical Experience and Specialized Training Requirements. To be eligible for SOMB certification as an Associate/Supervised Psychosexual Evaluator, a person must have:
 - a. Practiced only under the supervision of a Senior/Approved Evaluator and in accordance with a formal clinical supervision agreement as outlined in this section;
 - b. Engaged in a combination of direct, face-to-face clinical practice with adult sex offenders and received specialized training for a minimum of 500 hours.
 - i. Clinical practice is defined as face-to-face when possible, sex offender evaluation, assessment, individual and/or group treatment, case staffing/planning, and crisis management;

- ii. Of the 500 hours requirement, a minimum of 300 combined clinical practice and specialized training hours shall have been accumulated within the 3 years immediately preceding the initial application for SOMB certification as an Associate/Supervised Psychosexual Evaluator;
 - iii. Of the 500 hours requirement, a minimum of 100 hours shall be specific to conducting adult psychosexual evaluations; and
 - iv. Of the 500 hours requirement, a minimum of 60 hours or a maximum of 175 hours may be attributed to specialized training.
 - v. A minimum of 30 hours of specialized training shall be specific to the assessment and evaluation of adult sex offenders.
 - vi. No more than 16 hours of training specific to the treatment of victims of sexual abuse can be used to count toward the minimum number of specialized training hours.
- c. Specialized Training may be in a combination of areas such as:
- i. Contemporary research regarding the etiology of sexually abusive behavior;
 - ii. Research-identified risk factors for the development and continuation of sexually abusive/offending behavior for adults;
 - iii. Contemporary research and practice in the areas of assessment, treatment, and management of adult sex offenders;
 - iv. Research-supported, sex offender-specific risk assessment tools for adults; and
 - v. Physiological assessment of deviant sexual arousal and/or interests.
 - vi. A person seeking dual certifications applicable to adult and juvenile populations may have a combination of adult and juvenile-centered training. However, 20 training hours applicable to adult sex offenders is required within the 60 specialized training hours minimum.
- d. Conducted a minimum of 6 adult psychosexual evaluations within the past 3 years, at least 2 of which have been conducted within the year immediately

preceding the initial application for SOMB certification as an Associate/Supervised Psychosexual Evaluator.

- e. The clinical experience requirements should be met by working with adult clients in order to be eligible for SOMB certification to conduct evaluations of adults. The SOMB may consider experience with combined populations (adults and juveniles) on a case by case basis.
 - f. Supervisees are required to maintain a cumulative log that includes at minimum:
 - i. The dates of face-to-face, telephone/teleconferencing, and/or other “live” and interactive web-based verbal conversation;
 - ii. Number of hours of clinical supervision received;
 - iii. Number of hours and nature of clinical services provided and dates of service;
 - iv. Number of hours of evaluation practice and dates of service; and
 - v. Number, nature and completion dates of supervised evaluations conducted, all of which can be verified and signed by the supervisor.
 - g. The cumulative log may be required by the SOMB as a condition of approval of a formal supervision plan or application for certification; such a log is subject to audit or upon request by the SOMB in support of decision making regarding certification or quality assurances processes.
 - h. A person seeking certification as an Associate/Supervised Psychosexual Evaluator who is unable to meet the required clinical experience and/or specialized training requirements and/or psychosexual evaluation requirements within the designated time-frame may apply for conditional waiver consideration, as outlined in this section.
- E. Formal Clinical Supervision Agreement.
- a. A person seeking certification or currently certified by the SOMB as an Associate/Supervised Psychosexual Evaluator shall only conduct adult psychosexual evaluations under the clinical practice supervision of a Senior/Approved Psychosexual Evaluator and in accordance with the terms

of a formal clinical supervision agreement to be approved in advance by the SOMB.

- b. The formal clinical supervision agreement shall minimally address the following criteria:
 - i. The name and contact information of the supervisee and supervisor(s);
 - ii. Population to be served/evaluated (adults);
 - iii. Location, setting, nature of practice in which clinical services will be conducted;
 - iv. Effective period of clinical supervision;
 - v. The ratio of face-to-face or other “live” supervision hours to hours of direct service delivery; and
 - vi. Any other methods of clinical supervision that are anticipated to be employed.
- c. The formal clinical supervision agreement must accompany any initial or renewal application for Associate/Supervised Psychosexual Evaluator.
- d. Any change from a previously approved supervisor will require a new supervision agreement, which must be forwarded to the SOMB for approval.

XII. REQUIREMENTS FOR CERTIFICATION AS A PROVISIONAL/SUPERVISED PSYCHOSEXUAL EVALUATOR

Certification as a Provisional/Supervised Psychosexual Evaluator is limited to a 3 year period, at which time the person must have achieved the minimum requirements for certification level upgrade to Associate/Supervised Psychosexual Evaluator.

To be eligible for SOMB certification as a Provisional/Supervised Psychosexual Evaluator, a person must:

- A. Formal Education and Licensure Requirements.
 - a. Possess or be currently enrolled in a graduate program of study toward the attainment of an advanced/graduate degree (e.g., master’s, doctoral) from an accredited university or college and program of study, preferably with an emphasis on the application of forensic clinical practice; and

- b. Possess or be pursuing licensure in an applied clinical practice field such as psychiatry, psychology, counseling, or social work.

B. Clinical Experience Requirements.

- a. Practice only under the supervision of a Senior/Approved Psychosexual Evaluator and in accordance with a formal clinical supervision agreement as outlined in this section.
- b. For *renewal* certification as a Provisional/Supervised Psychosexual Evaluator, a person must accumulate a minimum of 147 face-to-face clinical practice hours under the supervision of a Senior/Approved Psychosexual Evaluator during the period of certification preceding the annual renewal application.
- c. Clinical supervision is required during any period of time in which a Provisional/Supervised Psychosexual Evaluator is providing direct clinical services to sex offenders as outlined in subsection IX.F. of this section.
- d. Supervisees are required to maintain a cumulative log that includes at minimum:
 - i. The dates of face-to-face clinical supervision;
 - ii. Number of hours and nature of supervised clinical services provided, and the dates of service;
 - iii. Number of hours of evaluation practice and dates of service; and
 - iv. Number, nature and completion dates of supervised evaluations conducted, all of which can be verified by the supervisor.
- e. The cumulative log may be required by the SOMB as a condition of approval of a formal supervision plan or application for certification; such a log is subject to audit or upon request by the SOMB in support of decision making regarding certification or quality assurances processes.

C. Formal Clinical Supervision Agreement.

- a. A person seeking certification or currently certified as a Provisional/Supervised Psychosexual Evaluator shall only assist with the conduct of adult psychosexual evaluations and provide clinical services under

the clinical practice supervision of a Senior/Approved Psychosexual Evaluator and in accordance with the terms of a formal clinical supervision agreement to be approved in advance by the SOMB.

- b. The formal clinical supervision agreement shall minimally address the following criteria:
 - i. The name and contact information of the supervisee and supervisor(s);
 - ii. Population to be served/evaluated (adults);
 - iii. Location, setting, nature of practice in which clinical services will be conducted;
 - iv. Effective period of clinical supervision;
 - v. Number of hours of anticipated direct clinical supervision; and
 - vi. Any other methods of clinical supervision that are anticipated to be employed.
- c. The formal clinical supervision agreement must accompany any initial or renewal application for a Provisional/Supervised Psychosexual Evaluator or application for change of certification category to the level of Associate/Supervised Psychosexual Evaluator.
- d. Any change from the previously approved supervision will require a new supervision agreement, which must be forwarded to the SOMB for approval.

XIII. CONTINUING EDUCATION/ONGOING PROFESSIONAL DEVELOPMENT REQUIREMENTS

- A. To maintain certification as a Senior/Approved Psychosexual Evaluator or an Associate/Supervised Psychosexual Evaluator, a person must obtain a minimum of 40 verifiable hours of continuing education in the form of workshops, conferences, symposia, or on-line training over the course of the 2-year period prior to each renewal period.
 - a. Twenty (20) hours of continuing education shall be consistent with maintaining licensure in their individual discipline of practice;
 - b. Twenty (20) hours of continuing education shall address a combination of specialized areas such as:

- i. Contemporary research regarding the etiology of sexually abusive behaviors;
 - ii. Research-identified risk factors for the development and continuation of sexually abusive/offending behavior for adults;
 - iii. Contemporary research and practice in the areas of assessment, treatment, and management of adult sex offenders;
 - iv. Research-supported, sex offender-specific risk assessment tools for adults; and
 - v. Physiological assessment of deviant sexual arousal and/or interests.
 - vi. Persons who are dually certified to provide services to adult and juvenile clients may have a combination of adult and juvenile-centered specialized continuing education.
- c. No more than 16 hours of continuing education specific to the treatment of victims of sexual abuse can be used to count toward the minimum number of continuing education hours.
 - d. Any on-line education must be from a recognized accredited educational institution, and no more than 10 hours of continuing education credits obtained from such on-line educational resources shall count toward the biennial 40 hour continuing education requirement.
 - e. Teaching relevant coursework at an accredited university or college, or providing training at a conference or workshop training (to be reviewed and approved by the SOMB) can substitute for up to one-half of the continuing education hours for an applicant.
- B. To maintain certification as a Provisional/Supervised Psychosexual Evaluator, a person must receive a minimum of 20 verifiable hours of specialized continuing education in the form of workshops, conferences, symposia, or on-line training annually. This specialized continuing education must meet the standards outlined in this section.
 - C. A person not meeting the continuing education requirements set forth in this section when submitting a renewal application for certification may submit a

written request for a 60-day extension to submit proof of meeting continuing education requirements. Failure to fully meet the minimum requirements may result in the psychosexual evaluator being placed in a less independent level of certification or denial of the renewal application.

XIV. CONDITIONAL WAIVER

- A. A conditional waiver request shall only be considered one time during initial application for applicants at the Senior/Approved or Associate/Supervised levels. Any application for advancement in certification level shall be considered as an initial application for conditional waiver purposes.
- B. Conditional waivers are not permitted and requests shall not be considered by the SOMB with respect to the formal educational and professional licensure requirements for psychosexual evaluators as specified in this section.
- C. A person submitting a petition for conditional waiver shall clearly articulate in writing the reasons that the one-time, time-limited exception for this requirement should be considered by the SOMB.
- D. The SOMB has sole discretion and final authority for granting or denying any conditional waiver requests, and determining any terms of the waiver if so granted.
- E. Initial Application for Certification. A person not meeting the minimum *clinical experience and/or psychosexual evaluation minimum and/or specialized training requirements* set forth in this section at the time of *initial* application for certification may formally petition the SOMB in writing for a time-limited conditional waiver.
 - a. A conditional waiver granted at the time of initial certification shall remain in effect for 2 years, excepts as provided below.
 - b. To be eligible for renewal certification as a psychosexual evaluator, a person granted a conditional waiver at the time of the initial application process shall be required to fully meet the minimum requirements and qualifications outlined in this section for the application level of certification at the time of the application for renewal. Failure to fully meet

the minimum requirements shall result in the treatment provider being placed in a less independent level of certification.

- c. The ongoing practice of the applicant, if granted a conditional waiver and certified during the initial application process, will be subject to the terms and any remedial action as established by the SOMB. The terms and remedial actions may, at the SOMB's discretion, include a period of clinical supervision.

XV. RECIPROCITY

- A. The SOMB may waive any initial certification pre-requisites for an applicant after receiving the applicant's credentials and determining that the applicant holds a current license/certification/credential from another state or jurisdiction to conduct post-conviction psychosexual evaluations that has requirements that are substantially equivalent to those set forth by the SOMB. The applicant must have obtained or be in the process of obtaining a valid Idaho license to practice as a psychiatrist, psychologist, social worker, professional counselor, or marriage and family therapist, with such license issued by the appropriate/respective regulatory body for the discipline or profession.
 - a. The level of Idaho certification shall be determined by the SOMB upon reviewing the applicant's credentials.
 - b. The SOMB reserves the right to require the applicant to meet minimum standards for Idaho certification.
 - c. A person who has been certified by the SOMB by reciprocity consideration on initial application shall be required to meet all qualifications, requirements and quality assurance standards set forth by the SOMB for continued Idaho certification.
- B. Providers of applicable sex offender management services residing in other states or jurisdictions must be certified by the Idaho SOMB to be eligible to receive referrals to provide pre-sentence services to Idaho sex offenders.

XVI. SOMB DECISIONMAKING PROCESSES FOR CERTIFYING PSYCHOSEXUAL EVALUATORS

- A. Certification Committee. The SOMB shall establish/appoint a Certification Committee composed of no fewer than 4 members to oversee the certification of psychosexual evaluators pursuant to this section. The Certification Committee will review all applications for initial certification, requests for changes in level of certification, reinstatement requests, or applicants on monitoring status. Renewal applications will be reviewed by the Certification Committee when requested by the SOMB coordinator.

The Certification Committee shall minimally include:

- a. Two current SOMB members who are eligible for certification as a Senior/Approved Evaluator or Treatment Provider;
- b. A non-clinical SOMB member; and
- c. A SOMB member of the board's choosing.

The Certification Committee will provide a recommendation to the SOMB for final approval or denial of the application. No Certification Committee member holding a personal or financial interest in an application before the committee shall participate in the deliberation or voting on approval of the application.

- B. Verification of Completeness of Applications. The SOMB coordinator shall:
- a. Determine, using an established checklist, the completeness of any application submitted for certification;
 - b. Provide written notification to the applicant within 5 business days of the receipt of the application and indicate whether:
 - i. All required items (the application, supporting documentation, and fees) have been received and the application is complete and ready for review by the Certification Committee; or
 - ii. Any required items are absent and needed to complete the application in order to be forwarded to the Certification Committee for review, and a deadline for submitting these items.
 - c. Provide to the Certification Committee the completed packet of applications for initial certification, requests for changes in level of certification,

reinstatement requests, or applicants on monitoring status for review prior to the regularly scheduled meeting.

- d. Provide to the Certification Committee a completed renewal application packet if the SOMB coordinator has questions regarding the application.
- C. To be considered for review by the Certification Committee in a given month, the completed application and all supporting documentation must be received no less than 30 days prior to the next scheduled meeting date, with such meeting dates published on the SOMB calendar/website. Late submission of an application will be reviewed by the SOMB as time allows and under no circumstances will the SOMB consider an application submitted within 14 days of the next scheduled meeting.
- D. A Certification Review Form shall be completed for each applicant reviewed on the date of the meeting, noting the decision of the committee.
- E. The Certification Committee shall, make a recommendation to the SOMB to approve, deny or otherwise monitor certification with. The SOMB making the final certification decision.
- F. The SOMB shall provide each applicant a written notification, within 15 business days, of the final approval/denial status as decided by the SOMB.
- G. Denial of Certification.
 - a. The SOMB shall provide written notification to the applicant within 15 business days of the denial decision, the reason(s) for the denial and notice of the right to a hearing; and
 - b. The SOMB may provide the applicant any recommended remedial steps or actions that can be taken to support further consideration for certification and any deadlines or timeframes in which such remedial action should occur.
 - c. A person who submits, less than 365 days from the submission of the previously denied application for certification, a revised application shall not be required to provide another application processing fee.

- H. The SOMB shall retain a complete file for each applicant seeking initial or renewal certification, including all written correspondence, applications and supporting documentation, and approval/denial decisions.

XVII. CERTIFICATION PERIOD

- A. Certification as a Senior/Approved Psychosexual Evaluator or an Associate/Supervised Psychosexual Evaluator shall remain in effect for 2 years provided that the evaluator continues to meet the criteria for such certification and such certification has not been suspended, revoked, otherwise restricted or on voluntary inactive status. Renewal application shall typically occur during a person's month of birth 2 years following initial certification, and every 2 years thereafter.
- B. Certification as a Provisional/Supervised Psychosexual Evaluator shall remain in effect for 1 year provided that the evaluator continues to meet the criteria for such certification and such certification has not been suspended or revoked. Renewal application shall typically occur during a person's month of birth one year following initial certification and every year thereafter, not to exceed 3 years. Certification as a Provisional/Supervised Psychosexual Evaluator is limited to a 3 year period.
- C. The SOMB shall issue to each applicant approved for certification a certificate that:
 - a. Designates the person as a certified evaluator for the appropriate level of certification and population the person is authorized to evaluate (adults);
 - b. Indicates the effective period of the person's certification status, including the expiration date; and
 - c. Is signed by the Chair and Vice Chair of the SOMB.
- D. The SOMB shall notify in writing each certified evaluator of the expiration of their approved status within 90 days of the expiration of their effective term of certification, outline the steps necessary to apply for renewal, and the deadline for providing a completed application for renewal. However, the certificate holder is ultimately responsible for timely renewal of certification.

- E. A person whose certification has not been renewed by the expiration date on the certificate issued by the SOMB shall no longer be certified as such and shall be removed from the central roster.
- F. Expiration. A person whose certification has expired may reapply at any time for certification as follows:
 - a. A person whose certification has been expired for less than 365 days may reapply for certification following the certification *renewal* process as outlined in this section.
 - b. A person whose certification has been expired for 365 days or more may reapply for certification by following the *initial* certification process as outlined in this section.

Section 3: Specialized Treatment and Treatment Providers

The provisions of this section govern the procedures relating to (a) the certification by the SOMB of professionals who are approved to provide specialized treatment to adults convicted of sex offenses or sex offense-related crimes (as referenced in Section 18-8314, Idaho Code) and (b) professionals' required practices with respect to providing such treatment.⁴

I. GENERAL CONSIDERATIONS

- A. A person certified by the SOMB to provide specialized treatment in accordance with the minimum requirements and other expectations outlined in this section is expected to:
 - a. Adhere to the ethical principles and codes, and any and all practice standards and guidelines, for the person's respective discipline/area of professional licensure as promulgated by the licensing body;
 - b. Be committed to community protection and safety; and
 - c. Conduct treatment procedures in a manner that ensures the humane and ethical treatment of the client, and communicates information using professional and non-biased language.
- B. A person certified by the SOMB to provide specialized sex offender treatment in accordance with this section shall:
 - a. Appreciate that specialized treatment for adults who have engaged in sexually abusive behavior is an evolving science; and
 - b. Remain apprised of contemporary research and engage in professional development activities in order to provide contemporary research-supported and evidence-based treatment.
 - c. Collaborate with other professionals who are involved in the management of clients to further the goals of specialized treatment and management and promote the guiding principles of these standards.

⁴ Standards and guidelines pertaining to treating juveniles adjudicated for sex offenses will be addressed by the SOMB at a later date.

- C. A person certified by the SOMB to provide specialized sex offender treatment in accordance with this section shall develop a comprehensive written document that details the treatment program being offered and guides delivery of services. This document shall be made available to the SOMB upon application for initial certification and certification renewal.
- D. A person certified by the SOMB to provide specialized sex offender treatment in accordance with this section shall not make assertions regarding a client's absolute risk/potential to reoffend prior to the initiation of treatment, during the course of treatment, or subsequent to treatment completion.

II. BROAD GOALS AND OBJECTIVES OF SPECIALIZED TREATMENT

Specialized treatment provided to adult sex offenders in accordance with this section, and in support of the guiding principles of these standards, is primarily designed to:

- A. Assist clients with effectively managing thoughts, fantasies, feelings, attitudes, and behaviors associated with their potential to sexually abuse or their risk for sexual re-offense;
- B. Promote the development of prosocial attitudes and practicing of pro-social skills;
- C. Support a lifestyle that is consistent with non-offending behavior; and
- D. Treat and document client's:
 - a. Reduction of empirically based dynamic risk factors that increase risk to reoffend; and
 - b. Development of protective factors that decrease risk.

III. INFORMED CONSENT AND TREATMENT AGREEMENTS

- A. Informed Consent. A person certified to provide specialized treatment to adult sex offenders in accordance with this section shall provide the individual receiving treatment (and/or legal guardian) with informed consent/assent and document accordingly in writing. This shall minimally address the following:
 - a. The nature and purpose of the treatment;
 - b. The methods and modalities of treatment to be used;

- c. Benefits and risks associated with participating in such treatment;
 - d. Right to refuse or decline treatment, and when treatment is mandated or ordered by the courts or other authorities there may be consequences of such decision;
 - e. Mandatory reporting requirements; and
 - f. Confidentiality limits.
- B. Treatment Agreements. A person certified to provide specialized treatment to adult sex offenders in accordance with this section shall establish a written treatment agreement with the client (and/or legal guardian). At a minimum, this agreement shall address:
- a. The nature, goals, and objectives of treatment;
 - b. The expected frequency and duration of treatment;
 - c. Rules and expectations of treatment program participants;
 - d. Incentives for participation and progress;
 - e. Consequences of noncompliance with treatment program rules and expectations; and
 - f. Criteria used to gauge treatment progress and determine completion of treatment.

IV. TREATMENT GUIDED BY ASSESSMENT

- A. Any person certified by the SOMB to provide specialized sex offender treatment in accordance with this section shall:
- a. Develop and implement an individualized, written treatment plan for each client that:
 - i. Outlines appropriate targets of treatment, and specific, clear, and measurable goals and objectives that are consistent with the results of a current psychosexual evaluation or risk assessment;
 - ii. Is signed by the client (and/or legal guardian) and the provider;
 - iii. Is reviewed and updated routinely to evaluate progress and documented in accordance with this section; and

- iv. Addresses the client’s level of compliance and demonstrated effort.
 - b. Deliver treatment that is commensurate with a given client’s assessed recidivism risk and intervention needs.
 - i. Empirically based risk factors shall be considered when determining recidivism risk (See appendix for Static and Dynamic Risk Factors Checklist);
 - ii. Routine utilization of a sex offender risk assessment such as the STABLE-2007 to guide the client’s treatment needs and address negative or no changes in dynamic factors; and
 - iii. Timely collaboration and communication with the client’s supervising authority to address treatment non-compliance, changes in assessed risk, treatment attendance and participation, and other client management information.
 - B. A person certified by the SOMB to provide specialized sex offender treatment in accordance with this section shall offer treatment only when they have the resources necessary to provide an adequate and appropriate level of intervention for a client’s assessed level of risk and intervention needs.
 - C. A person certified by the SOMB to provide specialized sex offender treatment in accordance with this section, excluding a Provisional/Supervised Sex Offender Treatment Provider shall refer a potential client to other treatment providers or agencies when they cannot provide an adequate and appropriate level of intervention.

V. TREATMENT METHODS, MODALITIES, AND ENGAGEMENT

- A. Methods. A person certified by the SOMB to provide specialized sex offender treatment in accordance with this section shall utilize research-supported methods of intervention, to the extent that such research is available. At present, these include, but are not limited to:

- a. Cognitive-behavioral techniques to help clients develop, practice, and implement strategies to effectively manage situations that may increase their risk of sexually abusing or otherwise reoffending; and
 - b. Behavioral methods such as education, modeling, supervised practice, and positive reinforcement to teach clients skills that will help them achieve prosocial goals.
- B. Modalities. A person certified by the SOMB to provide specialized sex offender treatment in accordance with this section shall deliver treatment using research-supported modalities that are matched to a clients' individual intervention needs and responsivity factors. Such modalities shall include, as appropriate:
- a. Individual therapy;
 - b. Family and/or couples therapy; and
 - c. Group therapy, within the following parameters:
 - i. Group therapy ideally may be co-facilitated and minimally must be facilitated by at least one treatment provider certified in accordance with this section;
 - ii. The therapist: client ratio for group therapy shall generally not exceed 1:10;
 - iii. Treatment groups shall generally not exceed 12 clients;
 - iv. Male and female clients shall not be included in the same treatment group;
 - v. Juvenile and adult modalities shall not be included in the same treatment group; and
 - vi. Best practice suggests not combining low- and high-risk offenders into the same groups, as available or practical.
- C. Treatment Engagement. A person certified by the SOMB to provide specialized sex offender treatment in accordance with this section shall strive to engage clients in treatment and promote internal motivation to change. This shall be facilitated by:
- a. Conducting treatment in a respectful, directive, and humane manner;
 - b. Creating a therapeutic climate that is conducive to trust and openness; and

- c. Involving clients in the development of their treatment plans and identifying realistic goals, objectives and timeframes for achieving goals.

VI. TARGETS OF TREATMENT

A person certified by the SOMB to provide specialized sex offender treatment in accordance with this section shall deliver treatment that focuses primarily on research-supported dynamic risk factors that are linked to sexual and non-sexual recidivism.

These include:

- A. General Self-Regulation. To assist clients with:
 - a. Managing emotional states that support or contribute to the client’s potential to engage in problem behavior;
 - b. Learning and practicing problem-solving and impulse control skills;
 - c. Managing mental health and substance abuse difficulties; and
 - d. Medication management as necessary.
- B. Sexual Self-Regulation. To assist clients with:
 - a. Developing healthy sexual interest and arousal, fantasies, and behaviors oriented toward age-appropriate and consensual partners;
 - b. Improving management and control of sexual impulses; and
 - c. Modifying thinking patterns that serve to support age-inappropriate and/or non-consensual sexual interest, arousal and behavior.
- C. Attitudes Supporting Criminality. To assist clients with:
 - a. Increasing attitudes, beliefs, and values that support prosocial sexual behaviors; and
 - b. Managing or decreasing attitudes, beliefs, and values that support sexually abusive and other antisocial behavior.
- D. Close Interpersonal Relationships. To assist clients with:
 - a. Developing skills for establishing and maintaining prosocial, healthy relationships with family members and intimate partners (as applicable and appropriate) to the population being served; and
 - b. Building on strengths in the client’s existing relationships.

- E. Social and Community Supports. To assist clients with:
 - a. Identifying appropriate, prosocial individuals who can act as positive support persons;
 - b. Engaging family members and other support persons to actively participate in the treatment process; and
 - c. Developing and maintaining stability in housing, employment, school, and leisure.
- F. Ancillary treatment targets may include factors not clearly established by research as linked to recidivism among adult sex offenders, but which may enhance the therapeutic relationship, engagement in treatment, and responsiveness to treatment. These may include targets such as:
 - a. Denial and minimization;
 - b. Victim empathy; and
 - c. Self-esteem.

VII. RESPONSIVITY FACTORS AND SPECIAL POPULATIONS

A person certified by the SOMB to provide specialized sex offender treatment in accordance with this section shall recognize that not all treatments have been developed or evaluated with various subpopulations of sexual abusers (e.g., juveniles, individuals with intellectual and developmental disabilities, clients with serious mental illness, those with varied cultures and other demographics). Accordingly, a treatment provider shall:

- A. Adjust approaches to interventions and match clients to appropriate services based on identified responsivity factors (e.g., age, gender, cognitive functioning) in order to facilitate clients' abilities to benefit from services;
- B. Equip themselves with the knowledge and skills necessary to adequately address clients' responsivity factors and/or special needs by consulting with knowledgeable others, accessing specialized training, and participating in other professional development activities; and

- C. Recognize their own strengths and limitations with respect to their ability to provide adequately responsive services to clients, and refer clients to providers skilled in addressing specific responsivity factors when necessary.

VIII. TREATMENT PROGRESS AND COMPLETION

- A. Continuum of Care. A person certified by the SOMB to provide specialized sex offender treatment in accordance with this section shall recognize that treatment occurs across a broad range of care within the criminal justice process. The Idaho Department of Correction shall be responsible for identifying procedures and expected roles for transitioning clients who are under court or Commission for Pardons and Parole supervision through the continuum of care.
- B. Progress. A person certified by the SOMB to provide specialized sex offender treatment in accordance with this section shall routinely assess and document a client's progress toward attainment of the specific objectives outlined in the client's individual treatment plan. Assessments of progress shall be conducted using multiple methods such as:
 - a. Client self-report;
 - b. Collateral reports;
 - c. Research-grounded assessment scales and measures specific to adult sex offenders; and
 - d. Specialized physiological and behavioral assessments as appropriate for the population being served.
- C. Polygraph. A person certified by the SOMB to provide specialized sex offender treatment in accordance with this section shall collaborate with the client's supervising authority to address the results of a client's polygraph examinations. Polygraph results and admissions made during the polygraph process shall be used to identify additional treatment needs and potential sanctions.
- D. Completion. A person certified by the SOMB to provide specialized sex offender treatment in accordance with this section, excluding a Provisional/Supervised Sex

Offender Treatment Provider shall recognize and communicate that successful completion of a specialized treatment program:

- a. Indicates that the client has met the specified series of goals and objectives of an individualized treatment plan designed to reduce the individual's risk to reoffend and increase stability and prosocial behaviors; and
 - b. The client has demonstrated the goals and objectives of treatment have been achieved as demonstrated by their behavior while in treatment and under supervision; but
 - c. Does not indicate that the client's risk to reoffend has been eliminated completely.
- E. A client's progress in and completion of treatment shall be gauged by the provider within the context of a clients' individual capacities, abilities, and limitations.
- F. The treatment provider shall take reasonable steps to prepare the client for treatment completion. These steps may include:
- a. A gradual reduction in frequency of contacts over time as treatment gains are made;
 - b. Aftercare/maintenance sessions to reinforce and assess treatment gains; and
 - c. Providing written information that includes follow up recommendations for maintaining treatment gains to the client, family/partner, support persons, and appropriate professionals involved in ongoing case management, within the confidentiality parameters established.

IX. DOCUMENTATION

A person certified by the SOMB to provide specialized sex offender treatment in accordance with this section shall maintain appropriate written documentation pertaining to the delivery of treatment services for each client. This documentation shall be conducted in accordance with any professional regulations, standards and guidelines, will be included in each individual case file and shall minimally include, but not be limited to:

- A. Informed consent;

- B. Treatment agreements;
- C. Treatment plans and treatment plan reviews:
 - a. Treatment plan reviews should be conducted at least every 180 days; and
 - b. The client's participation in treatment plan reviews must be documented.
- D. Assessments of treatment progress;
 - a. Monthly status updates and quarterly progress reports submitted to the client's supervising authority and the client utilizing the SOMB approved forms. (See Appendix);
 - i. The SOMB approved forms may be supplemented with additional reporting measures as desired by the treatment provider.
 - ii. Monthly status updates may be completed at the time of case staffing with the supervising officer; and
 - b. If active in primary treatment, then monthly progress reports are required; if agreed upon with the supervising officer, treatment progress assessments may be reduced to only quarterly reporting if the individual is in aftercare treatment.
 - c. The nature of monthly/quarterly status reports should be done with Risk/Needs/Responsivity (RNR) principles.
- E. Treatment progress notes from each individual, group, and/or family session conducted with special attention towards reduction of risk factors and enhancement of protective factors; and
- F. Discharge summaries must be prepared when a client has successfully completed or otherwise discontinued treatment. All discharge summaries must indicate what risk and protective factors were addressed.

X. CATEGORIES OF SOMB-CERTIFIED SPECIALIZED ADULT TREATMENT PROVIDERS

- A. Pursuant to the statutory mandate and authority afforded to the SOMB, to be eligible to provide specialized treatment to adult sex offenders in accordance with

this section, an individual must be formally certified by the SOMB. The three established categories of certification for treatment providers are:

- a. **Senior/Approved Sex Offender Treatment Provider.** A Senior/Approved Sex Offender Treatment Provider is a clinical professional who is currently authorized by the SOMB to:
 - i. Independently provide treatment to adult sex offenders in accordance with the requirements and standards for such treatment as outlined in this section; and
 - ii. Provide direct clinical supervision to individuals certified as an Associate/Supervised Sex Offender Treatment Provider, a Provisional/Supervised Sex Offender Treatment Provider, or who are otherwise seeking certification to provide such treatment.
 - b. **Associate/Supervised Sex Offender Treatment Provider.** An Associate/Supervised Sex Offender Treatment Provider is a professional who is currently authorized by the SOMB to provide treatment to adult sex offenders only under the clinical supervision of a Senior/Approved Sex Offender Treatment Provider in good standing and whose treatment documentation and other work products must be reviewed and co-signed by a Senior/Approved Sex Offender Treatment Provider in good standing.
 - c. **Provisional/Supervised Sex Offender Treatment Provider.** A Provisional/Supervised Sex Offender Treatment Provider is a professional with limited clinical experience and specialized training who is currently authorized by the SOMB to provide treatment to adult sex offenders only under the clinical supervision of a Senior/Approved Sex Offender Treatment Provider in good standing and whose treatment documentation and other work products must be reviewed and co-signed by a Senior/Approved Sex Offender Treatment Provider in good standing.
- B. The SOMB shall provide authorization of the professional to provide treatment for adult sex offenders, based on the minimum educational, experience, specialized training, and other criteria set forth in this section.

XI. CENTRAL ROSTER OF CERTIFIED SEX OFFENDER TREATMENT PROVIDERS

- A. The SOMB shall maintain a complete and current official roster of all Senior/Approved Sex Offender Treatment Providers, Associate/Supervised Sex Offender Treatment Providers and Provisional/Supervised Sex Offender Treatment Providers, to minimally include the:
 - a. Name of the treatment provider;
 - b. Business name, address, telephone number, and other contact information;
 - c. Level of certification as designated by the SOMB;
 - d. Expiration date of the certification period as designated by the SOMB; and
 - e. Population for which the person is authorized by the SOMB to provide treatment (adult).
- B. The SOMB shall ensure the accuracy and currency of the official roster by updating the roster at a minimum of quarterly or as otherwise necessary and indicating on the official roster the date on which it was updated.
- C. The SOMB shall publish the central roster on the SOMB’s website and make the written roster otherwise available upon request.
- D. A certified sex offender treatment provider as designated by the SOMB has a continuing duty and obligation to maintain eligibility under this section if desiring to remain on the central roster.
- E. The SOMB may remove an individual from the official roster of certified treatment providers for reasons as outlined in these standards.

XII. REPRESENTATIONS AS A CERTIFIED SEX OFFENDER TREATMENT PROVIDER

- A. A person providing specialized treatment to adult sex offenders in accordance with this section shall clearly and accurately indicate their level and scope of certification as either a Senior/Approved Sex Offender Treatment Provider, an Associate/Supervised Sex Offender Treatment Provider, or a Provisional/Supervised Sex Offender Treatment Provider when:
 - a. Making oneself available to accept referrals for specialized treatment;

- b. Advertising oneself as a sex offender treatment provider;
 - c. Communicating with the courts, other professionals, or the public regarding their certification to provide specialized treatment to adult sex offenders;
 - d. Providing informed consent to clients (and/or legal guardian) prior to initiating treatment; and
 - e. Signing any and all treatment documentation and records.
- B. In accordance with Section 18-8314, Idaho Code, no person shall claim or imply oneself to be a certified sex offender treatment provider pursuant to this section, or use a title or any abbreviation that implies that the person is a certified sex offender treatment provider pursuant to this section, unless so certified by the SOMB and currently in good standing on the official roster of sex offender treatment providers.

XIII. MINIMUM REQUIREMENTS FOR SOMB CERTIFICATION AS A SEX OFFENDER TREATMENT PROVIDER FOR ADULT SEX OFFENDERS

- A. A person who provides sex offender treatment in accordance with this section must meet the eligibility criteria and minimum requirements as set forth in this section and be certified by the SOMB as a Senior/Approved Sex Offender Treatment Provider, an Associate/Supervised Sex Offender Treatment Provider, or a Provisional/Supervised Sex Offender Treatment Provider.
- B. A person certified by the SOMB to provide sex offender treatment has a continuing duty to notify the SOMB in writing should circumstances result in the ineligibility of the provider to meet the minimum requirements for the level of certification designated by the SOMB.
- C. The minimum requirements for certification by the SOMB as a sex offender treatment provider include criteria, requirements, and expectations in the following categories:
- a. Formal educational requirements;
 - b. Professional licensure requirements;
 - c. Clinical experience requirements;

- d. Specialized training requirements; and
- e. Continuing education/ongoing professional development requirements.
- D. A person certified by the SOMB to provide sex offender treatment shall secure and maintain professional liability insurance coverage.
- E. For purposes of clinical practice supervision for Associate/Supervised Sex Offender Treatment Provider certification, “supervision” is generally considered as face-to-face direct contact, documented teleconferencing, and/or interactive video conferencing using a ratio of 1 hour of clinical supervision for every 20 hours of direct service provided. If no approved supervisor is available within a 50 mile radius, applicants may submit a request to the SOMB to utilize an alternate supervisor.
- F. For purposes of clinical practice supervision for Provisional/Supervised Sex Offender Treatment Provider certification, “supervision” is considered as face-to-face direct contact for the first 150 hours of services provided, followed by 100 hours of co-facilitation. “Supervision” during the remaining period a person is certified as a Provisional/Supervised Sex Offender Treatment Provider shall be at a face-to-face direct contact ratio of 1 hour of clinical supervision for every 15 hours of direct service provided.
 - a. Clinical supervision for purposes of Provisional/Supervised Sex Offender Treatment Provider certification may not meet standard requirements for professional licensure. An educational program or licensure supervision may exceed the supervision requirements for SOMB certification.

XIV. REQUIREMENTS FOR CERTIFICATION AS A SENIOR/APPROVED SEX OFFENDER TREATMENT PROVIDER

To be eligible for SOMB certification as a Senior/Approved Sex Offender Treatment Provider, a person must:

- A. Formal Education Requirements. Possess an advanced/graduate degree (e.g., master’s, doctoral) in an applied clinical practice field such as psychiatry, psychology, counseling, or social work from an accredited university or college and

program of study, preferably with an emphasis on the application of forensic clinical practice and for which a bachelor's degree was a pre-requisite.

B. Professional Licensure Requirements.

- a. Possess a valid license to practice as a psychiatrist, psychologist, social worker, professional counselor, or marriage and family therapist with such license issued by the appropriate/respective regulatory body for the discipline or profession;
- b. Maintain such licensure for the duration of the certification period authorized by the SOMB; and
- c. Remain in good standing with the licensing body for the regulated profession, and not currently be under formal sanction or suspension of practice for ethical or other disciplinary matters.

C. Clinical Experience and Specialized Training Requirements.

- a. Engaged in a combination of direct face-to-face clinical practice with adult sex offenders and received specialized training for a minimum of 1500 hours.
 - i. Clinical practice is defined as face-to-face when possible, sex offender assessment, individual and/or group treatment, case treatment staffing/planning and crisis management.
 - ii. Of the 1500 hours requirement, a minimum of 500 combined clinical practice and specialized training hours shall have been accumulated within the 3 years immediately preceding the initial application for SOMB certification as a Senior/Approved Sex Offender Treatment Provider;
 - iii. Of the 1500 hours requirement, a minimum of 500 hours shall be specific to providing specialized sex offender treatment; and
 - iv. Of the 1500 hours requirement, a minimum of 60 hours or a maximum of 375 hours may be attributed to specialized training.
 - v. No more than 16 hours of training specific to the treatment of victims of sexual abuse can be used to count toward the minimum number of specialized training hours.

- b. Specialized training may be in a combination of areas such as:
 - i. Contemporary research regarding the etiology of sexually abusive behavior;
 - ii. Research-identified risk factors for the development and continuation of sexually abusive/offending behavior for adults;
 - iii. Contemporary research and practice in the areas of assessment, treatment, and management of adult sex offenders;
 - iv. Research-supported, sex offender-specific risk assessment tools for adults;
 - v. Physiological assessment of deviant sexual arousal and/or interests; and
 - vi. A person seeking dual certification applicable to adult and juvenile populations may have a combination of adult and juvenile-centered training. However, at least 20 training hours applicable to adult sex offenders is required within the 60 training hours minimum.
- c. A person seeking certification as a Senior/Approved Sex Offender Treatment Provider who is unable to meet the required clinical experience and/or specialized training requirements within the designated 3-year time-frame may apply for conditional waiver consideration, as outlined in this section.

XV. REQUIREMENTS FOR CERTIFICATION AS AN ASSOCIATE/SUPERVISED SEX OFFENDER TREATMENT PROVIDER

To be eligible for SOMB certification as an Associate/Supervised Sex Offender Treatment Provider, a person must:

- A. Formal Education Requirements. Possess an advanced/graduate degree (e.g., master's, doctoral) in an applied clinical practice field such as psychiatry, psychology, counseling, or social work from an accredited university or college and program of study, preferably with an emphasis on the application of forensic clinical practice and for which a bachelor's degree was a pre-requisite.
- B. Professional Licensure Requirements.

- a. Possess a valid license to practice as a psychiatrist, psychologist, social worker, professional counselor, or marriage and family therapist with such license issued by the appropriate/respective regulatory body for the discipline or profession;
 - b. Maintain such licensure for the duration of the certification period authorized by the SOMB; and
 - c. Remain in good standing with the licensing body for the regulated profession, and not currently be under formal sanction or suspension of practice for ethical or other disciplinary matters.
- C. Practice under a current and formal clinical supervision agreement approved by the SOMB as specified in the Formal Clinical Supervision Agreement section.
- D. Clinical Experience and Specialized Training Requirements. To be eligible for SOMB certification as an Associate/Supervised Sex Offender Treatment Provider, a person must have:
- a. Practiced only under the supervision of a Senior/Approved Sex Offender Treatment Provider and in accordance with a formal clinical supervision agreement as outlined in this section;
 - b. Engaged in a combination of direct, face-to-face clinical practice with adult sex offenders and received specialized training for a minimum of 500 hours,
 - i. Clinical practice is defined as face-to-face when possible, sex offender assessment, individual and/or group treatment, case treatment staffing/planning, and crisis management;
 - ii. Of the 500 hours requirement, a minimum of 300 combined clinical practice and specialized training hours shall have been accumulated within the 3 years immediately preceding the initial application for SOMB certification as an Associate/Supervised Sex Offender Treatment Provider;
 - iii. Of the 500 hours requirement, a minimum of 100 hours within the previous 3 years must include direct observation of a Senior/Approved

- Sex Offender Treatment Provider conducting specialized treatment and discussion with the supervisor's approach to such services;
- iv. Of the 500 hours requirement, a minimum of 100 hours within the previous 3 years must include co-facilitation of specialized treatment under the direct clinical supervision and immediate oversight of a Senior/Approved Sex Offender Treatment Provider and under a formal clinical supervision agreement as outlined in this section; and
 - v. Of the 500 hours requirement, a minimum of 60 hours or a maximum of 175 hours may be attributed to specialized training.
 - vi. No more than 16 hours of training specific to the treatment of victims of sexual abuse can be used to count toward the minimum number of specialized training hours.
- c. Specialized training may be in a combination of areas such as:
- i. Contemporary theories regarding the etiology of sexually abusive behavior;
 - ii. Research-identified risk factors for the development and continuation of sexually abusive/offending behavior for adults;
 - iii. Contemporary research and practice in the areas of assessment, treatment, and management of adult sex offenders;
 - iv. Research-supported, sex offender-specific risk assessment tools for adults; and
 - v. Physiological assessment of deviant sexual arousal and/or interests.
 - vi. A person seeking dual certification applicable to adult and juvenile populations may have a combination of adult and juvenile-centered training. However, at least 20 training hours applicable to adult sex offenders is required within the 60 training hours minimum.
- d. To maximally support any application for SOMB certification as a sex offender treatment provider, supervisees are required to maintain a cumulative log that includes at minimum:

- i. The dates of face-to-face, telephone/teleconferencing, and/or other “live” and interactive web-based verbal conversation;
 - ii. Number of hours of clinical supervision received; and
 - iii. Number of hours of treatment services provided and the dates of service, all of which can be verified by the supervisor.
 - e. The cumulative log may be required by the SOMB as a condition of approval of a formal supervision plan or application for certification; such a log may be subject to audit or requested by the SOMB in support of decision making regarding certification or quality assurances processes.
- E. Formal Clinical Supervision Agreement.
 - a. A person seeking certification or currently certified as an Associate/Supervised Sex Offender Treatment Provider shall only provide such treatment under the clinical practice supervision of a Senior/Approved Sex Offender Treatment Provider and in accordance with the terms of a formal clinical supervision agreement to be approved in advance by the SOMB.
 - b. The formal clinical supervision agreement shall minimally address the following criteria:
 - i. The name and contact information of the supervisee and supervisor(s);
 - ii. Population to be served (adult);
 - iii. Location, setting, nature of practice in which treatment services will be conducted;
 - iv. Effective period of clinical supervision;
 - v. The ratio of face-to-face or other “live” supervision hours to hours of direct service delivery; and
 - vi. Any other methods of clinical supervision that are anticipated to be employed.
 - c. The formal clinical supervision agreement must accompany any initial or renewal application for an Associate/Supervised Sex Offender Treatment

Provider or application for change of certification category to the level of Senior/Approved Sex Offender Treatment Provider.

- d. Any change from the previously approved supervisor will require a new supervision agreement, which must be forwarded to the SOMB for approval.

XVI. REQUIREMENTS FOR CERTIFICATION AS A PROVISIONAL/SUPERVISED SEX OFFENDER TREATMENT PROVIDER

Certification as a Provisional/Supervised Sex Offender Treatment Provider is limited to a 3 year period, at which time the person must have achieved the minimum requirements for certification level upgrade to Associate/Supervised Sex Offender Treatment Provider.

To be eligible for SOMB certification as a Provisional/Supervised Sex Offender Treatment Provider, a person must:

- A. Formal Education and Licensure Requirements.
 - a. Possess or be currently enrolled in a graduate program of study toward the attainment of an advanced/graduate degree (e.g., master's, doctoral) from an accredited university or college and program of study, preferably with an emphasis on the application of forensic clinical practice; and
 - b. Possess or be pursuing licensure in an applied clinical practice field such as psychiatry, psychology, counseling, or social work.
- B. Clinical Experience Requirements.
 - a. Practice only under the supervision of a Senior/Approved Sex Offender Treatment Provider and in accordance with a formal clinical supervision agreement as outlined in this section.
 - b. For *renewal* certification as a Provisional/Supervised Sex Offender Treatment Provider, a person must accumulate a minimum of 147 face-to-face clinical practice hours under the supervision of a Senior/Approved Sex Offender Treatment Provider during the period of certification preceding the annual renewal application.
 - i. The SOMB may consider modifications to the renewal clinical practice requirements on a case by case basis as circumstances warrant.

- c. Clinical supervision is required during any period of time in which a Provisional/Supervised Sex Offender Treatment Provider is providing specialized treatment services as outlined in subsection XIII.F. of this section.
 - d. To maximally support any application for SOMB certification as a sex offender treatment provider, supervisees are required to maintain a cumulative log that includes at minimum:
 - i. The dates of face-to-face clinical supervision;
 - ii. Number of hours of clinical supervision received; and
 - iii. Number of hours of treatment services provided and the dates of service, all of which can be verified by the supervisor.
 - e. The cumulative log may be required by the SOMB as a condition of approval of a formal supervision plan or application for certification; such a log may be subject to audit or requested by the SOMB in support of decision making regarding certification or quality assurances processes.
- C. Formal Clinical Supervision Agreement.
- a. A person seeking certification or currently certified as a Provisional/Supervised Sex Offender Treatment Provider shall only provide such treatment under the clinical practice supervision of a Senior/Approved Sex Offender Treatment Provider and in accordance with the terms of a formal clinical supervision agreement to be approved in advance by the SOMB.
 - b. The formal clinical supervision agreement shall minimally address the following criteria:
 - i. The name and contact information of the supervisee and supervisor(s);
 - ii. Population to be served (adults);
 - iii. Location, setting, nature of practice in which treatment services will be conducted;
 - iv. Effective period of clinical supervision; and
 - v. Any other methods of clinical supervision that are anticipated to be employed.

- c. The formal clinical supervision agreement must accompany any initial or renewal application for a Provisional/Supervised Sex Offender Treatment Provider or application for change of certification category to the level of Associate/Supervised Sex Offender Treatment Provider.
- d. Any change from the previously approved supervisor will require a new supervision agreement, which must be forwarded to the SOMB for approval.

XVII. CONTINUING EDUCATION/ONGOING PROFESSIONAL DEVELOPMENT REQUIREMENTS

- A. To maintain certification as a Senior/Approved Sex Offender Treatment Provider, or an Associate/Supervised Sex Offender Treatment Provider, a person must receive a minimum of 40 verifiable hours of continuing education in the form of workshops, conferences, symposia, or on-line training over the course of the 2 year period prior to each renewal period.
 - a. Twenty (20) hours of continuing education shall be consistent with maintaining licensure in their individual discipline of practice;
 - b. Twenty (20) hours of continuing education shall address a combination of specialized areas such as:
 - i. Contemporary research regarding the etiology of sexually abusive behaviors;
 - ii. Research-identified risk factors for the development and continuation of sexually abusive/offending behavior for adults;
 - iii. Contemporary research and practice in the areas of assessment, treatment, and management of adult sex offenders;
 - iv. Research-supported, sex offender-specific risk assessment tools for adults; and
 - v. Physiological assessment of deviant sexual arousal and/or interests.
 - vi. Persons who are dually certified to provide services to adult and juvenile clients may have a combination of adult and juvenile-centered specialized continuing education.

- c. No more than 16 hours of training specific to the treatment of victims of sexual abuse can be used to count toward the minimum number of specialized training hours.
 - d. Any on-line education must be from a recognized accredited educational institution, and no more than 10 hours of continuing education credits obtained from such on-line educational resources shall count toward the biennial 40 hour continuing education requirement.
 - e. Teaching relevant coursework at an accredited university or college, or providing training at a conference or workshop training (to be reviewed and approved by the SOMB) can substitute for up to one-half of the continuing education hours for an applicant.
- D. To maintain certification as a Provisional/Supervised Sex Offender Treatment Provider, a person must receive a minimum of 20 verifiable hours of specialized continuing education in the form of workshops, conferences, symposia, or on-line training annually. This specialized continuing education must meet the standards outlined in this section.
- E. A person not meeting the continuing education requirements set forth in this section when submitting a *renewal* application for certification may submit a written request for a 60-day extension to submit proof of meeting continuing education requirements. Failure to fully meet the minimum requirements may result in the psychosexual evaluator being placed in a less independent level of certification or denial of the renewal application.

XVIII. CONDITIONAL WAIVER

- A. A conditional waiver request shall only be considered one during initial application for applicants at the Senior/Approved or Associate/Supervised levels. Any application for advancement in certification level shall be considered an initial application for conditional waiver purposes.

- B. Conditional waivers are not permitted and requests shall not be considered by the SOMB with respect to the *formal educational and professional licensure* requirements for sex offender treatment providers as specified in this section.
- C. A person submitting a petition for conditional waiver shall clearly articulate in writing the reasons that the time-limited exception for this requirement shall be considered by the SOMB.
- D. The SOMB has sole discretion and final authority for granting or denying any conditional waiver requests, and determining any terms of the waiver if so granted.
- E. Initial Application for Certification. A person not meeting the minimum *clinical experience and/or specialized training requirements* for providing sex offender treatment as set forth in this section at the time of *initial* application for certification may formally petition the SOMB in writing for a time-limited conditional waiver and exception.
 - a. A conditional waiver granted at the time of initial certification shall remain in effect for 2 years, except as provided below.
 - b. To be eligible for renewal certification as a sex offender treatment provider, a person granted a conditional waiver at the time of the initial application process shall be required to fully meet the minimum requirements and qualification outlined in this section for the applicable level of certification at the time of the application for renewal. Failure to fully meet the minimum requirements shall result in the treatment provider being placed in a less independent level of certification.
 - c. The ongoing practice of the applicant, if granted a conditional waiver and certified during the initial application process, will be subject to the terms and any remedial action as established by the SOMB. The terms and remedial actions may, at the SOMB's discretion, include a period of clinical supervision.

XIX. RECIPROCITY

- A. The SOMB may waive any initial certification pre-requisites for an applicant after receiving the applicant’s credentials and determining that the applicant holds a current license/certification/credential from another state or jurisdiction that has requirements that are substantially equivalent to those set forth by the SOMB.
 - a. The level of Idaho certification shall be determined by the SOMB upon reviewing the applicant’s credentials.
 - b. The SOMB reserves the right to require the applicant to meet minimum standards for Idaho certification.
 - c. A person who has been certified by the SOMB by reciprocity consideration on initial application shall be required to meet all qualifications, requirements and quality assurance standards set forth by the SOMB for continued Idaho certification.
- B. Providers of applicable sex offender management services residing in other states or jurisdictions must be certified by the Idaho SOMB to be eligible to receive referrals to provide services to sex offenders who reside in Idaho and who are under supervision by the Idaho Department of Correction.

XX. SOMB DECISIONMAKING PROCESSES FOR CERTIFYING SEX OFFENDER TREATMENT PROVIDERS

- A. Certification Committee. The SOMB shall establish/appoint a Certification Committee composed of no fewer than 4 members to oversee the certification of sex offender treatment providers pursuant to this section. The Certification Committee will review all applications for initial certification, requests for changes in level of certification, reinstatement requests, or applicants on monitoring status. Renewal applications will be reviewed by the Certification Committee when requested by the SOMB coordinator.

The Certification Committee shall minimally include:

 - a. Two current SOMB members who are eligible for certification as a Senior/Approved Evaluator or Treatment Provider;
 - b. A non-clinical SOMB member; and

c. A SOMB member of the board's choosing.

The Certification Committee will provide a recommendation to the SOMB for final approval or denial of the application. No Certification Committee member holding a personal or financial interest in an application before the committee shall participate in the deliberation or voting on approval of the application.

B. Verification of Completeness of Applications. The SOMB coordinator shall:

a. Determine, using an established checklist, the completeness of any application submitted for certification;

b. Provide written notification to the applicant within 5 business days of the receipt of the application and indicate whether:

i. All required items (the application, supporting documentation, and fees) have been received and the application is complete and ready for review by the Certification Committee; or

ii. Any required items are absent and needed to complete the application in order to be forwarded to the Certification Committee for review and a deadline for submitting these items; and

c. Provide to the Certification Committee the completed packet of applications for initial certification, requests for changes in level of certification, reinstatement requests, or applicants on monitoring status for review prior to the regularly scheduled meeting;

d. Provide to the Certification Committee a completed renewal application packet if the SOMB coordinator has questions regarding the application.

C. To be considered for review by the Certification Committee in a given month, the completed application and all supporting documentation must be received no less than 30 days prior to the next scheduled meeting date, with such meeting dates published on the SOMB calendar/website. Late submission of an application will be reviewed by the SOMB as time allows and under no circumstances will the SOMB consider an application submitted within 14 days of the next scheduled meeting.

- D. A Certification Review Form shall be completed for each applicant reviewed on the date of the meeting, noting the decision of the committee.
- E. The Certification Committee shall make a recommendation to the SOMB to approve, deny, or otherwise monitor certification with the SOMB making the final certification decision.
- F. The SOMB shall provide each applicant a written notification, within 15 business days, of the final approval/denial status as decided by the SOMB.
- G. Denial of Certification.
 - a. The SOMB shall provide written notification to the applicant within 15 business days of the denial decision, the reason(s) for the denial and notice of the right to a hearing; and
 - b. The SOMB may provide the applicant any recommended remedial steps or actions that can be taken to support further consideration for certification and any deadlines or timeframes in which such remedial action should occur.
 - c. A person who submits, less than 365 days from the submission of the previously denied application for certification, a revised application shall not be required to provide another application processing fee.
- H. The SOMB shall retain a complete file for each applicant seeking initial or renewal certification, including all written correspondence, applications and supporting documentation, and approval/denial decisions.

XXI. CERTIFICATION PERIOD

- A. Certification as a Senior/Approved Sex Offender Treatment Provider or an Associate/Supervised Sex Offender Treatment Provider shall remain in effect for 2 years provided that the sex offender treatment provider continues to meet the criteria for such certification and such certification has not been suspended, revoked, otherwise restricted or on voluntary status. Renewal application shall typically occur during a person's month of birth 2 years following initial certification, and every 2 years thereafter.

- B. Certification as a Provisional/Supervised Sex Offender Treatment Provider shall remain in effect for 1 year provided that the sex offender treatment provider continues to meet the criteria for such certification and such certification has not been suspended or revoked. Renewal application shall typically occur during a person's month of birth one year following initial certification and every year thereafter, not to exceed 3 years. Certification as a Provisional/Supervised Treatment Provider is limited to a 3 year period.
- C. The SOMB shall issue to each applicant approved for certification a certificate that:
 - a. Designates the person as a certified sex offender treatment provider for the appropriate level of certification and population the person is authorized to provide treatment services for (adults);
 - b. Indicates the effective period of the person's certification status, including the expiration date; and
 - c. Is signed by the Chair and Vice Chair of the SOMB.
- D. The SOMB shall notify in writing each certified sex offender treatment provider of the expiration of their approved status within 90 days of the expiration of their effective term of certification, outline the steps necessary to apply for renewal, and the deadline for providing a completed application for renewal. However, the certificate holder is ultimately responsible for timely renewal of certification.
- E. A person whose certification has not been renewed by the expiration date on the certificate issued by the SOMB shall no longer be certified as such and shall be removed from the central roster.
- F. Expiration. A person whose certification has expired may reapply at any time for certification as follows:
 - a. A person whose certification has been expired for less than 365 days may reapply for certification following the certification *renewal* process as outlined in this section.
 - b. A person whose certification has been expired for 365 days or more may reapply for certification by following the *initial* certification process as outlined in this section.

Section 4: Post-Conviction Sex Offender Polygraph Examinations and Examiners

The provisions of this section govern the procedures relating to (a) the certification of professionals approved by the Idaho SOMB to conduct post-conviction polygraph examinations of adults convicted of sex offenses or sex offense-related crimes as ordered or required by the court, Idaho Department of Correction or Commission for Pardons and Parole, and (b) examiners' practices regarding such examinations, provided that the use of such examinations are not prohibited or incompatible with any statutory or other legal provisions of the Idaho Code, administrative rules, or other regulations in Idaho.

I. GENERAL CONSIDERATIONS

- A. Primary Objectives. Post-conviction sex offender polygraph examinations conducted in accordance with this section are intended to:
 - a. Provide an independent and objective means of collecting relevant information about a given individual that may not otherwise be obtained via other assessment methods;
 - b. Explore potential changes, progress, and/or compliance relative to treatment, supervision, and other case management goals and objectives;
 - c. Promote internal motivation and engagement in the treatment and supervision process by providing additional opportunities for self-disclosure and introspection; and
 - d. Support case management decisions involving adults convicted of sex offenses.
- B. Utilization as an Adjunctive, Supplemental Tool. Post-conviction sex offender polygraph examinations conducted pursuant to this section shall be utilized as an adjunctive assessment tool, the findings from which shall be used to complement, not supplant, other assessment information.
- C. Adherence to Commonly Accepted Standards. Persons certified by the SOMB to administer post-conviction sex offender polygraph examinations in accordance

with the minimum requirements and other expectations outlined in this section are expected to:

- a. Adhere to any and all ethical principles and codes, and any and all practice standards and guidelines for the administration of polygraph examinations generally, as promulgated by the American Polygraph Association (APA) or the American Association of Police Polygraphists (AAPP);
- b. Adhere to any and all standards and guidelines specific to post-conviction sex offender testing (PCSOT) as promulgated by the American Polygraph Association (APA);
- c. Adhere to any and all ethical principles and codes, and any and all practice standards and guidelines, for the person's discipline, area of professional practice, or licensure as promulgated by any applicable regulatory board or licensing authority.

D. Testing.

- a. Persons certified by the SOMB to administer post-conviction sex offender polygraph examinations shall use a validated testing technique. For purposes of these standards, a testing technique shall be considered valid if supported by research conducted in accordance with the APA's research standards. Where examinations deviate from the protocols of a validated testing technique, the deviations should be noted and justified in writing.
- b. (Effective January 1, 2015) Polygraph techniques used for screening purposes shall be those for which there exists at least two published empirical studies, original and replicated, demonstrating an unweighted accuracy rate that is significantly greater than chance, and should be used in a "successive hurdles" approach which entails additional testing with validated methods when the screening test is not favorably resolved.
- c. Examiners will only use APA validated tests in PCSOT testing.

II. ADOPTED STANDARDS FOR POST-CONVICTION SEX OFFENDER POLYGRAPH TESTING

The SOMB has adopted the tenets of the American Polygraph Association (2018) Model Policy for Post-Conviction Sex Offender Testing. Modifications have been made as appropriate to comply with Idaho laws and regulations.

1. Standards. These standards should be considered a description of best-practices for polygraph professionals who engage in post-conviction sex offender testing (PCSOT) activities in Idaho.
 - 1.1. Compliance and local authority. Examiners are responsible for knowing and adhering to all legal and regulatory requirements of their local jurisdictions. In case of any conflict between these standards and any local practice requirements, the local regulations should prevail.
 - 1.1.1. Compliance with these standards. Examiners whose work varies from these standards should be prepared to provide justification for doing so.
 - 1.1.2. Compliance with professional standards. Unless prohibited by law, regulation or agency policy, all members of the American Polygraph Association (APA) shall comply with the APA Standards of Practice. Additionally, all examiners should be responsible for knowing and adhering to standards of ASTM International.
 - 1.2. Periodic review and modification. These standards will be reviewed and amended periodically in order to remain consistent with emerging information from new empirical studies.
2. Evidence-based approach. These standards rely on knowledge and principles derived from existing research pertaining to polygraph testing, risk assessment, risk management, and sex offender treatment. Examiners should be cautious of field practices based solely on a system of values or beliefs. Some elements of these standards are intended to increase professionalism and reliability among field examiners through the implementation of standardized field practice recommendations in the absence of data from empirical studies.

- 2.1. Face-valid principles. When an evidence-based approach is not possible, face-valid principles pertaining to polygraph testing, field investigation principles and related fields of science should be utilized. These include psychology, physiology, mental health treatment, forensic threat assessment, signal detection, decision theory, and inferential statistics.
 - 2.2. Evolving evidence. In the event that evidence from future empirical studies reveals the practice recommendations of these standards are inconsistent with empirically based evidence, the evidence-based information should prevail.
3. PCSOT program goals. The primary goal of all PCSOT activities is to increase public safety by adding incremental validity to risk-assessment, risk-management, and treatment-planning decisions made by professionals who provide supervision and sex-offense specific treatment to convicted sex offenders in community settings.
 - 3.1. Containment approach. Examiners who engage in PCSOT activities shall emphasize a multi-disciplinary or multi-systemic containment approach to the supervision and treatment of sex offenders. This approach involves a collaborative effort among professionals from varying disciplines and systems including treatment providers, supervising officers, polygraph examiners, medical and psychiatric professionals, child-protection/family-services workers, and other professionals. These professionals are referred to as the “containment team” throughout these standards.
 - 3.2. Operational objectives. Any or all of the following operational objectives are considered a reasonable and sufficient basis to engage in PCSOT activities:
 - A. Increased disclosure of problem behavior that will be of interest to professionals who work with convicted sex offenders;

- B. Deterrence of problem behavior among convicted sex offenders by increasing the likelihood that engagement in such behaviors will be brought to the attention of supervision and treatment professionals; and
 - C. Detection of involvement in or abstinence from problem behavior that would alert supervision and treatment professionals to any escalation in the level of threat to the community or potential victims of sexual abuse.
4. Decision-support. Psychophysiological Detection of Deception (PDD) (polygraph) testing of convicted sex offenders is regarded as a decision-support tool intended to assist professionals in making important decisions regarding risk and safety. Polygraph testing should not replace the need for other forms of behavioral monitoring or traditional forms of supervision and field investigation.
- 4.1. Professional judgment. Polygraph testing and polygraph test results do not supplant or replace the need for professional expertise and judgment. Polygraph test results should not be used as the sole basis for revocation of any individual from court supervision or termination of sex offense specific treatment.

4.2. Successive hurdles approach. Examiners should use a successive hurdles approach to testing to maximize both the informational efficiency and sensitivity of multi-issue (mixed-issue) screening polygraphs and the diagnostic efficiency and specificity of event-specific single-issue exams. The term screening, as it applies to PCSOT, is based on the fact that some exams are conducted for exploratory purposes in the absence of known allegations or known incidents. Follow-up examinations should employ a single-issue technique whenever increased validity is required to resolve an issue. Successive-hurdles may include following an unresolved mixed-issue polygraph test with additional attempts to resolve the issue(s), including post-test discussion, additional field or background investigation, or additional polygraph testing. Follow-up examinations may be completed on the same date as the initial exam, or they may be scheduled for a later date.

4.2.1. Multi-issue (mixed-issue) exams. Examiners should use multi-issue polygraph techniques only in the absence of a known incident, known allegation, or a particular reason to suspect wrongful behavior. Exploratory exams may at times be narrowed to a single target issue of concern. However, most exploratory exams involve multiple target issues in which it is conceivable that a person could lie about involvement in one or more issues while being truthful or uninvolved in the other issues of concern.

4.2.2. Single-issue exams. Examiners should use single issue polygraph techniques for follow-up exams conducted in response to a previously unresolved exploratory exam. Event specific diagnostic/investigative exams, conducted in response to known allegations or known incidents for which there is reason to suspect the involvement of the examinee, may be formulated as multi-facet tests with questions pertaining to several behavioral roles or aspects of a single known allegation.

- 4.2.3. Multi-facet tests. Event specific diagnostic/investigative exams, conducted in response to known allegations or known incidents for which there is reason to suspect the involvement of the examinee, may be formulated as multi-facet tests with questions pertaining to several behavioral roles or aspects of a single known allegation.
 - 4.3. Confidentiality and mandatory reporting. Except as provided by law, information from the polygraph examination and test results (outcomes) should be kept confidential and provided only to those involved in the containment approach to the supervision and treatment of sex offenders.
 - 4.3.1. Examiners are mandated reporters. Examiners shall engage in mandatory child-abuse reporting activities in accordance with Section 16-1605, Idaho Code. Examiners shall provide examinees with written notification explaining the limits to confidentiality and mandatory reporting requirements.
- 5. General principles. Examiners who engage in PCSOT activities will adhere to all of the generally accepted principles that pertain to polygraph testing, including, but not limited to the following:
 - 5.1. Rights and dignity of all persons. Examiners will respect the rights and dignity of all persons to whom they administer polygraph examinations.
 - 5.2. Polygraph examiner as part of the supervision and treatment team. Examiners will consider themselves to be an integral part of the containment team. Contact with the containment team should be frequent, though contact with an examinee will be periodic (i.e., the examiner will not maintain routine contact with the examinee between examinations).
 - 5.3. Non-interference with ongoing investigations. Examiners who engage in PCSOT activities will not interfere with or circumvent the efforts of any open or ongoing investigation of a new criminal allegation.

- 5.4. Known and unknown allegations. Examiners who engage in PCSOT activities will investigate and attempt to resolve, if possible, known allegations and known incidents before attempting to investigate or resolve behavioral concerns that do not involve a known allegation or known incident.
- 5.5. Confirmatory testing. PCSOT activities will be limited to the Psychophysiological Detection of Deception (PDD). Confirmatory testing approaches involving attempts to verify truthfulness of partial or complete statements made subsequent to the issue of concern should not be utilized in PCSOT programs. Truthfulness should only be inferred when it is determined that the examinee has not attempted to engage in deception regarding the investigation targets.
- 5.6. Ethical and professional roles. Examiners who possess multiple types of credentials (i.e., examiners who are also therapists, evaluators, probation officers, lawyers, or law enforcement) should be limited to one professional role with each examinee and may not conduct polygraph examinations on any individual whom they directly or indirectly treat, supervise or investigate.
- 5.7. Number and length of examinations. Examiners should not conduct more than five examinations in a single day, or conduct more than three sexual history disclosure examinations in a single day.
- 5.7.1. Length of examination. Exams will include pre-test interview, acquaintance test when required, actual test, chart analysis and post-test interview. Tests should be scheduled for a minimum of 60 minutes.
- 5.7.2. Number of exams per examinee. Offenders will not take more than (4) tests per calendar year for maintenance purposes except for re-tests. Does not include testing for monitoring sexual history, etc. that may occur the same year.

- 5.8. Examination techniques. Examiners will use a recognized comparison question technique for which there is evidence of validity and reliability, including estimates of sensitivity and specificity, published in the *Polygraph* journal or a peer-reviewed scientific journal. There should not be more than four (4) relevant questions per test series.
6. Operational definitions. Examiners will ensure that every behavior of concern to the containment team will be anchored by an operational definition that describes the behaviors of concern. Operational definitions should be common among all referring professionals, use language that is free of vague jargon, and be easily understood by the examinee. Examples of operational definition include the following:
- A. Physical sexual contact: refers to rubbing or touching another person's sexual organs (i.e., breasts, buttocks, genitalia) whether over or under clothing, if for the purpose of sexual arousal, sexual gratification, sexual stimulation or sexual "curiosity." This includes having, allowing, or causing another person to rub or touch one's own sexual organs, whether over or under clothing, for purposes of sexual arousal, sexual gratification, sexual "curiosity," or sexual stimulation. This does not include parental contact with children's private areas in the form of diapering, wiping, bathing, dressing, or changing, unless done for the purpose of sexual arousal or stimulation.
 - B. Sexual contact: includes the above definition, and also includes non-contact sexual behaviors such as exhibitionism, voyeurism, public masturbation, child-pornography, or other non-contact sexual behaviors.
 - C. Force (real or implied violence): includes any form of real or implied violence; physical restraint to prevent a victim from leaving, escaping or moving away from the assault; or threats of harm against a victim's family members or pets.

- D. Coercion (non-violent): includes any non-violent means of gaining the compliance of a victim who expresses his or her reluctance to comply (e.g., bribery, threats to end a relationship, etc.).
- E. Grooming (child grooming): includes any means of building trust or exploiting a relationship such that a victim tolerates an offense with a perception of complicity.
- F. Manipulation: includes any means of trickery to gain the compliance of a victim who is unaware of the sexual motives of the offender (e.g., wrestling, horseplay, tickling or other trickery).
- G. Relative (family member): includes aunts, uncles, nieces, nephews, children, grandchildren, parents, grandparents, brothers, sisters, cousins, or any person related by blood, marriage, or adoption, or where a relationship has a legal relationship or the appearance of a family relationship (e.g., a dating or live-in relationship with the person(s) natural, step or adoptive parent).
- H. Minor, child, youth, underage person: refers to anyone who has not yet reached the age of majority or adulthood (usually 18). Adolescence, though it refers to older/teenage children, is included in this broad category.
- I. Incidental contact: refers to any brief or unanticipated contact, typically concerning minors, including any greeting (e.g., waving, or smiling), interaction (i.e., verbal), or incidental physical contact (e.g., shaking hands, hugging, patting the head, bumping into, exchanging money or merchandise, etc.).
- J. Physical contact: includes shaking hands, hugging, patting the back or head, bumping into, exchanging money or merchandise along with other forms of physical contact including sitting on one's lap, holding, wrestling or athletic activities, etc.

- K. Alone or unsupervised with minors: refers to any contact or activity with minors in a location where one cannot be seen or heard, and where others are not aware of one's presence or activity with a minor, and in which the activity cannot be monitored or observed.
- L. Pornography: refers to the explicit depiction of sexual subject matter for the sole purpose of sexually arousing the viewer, sometimes referred to as X-rated or XXX material, though there is no formal rating system that includes these designations. Minors cannot purchase pornographic materials in most, if not all, jurisdictions.
- M. Sexually stimulating materials/erotica: refers to the use of sexually arousing imagery, especially for masturbation purposes.
- N. Sexual fantasy/erotic fantasy: refers to a deliberate thought or patterns of thoughts, often in the form of mental imagery, with the goal of creating or enhancing sexual arousal or sexual feelings. Sexual fantasy can be a developed or spontaneous story, or a quick mental flash of sexual imagery, and may be voluntary or intrusive/involuntary.
- O. Masturbation: refers to sexual stimulation of one's genitals, often, though not always, to the point of orgasm. Stimulation can be over or under clothing, either manually or through other types of bodily contact, through the use of objects or devices, or through a combination of these methods. Although masturbation with a partner is not uncommon, masturbation for the purpose of these standards refers to self-masturbation.

7. Examination questions. Examiners have the final authority and responsibility for the determination of test questions and question language, which must be reviewed with the examinee. Examiners will advise the containment team to refrain from informing the examinee of the exact test questions and investigation targets, or coaching the examinee in the mechanics, principles or operations of the polygraph test. Technical questions about polygraph should be directed to the examiner at the time of the examination. Examiners will advise containment team members that it is appropriate to inform the examinee of the purpose or type of each examination.
 - 7.1. Relevant questions. Relevant questions should pertain to a single frame of reference, which refers to the type of PCSOT examination. (See section 7.1.1 Content. Relevant questions should address behaviorally descriptive topical areas that have a common time of reference, which refers to the time-period under investigation. Content should bear operational relevance to actuarial or phenomenological risk assessment, risk management and treatment planning methods. Examiners should exercise caution to ensure they do not violate any rights of examinees regarding answering questions about criminal behaviours.
 - 7.1.2 Structure. Relevant question construction includes the following characteristics:
 - A. Answerable by a “NO” without unnecessary mental exercise or uncertainty;
 - B. Behaviorally descriptive of the examinee’s direct or possible involvement in an issue of concern and, whenever possible, not indirectly addressing that issue by targeting a subsequent denial of it;
 - C. Simple, direct and easily understood by the examinee;
 - D. Time-delimited (date of incident or time of reference);
 - E. Free of assumptions of guilt or deception;

- F. Free of idiosyncratic jargon, legal terms; and
- G. Free of references to mental state or motivational terminology except to the extent that memory or sexual motivation may be the subject of an examination following an admission of behavior.

7.2. Comparison questions. Control questions should be comparison questions. They should be either Probable Lie Comparisons or Directed Lie Comparisons and should evoke cognitive effort on the part of the examinee an analysis of differential reactions as compared to relevant question responses.

7.2.1. Content. Comparison questions should address broad categorical concerns regarding honesty and integrity and should not be likely to elicit a greater physiological response than deception to any relevant question in the same test.

7.2.2. Structure. Comparison questions are to be structurally separated from relevant questions by either frame of reference or time of reference. Nothing in these standards should be construed as favoring exclusive or non-exclusive comparison questions.

8. Types of PCSOT examinations. Examiners will utilize five basic types of PCSOT examinations: 1) instant offense exams; 2) prior-allegation exams; 3) sexual history disclosure exams; 4) maintenance exams; 5) and sex offense monitoring exams. These basic types of examinations provide both a frame of reference and a time of reference for each examination. Examiners will not mix investigation targets from different frames of reference (examination types) or times of reference within the structure of a single examination.

8.1. Instant Offense Exams. Examiners will use two basic types of examinations to investigate the circumstances and details of the instant offense for which the examinee was convicted: 1) the Instant Offense Exam, and 2) the Instant Offense Investigative Exam. These exams are to be conducted prior to victim clarification or reunification in order to

reduce offender denial and mitigate the possibility of further traumatizing a victim. These circumstances might result when an offender has attempted to conceal the most invasive or abusive aspects of an admitted offense or whenever the containment team determines that accountability for the circumstances and details of the instant offense represent a substantial barrier to an examinee's engagement and progress in sex offense specific treatment.

8.1.1. Instant Offense Exam. Examiners should conduct the Instant Offense Exam as an event-specific polygraph for examinees who deny any or all important aspects of the allegations pertaining to their present crime(s) of conviction.

8.1.1.1. Instant offense – examination targets. Examiners, along with the other members of the containment team, should select the relevant investigation targets from the circumstances of the allegation that the examinee denies.

8.1.1.2. Instant offense – testing approach. Examiners should conduct this exam either as a single-issue or multi-facet event-specific exam. However, nothing in these standards should be construed as to prohibit the completion of the Instant Offense Exam in a series of single-issue exams when such an approach will lend to more accurate or satisfactory resolution of the investigation targets.

8.1.2. Instant Offense Investigative Exams. Examiners should conduct the Instant Offense Investigative Exam to test the limits of an examinee's admitted behavior and to search for other behaviors or offenses not included in the allegations made by the victim of the instant offense.

8.1.2.1. Instant offense investigative – examination targets.

Examiners, along with the other members of the containment team, should select relevant targets from their concerns regarding additional or unreported offense behaviors in the context of the instant offense. At the discretion of the examiner and the other professional members of the containment team, examination targets may include the following:

- A. Number of offense incidents against the victim: when the admitted number of offense incidents is very small.
- B. Invasive offense behaviors: when the examinee denies intrusive or hands-on offense behaviors against the victim of the instant offense.
- C. Degree of physical force or violence: when the examinee denies use of violence, physical restraint, threats of harm, or physical force against the victim of the instant offense.
- D. Other sexual contact behaviors: when not included in the allegations made by the victim of the instant offense, at the discretion of the containment team.

8.1.2.2. Instant offense investigative – testing approach.

Examiners should conduct this exam as a multi-facet or multi-issue (mixed-issue) exploratory exam. However, nothing in these standards should be construed as to prohibit the completion of the Instant Offense Investigative Exam in a series of single-issue exams (i.e., in the absence of an allegation involving the behavioral examination targets) when that approach will lend to more accurate or satisfactory resolution of the investigation targets.

8.2. Prior Allegation Exam. Examiners should use the Prior Allegation Exam to investigate and resolve all prior alleged sex offenses (i.e., allegations made prior to the current conviction) before attempting to investigate and resolve an examinee's history of unknown sexual offenses. This exam should be considered identical in design and structure to the Instant Offense Exam, except that the details of the allegation stem not from the present crime of conviction but from an allegation prior to the conviction resulting in the current supervision and treatment, regardless of whether the examinee was charged with the allegation. Examiners should exercise caution to ensure they do not violate any rights of an examinee regarding answering questions about criminal behaviors.

8.3. Sexual History Exams I and II. Examiners should use two basic types of Sexual History Examinations to investigate the examinee's history of involvement in unknown or unreported offenses and other sexual compulsivity, sexual pre-occupation, or sexual deviancy behaviors. Information and results from these examinations will be provided to the containment team to add incremental validity to decisions pertaining to risk assessment, risk management and treatment planning.

8.3.1. Sexual history document. Examiners will work with the containment team to require that examinees complete a written sexual history document prior to the conduct of a sexual history polygraph. The sexual history document must provide operational definitions that unambiguously describe each sexual behavior of concern. The purpose of the document is to help examinees review and organize their sexual behavior histories. It aids in familiarizing examinees with the conceptual vocabulary necessary to accurately discuss sexual behaviors; it can assist examinees in recognizing sexual behavior that was abusive, unlawful, unhealthy, and identify behaviors that are considered within normal limits.

8.3.1.1. Prior review of the sexual history document. Examiners will request that each examinee review the sexual history document with his or her containment team prior to the examination date. The examiner does not need to review this document prior to the examination date, though the content should be reviewed thoroughly during the structured or semi-structured pretest interview.

8.3.1.2. Examiner authority. It is within the examiner's discretion to administer an alternative form of PCSOT examination if an examinee has not completed and reviewed the sexual history document prior to the examination date.

8.3.2. Sexual History Exam I – unreported victims. Examiners should conduct the Sexual History Exam I to thoroughly investigate the examinee's lifetime history of sexually victimizing others, including behaviors related to victim selection, victim access, victim impact, and sexual offenses against unreported persons. These target issues provide a summary of the most tangible signal

issues that provide interpretable information about victim-age, victim-profile, victim-selection, victim-control/access, and victim-silencing behaviors. Sexual History Exam I also provides information about the offender's capacity for grooming, sneakiness, violence, relationship-building and relationship-exploiting in addition to the capacity to offend in the absence of a relationship. Gathering information in these areas is additive to forensic risk assessment and risk management efforts. Ruling out matters in these Sexual History Exam I areas is also helpful as it allows the justification of a lower assumption of risk. What a person does or does not do (is capable of doing or not doing) to others is illustrated by past behavior. The best predictor of future behavior is past behavior.

8.3.2.1. Sexual History Exam I – examination targets.

Examiners, along with the other members of the containment team, should select investigation targets that provide operational relevance to actuarial and phenomenological risk/threat assessment protocols pertaining to recidivism, victim selection, and risk management decisions. Examples include the following:

- A. Sexual contact with underage persons. Sexual contact with underage persons, in accordance with applicable Idaho Codes.
- B. Sexual contact with relatives, whether by blood, marriage, or adoption, or where a relationship has a legal relationship or the appearance of a family relationship (e.g., a dating or live-in relationship with the person(s) natural, step or adoptive parent).

- C. Use of violence to engage in sexual contact, including physical force/physical-restraint and threats of harm or violence toward a victim or victim's family members or pets through the use of a weapon or any verbal/non-verbal means.
- D. Sexual offenses against persons who appeared to be unconscious, asleep, or incapacitated, including touching or peeping against persons who were asleep, severely intoxicated, impaired due to drugs, or who were mentally/physically helpless for other reasons.

8.3.2.2 Sexual History Exam I – time of reference. The time of reference for the Sexual History Exam I may be restricted to the period of time prior to the current conviction mandating the present treatment when there are concerns about: 1) potential differences in consequences for pre-treatment or pre-conviction acts and those acts occurring post-conviction or after treatment onset, or 2) examinee rights pertaining to the behavioral targets after conviction while under the supervision of a court, Idaho Department of Correction, or in a treatment program.

8.3.2.3 Sexual History Exam I - testing approach. Examiners should conduct this examination as a multi-issue (mixed-issue) exploratory examination. However, nothing in these standards should be construed as to prohibit the completion of the Sexual History Exam I in a series of more narrowly focused exams when that

approach will lead to more accurate or satisfactory resolution of the investigation targets.

8.3.3. Sexual History Exam II – sexual deviancy, compulsivity, and preoccupation. Examiners should conduct this Sexual History Exam II examination to thoroughly investigate the examinee's lifetime history of sexual deviancy, preoccupation, and compulsivity behaviors not including those behaviors described in the Sexual History Exam I. This examination may be most important with examinees who substantially deny involvement in sexual deviancy, compulsivity and preoccupation behaviors. Sexual History Exam II issues are additive to risk-assessment/risk-management/treatment-planning, but in a different way than Sexual History Exam I issues. Actuarial risk researchers tell us that sexual deviancy/compulsivity/pre-occupation is also correlated with increased rates of recidivism and increased rates of failure under supervision and failure in sex-offense-specific treatment. Sexual History Exam II adds incremental validity to risk-assessment/risk-management/treatment-planning to the extent that it gathers information about involvement in sexual behaviors that are more often compulsive (large-numbers) such as peeping/voyeurism, exhibitionism, theft of undergarments, public masturbation, and child-pornography. The forensic challenge will be to differentiate no-involvement from minimal-involvement from high-involvement. Polygraph examiners should be cautious about attempting to test the limits of admitted sexual compulsivity or sexual preoccupation behaviors with the hope of somehow knowing *everything* or *every incident* when an examinee admits to substantial involvement in the behavioral targets of concern. When an offender admits to being highly involved in these activities, there may be little to be gained from

testing the limits of involvement: there is likely more, but it might not be remembered. It is not additive because the answer is already known: he or she is highly involved. Testing these behaviors is additive when an offender denies involvement or admits to only minimal involvement because confirming that will help justify an assumption of absence of compulsivity/deviancy/pre-occupation, which is correlated with an assumed lower level of risk.

8.3.3.1. Sexual History Exam II - examination targets.

Investigation targets for the Sexual History Exam II should bear operational relevance to actuarial and phenomenological risk/threat assessment protocols pertaining to sexual deviancy, sexual compulsivity, and sexual preoccupation behaviors. Investigation targets may include any of the following:

- A. Voyeurism/sexual peeping activities, including all attempts to look into someone's home, bedroom or bathroom without the person's knowledge or permission, in an attempt to view someone naked, undressing/dressing, or engaging in sexual acts. Voyeurism activities include attempts involving the use or creation of a hole or opening to view others for sexual arousal, including all attempts to use any optical devices (e.g., cameras, mirrors, binoculars, or telescope) to view others for sexual purposes.

- B. Exhibitionism/indecent exposure, including all attempts to intentionally or to have appear to have “accidentally” exposed one's bare private parts to unsuspecting persons in public places. Exhibitionism includes wearing loose or baggy clothing that allows one's sexual organs to become exposed to others, and may also include mooning, streaking or flashing behaviors, and public urination while in view of others.
- C. Theft or use of underwear/undergarments for sexual arousal or masturbation, including taking or keeping undergarments (including other personal property or “trophies”) from relatives, friends, sexual partners, or strangers for masturbation or sexual arousal. It also includes all incidents of wearing or trying on another person's underwear or undergarments without that person’s knowledge or permission, in addition to all incidents in which underwear, undergarments, or personal property was returned after use for masturbation or sexual arousal.

- D. Frottage/sexual rubbing, including all attempts to sexually rub or touch others without their knowledge or permission, by standing or walking too close in public locations (e.g., work, stores, school, or other crowded places), or during any form of play, horseplay, wrestling/athletic activities, or other similar activities.

8.3.3.2. Sexual History Exam II – additional investigation targets. Other possible investigation targets for the Sexual History Exam II include but are not limited to the following:

- A. Child pornography, including any history of ever viewing, possessing, producing, using, or distributing pornographic images of minors (i.e., infants, children or teenagers under age 18) engaging in sexual acts, child erotica or child nudity.
- B. Sexual contact with animals, refers to all sexual behaviors (including attempts) involving pets, (those belonging to the examinee or others) domesticated (farm/ranch) animals, or wild animals, whether living or deceased, and whether whole or dismembered. This target may include animal cruelty behaviors.

- C. Prostitution activities, including ever paying anyone or being paid for sexual contact (including erotic massage activities) with either money, property, or any special favors. It also includes ever employing or managing others who were paid to engage in sexual activities.
- D. Coerced sexual contacts, including bribing, tricking, manipulating, lying, misuse of authority, badgering/pestering, wearing-down boundaries, or not accepting “no” for an answer.
- E. Stalking/following behaviors, including all incidents of following someone to his or her home, workplace or vehicle, or following others around a store, aisle, parking lot, workplace/school, campus, or community for sexual or aggressive/angry reasons. It also includes all other efforts to monitor or observe another person's behavior without that person’s knowledge or permission.
- F. Use of a computer to solicit minors for sexual activities, including ever using a computer, the Internet, or any electronic communication device in attempt to solicit an underage person for sexual contact. It also includes ever engaging in on-line sex-chat or cyber-sex activities via IRC, Instant Messaging, Web Chat, email or any other electronic method.

G. Masturbation or sexual acts in public places where one could be seen by others such as a vehicle, hiding place, standing outside someone's home or window, or anywhere one could watch others without their knowledge or permission. It also includes masturbation or sexual acts in workplace/school locations, public restrooms, or adult entertainment businesses.

8.3.3.3. Sexual History Exam II – time of reference. The time of reference for the Sexual History Exam II may be restricted to the period of time prior to the current conviction mandating the present treatment when there are concerns about: 1) potential differences in consequences for pre-treatment or pre-conviction acts and those acts occurring post conviction or after treatment onset, or 2) examinee rights pertaining to the behavioral targets after conviction while under the supervision of a court, Idaho Department of Correction, or in a treatment program.

8.3.3.4. Sexual History Exam II - testing approach. Examiners should conduct this examination as a multi-issue (mixed-issue) exploratory examination. However, nothing in these standards should be construed as to prohibit the completion of the Sexual History Exam II in a series of more narrowly focused exams when that approach will lend to more accurate or satisfactory resolution of the investigation targets. Nothing in these standards should be construed as to require the investigation of all or any of the suggested

investigation targets or preclude the selection of alternative targets pertaining to sexual behavior that would assist the containment team in determining and responding to the examinee's supervision and treatment needs.

8.3.3.5. Testing the limits of admitted sexual compulsivity or sexual preoccupation. Examiners should attempt to prioritize the investigation of behaviors in which the examinee denies any involvement. It may not be realistic to hope to know *everything* when an examinee admits to substantial involvement in sexual behaviors that may include elements of sexual compulsivity or sexual preoccupation. In these cases containment team members should be informed of the examinee's admission of substantial involvement.

8.4. Maintenance Exam. Examiners should conduct the Maintenance Examination to thoroughly investigate, either periodically or randomly, the examinee's compliance with any of the designated terms and conditions of supervision or treatment rules.

8.4.1 Maintenance Exam - scheduling. It is recommended that Maintenance Exams be completed every four to six months, or every 12 months at a minimum. Containment team members should consider the possible deterrent benefits of randomly scheduled maintenance exams for some examinees.

8.4.2. Maintenance Exam - examination targets. Investigation targets for the Maintenance Exam should bear operational relevance to an examinee's stability of functioning and any changes in dynamic risk level as indicated by compliance or non-compliance with the terms and conditions of the supervision and treatment contracts. Any of the terms and conditions of supervision or treatment may

be selected as examination targets. Investigation targets for Maintenance Exams should emphasize the development or verification of information that would add incremental validity to the early detection of an escalating level of threat to the community or to potential victims.

8.4.2.1. Unknown allegations. Maintenance Exams should not address known allegations or known incidents, which are properly investigated in the context of an event-specific polygraph exam.

8.4.2.2. Compliance focus. Maintenance Exams should be limited to questions about compliance or non-compliance with supervision and treatment rules. Questions about unlawful sex acts or re-offense behaviors may be included in the examination as long as circumstances related to rights against self-incrimination as listed in the section dealing with Sex Offense Monitoring examinations do not exist. An elevated level of concern regarding reoffense would warrant a Sex Offense Monitoring Exam – not a Maintenance Exam. Examiners should exercise caution to ensure they do not violate any rights of an examinee regarding the answering of questions about new criminal behaviors.

8.4.2.3. Examination targets. Examination targets should include, but are not limited to the following:

- A. Sexual contact with undisclosed persons of any age, including any form of rubbing or touching of the sexual organs (i.e., breasts, buttocks, or genitalia) of any person not already known or reported to the supervision and treatment

team, either over or under clothing, for the purpose of sexual arousal/stimulation, sexual gratification, or sexual “curiosity.” It also includes causing or allowing others to touch or rub one's own private parts either over of under clothing, for the purpose of sexual arousal/stimulation, sexual gratification, or sexual “curiosity”; and sexual hugging and kissing activities.

- B. Use of pornography, refers to viewing or using X-rated (or “XXX”), nude, or pornographic images or materials (e.g., pornographic magazines, pornographic movies on cable television, including scrambled television programming, pornographic movie theaters, pornographic video arcades, videotape, CD/DVD, or other recorded media including pornographic images or materials via computer or the Internet, iPod, cell phone, video games, or any electronic messaging system). It may also include using non-pornographic erotica (nude or non-nude) images or materials for sexual stimulation or masturbation purposes (e.g., sexually objectifying entertainment magazines, bikini or car magazines, nudity or erotic scenes in non-pornographic movies, sexually oriented stories in magazines, novels, or Internet/computer resources, and/or anything at all on television). This target may be restricted to using pornographic or sexually

stimulating materials for masturbation purposes when the examinee admits to incidental contact with pornographic images.

- C. Masturbation activities and masturbatory fantasies, which may refer to any involvement in masturbation activities when the examinee is prohibited from those activities or it may refer to problematic forms of masturbation such as masturbating in a public location or where one could view or be viewed by others. It may also include voluntary or involuntary/intrusive thoughts or fantasies of a minor or past victim while masturbating or masturbation due to stress, boredom, anger, or other negative mood.
- D. Unauthorized contact with underage persons, which refers to prohibited physical or other contact with underage persons or to being completely alone or unsupervised with underage persons if the examinee has reported or admitted to incidental contact.
- E. Sexual offenses while under supervision, including forced, coerced or violent sexual offenses, sexual offenses against underage persons, incest offenses, or sexual contact with unconscious persons. It may also include sexual deviancy/compulsivity/preoccupation behaviors such as voyeurism, exhibitionism, theft of undergarments, public masturbation or other behaviors.

F. Use of alcohol, illegal drugs or controlled substances, including tasting or consuming any beverage containing alcohol (if prohibited), or consuming any product containing alcohol for the purpose of becoming intoxicated, inebriated, drunk, “buzzed,” or “relaxed.” It also includes any use of marijuana (whether inhaled or not) or any other illegal drugs. This target also includes any misuse of controlled prescription medications, whether borrowing, sharing, trading, loaning, giving away, or selling one's own or another person's prescription medications or using any medication in a manner that is inconsistent with the directions of the prescribing physician.

8.4.3. Maintenance Exam - time of reference. Maintenance Exams should address a time of reference subsequent to the date of conviction or the previous Maintenance Exam, generally not exceeding one year and only exceeding two years in rare circumstances. The time of reference may be described generally as the six-month period preceding the examination; although, there may be reasons for lengthening or shortening the time of reference for some exams. All investigation targets in a test series should have a common time of reference.

8.4.4. Maintenance Exam - testing approach. Examiners should conduct this examination as a multi-issue (mixed-issue) exploratory examination. However, nothing in these standards should be construed as to prohibit the completion of the Maintenance Exam in a series of more narrowly focused exams when that approach

will lend to more accurate or satisfactory resolution of the investigation targets.

8.5. Sex Offense Monitoring Exam. Examiners should conduct the Sex Offense Monitoring Exam to explore the possibility the examinee may have been involved in unlawful sexual behaviors including a sexual re-offense during a specified period of time. Other relevant questions dealing with behaviors related to supervision and treatment compliance should not be included.

8.5.1. Sex Offense Monitoring Exam - scheduling. Sex Offense Monitoring Exams should be completed whenever there is a specific request from a supervision or treatment professional to investigate the possibility of a new offense while under supervision. Alternatively, this exam may be used when: 1) the likelihood of sexual offense or other sexual crime is elevated because of information received by any member of the containment team to include the examiner, or 2) following a previously unresolved Maintenance Exam that included a relevant question about sexual offense behavior. Whenever the results of a Maintenance Exam indicated the need for further testing to obtain a more diagnostic conclusion, a single-issue test format will be utilized. A single-issue Sex Offense Monitoring Exam can be expected to have improved diagnostic accuracy over a multi-issue (mixed issue) exam. However, this approach is still an exploratory exam, which should not be regarded as a sole basis for action (such as probable cause for arrest, revocation or removal from a treatment program).

8.5.2. Sex Offense Monitoring Exam - examination targets. Examiners should select investigation targets for the Sex Offense Monitoring Exam that pertain to new sex crimes while under supervision based on concerns expressed by the containment team.

8.5.3. Sex Offense Monitoring Exam - time of reference. Sex Offense Monitoring Exams should refer to a time of reference generally following the date of conviction or a previous Monitoring Exam. The time of reference should be clearly stated in the test questions and may include all or any part of the time that the examinee is under supervision or in treatment, including a specific date or restricted period of time. The time of reference should emphasize the investigation of possible unlawful sexual acts or sexual re-offense during the most recent period of months prior to the Sex Offense Monitoring Exam.

8.5.4. Sex Offense Monitoring Exam - testing approach. Examiners should conduct the Sex Offense Monitoring Exam as a multi-issue (mixed-issue) exploratory examination. However, nothing in these standards should be construed as to prohibit the completion of the Sex Offense Monitoring Exam as a narrowly focused exam when that approach will lead to more accurate or satisfactory resolution of the investigation targets. Examiners should use a single-issue technique when the Sex Offense Monitoring Exam is used to follow-up on a previously unresolved Maintenance Exam.

9. Suitability for testing. Suitable examinees should, at a minimum, be expected to have a capacity for:

- A. Abstract thinking;
- B. Insight into their own and others' motivation;
- C. Understand right from wrong;
- D. Tell the basic difference between truth and lies;
- E. Anticipate rewards and consequences for behavior; *and*
- F. Maintain consistent orientation to date, time, and location.

9.1. Medications. Examiners should obtain and note in the examination report a list of the examinee's prescription medication(s), any medical or

psychiatric conditions, and any diagnosed acute or chronic medical health conditions.

- 9.2. Unsuitable examinees. Examiners should not test examinees who present as clearly unsuitable for polygraph testing at the time of the examination.
 - 9.2.1. Psychosis. Persons who are acutely psychotic, suicidal, or have un-stabilized or severe mental health conditions, including dementia, should not be tested.
 - 9.2.2. Age. Persons whose chronological age is 12 years or greater should be considered suitable for polygraph testing unless they are substantially impaired. Polygraph testing should not be attempted with persons whose Mean Age Equivalency (MAE) or Standard Age Score (SAS) is below 12 years as determined by standardized psychometric testing (e.g., IQ testing, and adaptive functioning).
 - 9.2.3. Level of functioning. Persons whose level of functioning is deemed profoundly impaired and warranting continuous supervision or assistance may not be suitable for polygraph testing.
 - 9.2.4. Acute injury or illness. Persons suffering from an acute serious injury or illness involving acute pain or distress should not be tested.
 - 9.2.5. Controlled substances. Persons whose functioning is observably impaired due to the influence of non-prescribed or controlled substances should not be tested.
- 9.3. Team approach. Examiners should consult with other members of the containment team, prior to the examination, when there is doubt about an examinee's suitability for polygraph testing.

- 9.4. Incremental validity. When there are concerns about an examinee's marginal suitability for testing, examiners should proceed with testing only when the containment team determines that such testing would add incremental validity to risk assessment, risk management, and treatment planning decisions through the disclosure, detection, or deterrence of problem behaviors.
10. Testing procedures. Examiners who engage in PCSOT activities shall adhere to all generally accepted polygraph testing protocols and validated principles.
- 10.1. Case background information. The examiner should request and review all pertinent and available case facts within a time frame sufficient to prepare for the examination.
- 10.2. Audio-visual or audio recording. Examiners will record all PCSOT polygraph examinations. The recording should include the entire examination from the beginning of the pretest interview to the completion of the post-test review and will be maintained for a minimum of three years. The recording documents the quality of the conduct of the testing protocol; documents the content and authenticity of the content of the information provided by the examinee, thus precluding possible future denials; and facilitates a comprehensive quality assurance review when necessary.
- 10.3. Pre-test phase. Examiners will conduct a thorough pre-test interview before proceeding to the test phase of any examination. A thorough pretest interview will consist of the following:
- 10.3.1. Greeting and introduction. Examiners will introduce themselves by their names and orient examinee to the examination room.
- 10.3.2. Brief explanation of procedure. Examiners will ensure examinees have some information about the ensuing procedure and scope of testing prior to obtaining the authorization and release to complete the exam.

10.3.3. Authorization and release. Examiners will obtain an examinee's agreement, in writing and/or on the audio/video recording, to a waiver/release statement. The language of the statement should minimally include: 1) the examinee's voluntary consent to take the test; 2) that the examination may be terminated at any time; 3) a statement regarding the examinee's assessment of his or her mental and physical health at the time of the examination; 4) that all information and results will be released to members of the containment team; 5) an advisement that admission of involvement in unlawful activities will not be concealed from the referring professionals; and 6) a statement regarding the requirement for audio/video recording of each examination.

10.3.4. Biographical data/determination of suitability for testing. Examiners should obtain information about the examinee's background including marital/family status, children, employment, and current living situation in addition to a brief review of the reason for conviction and length/type of sentence. Examiners shall obtain, prior to and at the time of the examination, information pertaining to the examinee's suitability for polygraph testing.

10.3.5. Explanation of polygraph instrumentation and testing procedures. The testing process will be explained to the examinee, including an explanation of the instrumentation used and the physiological and psychological basis of response. Nothing in these standards should be construed as favoring a particular explanation of polygraph science. In general, an integrated explanation involving emotional attributions, cognitive theory and behavioral learning theory may be the best approach.

10.3.6. Structured interview. The examiner will conduct a thorough structured or semi-structured pre-test interview, including a

detailed review of the examinee's background and personal information, any applicable case facts and background, a detailed review of each issue of concern, and an opportunity for the examinee to provide his or her version of all issues under investigation. For event-specific diagnostic/investigative polygraphs of known allegations or known incidents, a free-narrative interview is used instead of a structured or semi-structured interview.

10.3.7. Review of test questions. Before proceeding to the test phase of an examination, the examiner will review and explain all test questions to the examinee. The examiner should not proceed with the exam until satisfied with the examinee's understanding of and response to each issue of concern.

10.4 In-test operations. Examiners will adhere to all generally accepted standards and protocols for test operations.

10.4.1 Environment. All examinations will be administered in an environment that is free from distractions that would interfere with the examinee's ability to adequately focus on the issues being addressed.

10.4.2 Instrumentation. Examiners will use an instrument that is properly functioning in accordance with the manufacturer's specifications.

10.4.2.1. Component sensors. The instrument must continuously record the following during the test: 1) thoracic and abdominal movement associated with respiratory activity by using two pneumograph components; 2) electrodermal activity reflecting relative changes in the conductance or resistance of current by the epidermal tissue; and 3) cardiovascular activity to record relative changes in pulse rate and

blood pressure. A channel that detects vasomotor responses or other validated data channels may also be recorded.

10.4.2.2. Activity sensors. A seat sensor is mandatory.

10.4.2.3 Calibration. The polygraph instrument shall be given a functionality or calibration test consistent with manufacturer recommendations and in compliance with applicable laws. In absence of manufacturer's recommendations, examiners should semi-annually record a chart demonstrating correct functioning of the instrument. A functionality or calibration test shall be administered at the beginning of each day of testing.

10.4.3 Data acquisition. The conduct of testing will conform to all professional standards concerning the data quality and quantity.

10.4.3.1. Number of presentations. Examiners employing a comparison question technique will conduct a minimum of three presentations of each relevant question. It is acceptable to conduct a fourth or fifth presentation in order to obtain a sufficient volume of interpretable test data.

10.4.3.2. Question intervals. Question intervals must allow a reasonable time for recovery. For comparison question techniques, question intervals from stimulus onset to stimulus onset should not be less than 20 seconds.

10.4.3.3. Acquaintance test. An acquaintance test will be administered during the first examination of each examinee by each examiner. Examiners are encouraged to use an acquaintance test during the conduct of other tests as appropriate.

- 10.5. Test data analysis. The examiner will render an empirically-based interpretation of the examinee's responses to the relevant questions based on all information gathered during the examination process.
- 10.5.1. Scoring methods. Examiners will employ quantitative or numerical scoring for each examination using a scoring method for which there is known validity and reliability, which has been published and replicated.
- 10.5.2. Results – diagnostic exams. Test results for event-specific diagnostic/investigative tests will be reported as Deception Indicated (DI), No Deception Indicated (NDI) or Inconclusive (INC) / No Opinion (NO).
- 10.5.3. Results – screening or multi issue. Test results of screening or multi issue tests will be reported as Significant Response (SR), No Significant Response (NSR) or No Opinion (NO).
- 10.5.4. No opinion/inconclusive. Examiners will render No Opinion (NO) whenever test results produce inconclusive numerical scores or whenever the overall set of test data do not allow the examiner to render an empirically-based opinion regarding the relevant test questions. (i.e., when test results are “inconclusive,” an examiner should render “no opinion” concerning the truthfulness of the examinee.) “No opinion” concerning the truthfulness of the examinee is to be reported when an examination was stopped prior to collection of sufficient data to arrive at an empirically-based opinion.
- 10.5.5. Professional opinions and test results. 1) Examiners will render an opinion that the examinee was deceptive when the test results are SR or DI for any of the investigation targets. 2) Examiners will render an opinion that the examinee was truthful when the test results are NSR or NDI for all of the investigation targets. 3) Examiners will not render an opinion that the examinee was

truthful when the test results are SR or DI for any of the investigation targets. 4) Examiners will not conclude an examinee is deceptive in responses to one or more investigation targets and non-deceptive in responses to other investigation targets within the same examination.

10.5.6. Non-cooperation. Examiners will note in the examination report whenever there is evidence that an examinee has attempted to falsify or manipulate the test results and whether the examinee was forthcoming in explaining his or her behavior during the test. An opinion that the examinee was Purposefully Non-Cooperative (PNC) is appropriate when there is evidence that an examinee was attempting to alter his or her physiological response data. Examiners reporting an examinee was PNC are not precluded from rendering an opinion that the examinee was deceptive (SR/DI) when the numerical scores support a conclusion that there were significant reactions to one or more relevant questions. Examiners will not render an opinion of truthfulness (NSR/NDI) when there is evidence that an examinee has attempted to falsify or manipulate the test results.

10.5.7. Data quality. Examiners will not render a conclusive opinion when there is insufficient data of adequate quality and clarity to allow a minimum of three interpretable presentations of each of the investigation targets.

10.5.8. Computer algorithms. If the examiner chooses to use computer algorithm scoring assistance, it should never be as a primary scoring method. Manual scoring is mandated on all examinations. In the event that an examiner chooses to use a scoring algorithm, any differences between the examiner's score and the computer score should be addressed in the written report.

- 10.6. Post-test review. The examiner will review the test results with the examinee, advise the examinee of any significant responses to any of the test questions, and provide the examinee an opportunity to explain or resolve any reactions or inconsistencies.
11. Examination report. Examiners will issue a written report containing factual and objective accounts of all pertinent information developed during the examination, including case background information, test questions, answers, results, and statements made by the examinee during the pre-test and post-test interviews.
- 11.1. Dissemination of test results and information. The polygraph examination report will be provided to members of the containment team who are involved in risk assessment, risk management, and treatment/intervention planning activities.
- 11.1.1. Dissemination to other authorities. Reports and related work products will be released to the court, Commission for Pardons and Parole or other releasing agency, or other professionals at the discretion of the containment team or as required by law.
- 11.1.2. Communication after the exam. Following the completion of the post-test review, examiners will not communicate with the examinee or examinee's family members regarding the examination results except in the context of a formal case staffing.
- 11.2. Scope of expertise. Examiners shall not attempt to render any opinion concerning the truthfulness of the examinee prior to completing the test phase and test-data-analysis. Examiners shall not attempt to render any opinion regarding the medical or psychological condition of the examinee beyond the requirement to determine suitability for testing at the time of the examination. Post-test recommendations are to be limited to needs for further polygraph testing and the resolution of the behavioral targets of the examination.

12. Records retention. Examiners will retain all documentation, data, and the recording of each examination for a period of at least three years or as required by law.
13. Quality control. To ensure examiner compliance with these recommendations and other field practice requirements and to sustain the quality of the testing process, the SOMB shall develop an annual quality assurance process to review a portion of each examiner's work product.

III. CATEGORIES OF SOMB-CERTIFIED POST-CONVICTION SEX OFFENDER POLYGRAPH EXAMINERS

- A. Pursuant to statutory mandate and authority afforded to the SOMB in Section 18-8314, Idaho Code, to be authorized to administer post-conviction sex offender polygraph examinations in accordance with this section, an individual must meet the eligibility criteria and minimum requirements as set forth in this section and must be formally certified by the SOMB to administer such examinations. The two established categories of certification for Post-Conviction Sex Offender Polygraph Examiners are:
- a. Senior/Approved Post-Conviction Sex Offender Polygraph Examiner. A Senior/Approved Post-Conviction Sex Offender Polygraph Examiner is a professional who is currently authorized by the SOMB to:
 - i. Independently conduct post-conviction sex offender testing (PCSOT) polygraph examinations in accordance with the requirements, standards, and guidelines for such examinations as outlined in this section; and
 - ii. Is authorized to provide direct clinical supervision to individuals certified as an Associate/Supervised Post Conviction Sex Offender Polygraph Examiner.
 - b. Associate/Supervised Post-Conviction Sex Offender Polygraph Examiner. An Associate/Supervised Post-Conviction Sex Offender Polygraph Examiner is a professional who is currently authorized by the SOMB to conduct PCSOT polygraph examinations under the supervision of a Senior-Approved Post-Conviction Sex Offender Polygraph Examiner in good standing.
 - c. The SOMB shall provide authorization of the polygraph examiner to conduct PCSOT polygraph examinations based on the minimum educational, experience, specialized training, and other criteria set forth in the section.

IV. CENTRAL ROSTER OF CERTIFIED POST-CONVICTION SEX OFFENDER POLYGRAPH EXAMINERS

- A. The SOMB shall maintain a complete and current official roster of all Senior/Approved Post-Conviction Sex Offender Polygraph Examiners and Associate/Supervised Post-Conviction Sex Offender Polygraph Examiners, to minimally include the:
 - a. Name of the polygraph examiner;
 - b. Business name, address, telephone number, and other contact information;
 - c. Level of certification as designated by the SOMB; and
 - d. Expiration date of the certification period as designated by the SOMB.
- B. The SOMB shall ensure the accuracy and currency of the official roster by updating the roster at a minimum of quarterly or as otherwise necessary and indicating on the official roster the date on which it was updated.
- C. The SOMB shall publish the central roster on the SOMB's website and make the written roster otherwise available upon request.
- D. A certified Post-Conviction Sex Offender Polygraph Examiner as designated by the SOMB has a continuing duty and obligation to maintain eligibility under this section if desiring to remain on the central roster.
- E. The SOMB may remove an individual from the official roster of certified Post-Conviction Sex Offender Polygraph Examiners for reasons as outlined in these guidelines.

V. REPRESENTATIONS AS A CERTIFIED POST-CONVICTION SEX OFFENDER POLYGRAPH EXAMINER

- A. A person conducting polygraph examinations pursuant to this section shall clearly and accurately indicate their level and scope of certification as either a SOMB Senior/Approved Post-Conviction Sex Offender Polygraph Examiner or an Associate/Supervised Post-Conviction Sex Offender Polygraph Examiner when:
 - a. Making oneself available to accept referrals for PCSOT polygraph examinations;

- b. Advertising oneself as an SOMB-certified Post-Conviction Sex Offender Polygraph Examiner;
 - c. Communicating with the courts, other professionals, or the public regarding their certification to conduct PCSOT polygraph examinations;
 - d. Providing informed consent to clients and/or their parents or legal guardians at the time of the examination; and
 - e. Identifying oneself as the examiner in any written report or other method of communicating the findings of an examination, including on the signature line of a report.
- B. In accordance with Section 18-8314, Idaho Code, no person shall claim or imply oneself to be an SOMB-certified Post-Conviction Sex Offender Polygraph Examiner pursuant to this section, or use a title or any abbreviation that implies that the person is an SOMB-certified Post-Conviction Sex Offender Polygraph Examiner, unless so certified by the SOMB and currently in good standing on the official roster maintained by the SOMB.

VI. MINIMUM ELIGIBILITY REQUIREMENTS FOR SOMB CERTIFICATION AS A POST-CONVICTION SEX OFFENDER POLYGRAPH EXAMINER

- A. A person who conducts a PCSOT polygraph examination in accordance with this section must meet the eligibility criteria and minimum requirements as set forth in this section and be certified by the SOMB as either a Senior/Approved Post-Conviction Sex Offender Polygraph Examiner or an Associate/Supervised Post-Conviction Sex Offender Polygraph Examiner.
- B. A person certified by the SOMB to conduct PCSOT polygraph examinations has a continuing duty to notify the SOMB in writing should circumstances result in the ineligibility of the examiner to meet the minimum requirements for the level of certification by the SOMB.
- C. The minimum requirements for certification by the SOMB as a Post-Conviction Sex Offender Polygraph Examiner include criteria, and requirements in the following categories:
 - a. Educational requirements;
 - b. Experience requirements;
 - c. Specialized training requirements; and
 - d. Continuing education/ongoing professional development requirements.
- D. Educational Requirements. To be eligible for certification as a certified Post-Conviction Sex Offender Polygraph Examiner a person must have graduated from an American Polygraph Association (APA) accredited polygraph school.
- E. Specialized Training. Have successfully completed a minimum of 40 hours of formal post-conviction sex offender polygraph testing training beyond the basic polygraph training course requirements from an accredited APA program or school.
- F. Professional Reference Requirements. A person seeking certification from the SOMB as a Post-Conviction Sex Offender Polygraph Examiner shall provide professional references to the SOMB that attest to the quality and integrity of the examiner's polygraph practices with respect to such examinations.

- G. Professional Liability Insurance Requirements. A person seeking certification from the SOMB as a Post-Conviction Sex Offender Polygraph Examiner shall secure and maintain professional liability insurance coverage.

VII. REQUIREMENTS FOR CERTIFICATION AS A SENIOR/APPROVED POST-CONVICTION SEX OFFENDER POLYGRAPH EXAMINER

To be eligible for SOMB certification as a Senior/Approved Post-Conviction Sex Offender Polygraph Examiner, a person must:

- A. Meet the minimum eligibility requirements in accordance with this section;
- B. Has successfully completed a minimum of 100 polygraph examinations, to include 20 PCSOT polygraph examination. The 20 PCSOT polygraph examinations must have been completed within the three years immediately proceeding the application for SOMB certification as a Senior/Approved level Post-Conviction Sex Offender Polygraph Examiner, and include a minimum of 10 sexual history polygraph examinations and 10 maintenance polygraph examinations, under the supervision of an SOMB-certified Senior/Approved level Post-Conviction Sex Offender Polygraph Examiner.
- C. To be eligible for renewal as a Senior/Approved Post-Conviction Sex Offender Polygraph Examiner, a person must have conducted a minimum of 20 PCSOT polygraph examinations during the two-year effective period of certification preceding the renewal application.

VIII. REQUIREMENTS FOR CERTIFICATION AS AN ASSOCIATE/SUPERVISED POST-CONVICTION SEX OFFENDER POLYGRAPH EXAMINER

Certification as an Associate/Supervised Post-Conviction Sex Offender Polygraph Examiner is limited to a 2 year period, at which time the person must have achieved minimum requirements for certification level upgrade to Senior/Approved Post-Conviction Sex Offender Polygraph Examiner, unless a conditional waiver is granted. To be eligible for SOMB certification as an Associate/Supervised Post-Conviction Sex Offender Polygraph Examiner a person must:

- A. Meet the minimum eligibility requirements in accordance with this section.
- B. Supervision is required during the period of time in which a supervisee is conducting polygraph examinations and in accordance with a formal supervision agreement as outlined in this section. For purposes of supervision for an Associate/Supervised Post-Conviction Sex Offender Polygraph Examiner certification, “supervision” is generally considered as direct face-to-face contact with an SOMB-certified Senior/Approved level Post-Conviction Sex Offender Polygraph examiner during the supervisee’s first 5 PCSOT polygraphs and review of PCSOT polygraphs conducted during the remaining period a person is certified as an Associate/Supervised Post-Conviction Polygraph Examiner. Such review shall include chart and report review at a ratio of 1:5 PCSOT polygraphs thereafter until a minimum of 20 PCSOT polygraphs are conducted.
- C. To maximally support any application for SOMB certification as a Post-Conviction Sex Offender Polygraph Examiner, supervisees are required to maintain a cumulative log that includes at a minimum:
 - a. The dates of face-to-face supervision; and
 - b. The number and completion dates of supervised polygraph and PCSOT polygraph examinations conducted, all of which can be verified and signed by the supervisor.
- D. The cumulative log may be required by the SOMB as a condition of approval of a formal supervision plan or application for certification; such log may be subject to audit or requested by the SOMB in support of decision making regarding certification or quality assurance processes.
- E. Formal supervision agreement.
 - a. A person seeking certification by the SOMB as an Associate/Supervised Post-Conviction Sex Offender Polygraph Examiner shall only conduct polygraph and PCSOT polygraph examination under the supervision of an SOMB-certified Senior/Approved level Post-Conviction Sex Offender polygraph Examiner and in accordance with the terms of a formal supervision agreement.

- b. The formal supervision agreement shall minimally address the following criteria:
 - i. The name and contact information of the supervisee and the supervisor(s);
 - ii. Locations(s) in which services will be conducted; and
 - iii. Effective period of supervision.
- F. All polygraph reports conducted by an Associate/Supervised Post-Conviction Sex Offender Polygraph Examiner must be reviewed and signed as approved by the supervising polygraph examiner.

IX. CONTINUING EDUCATION/ONGOING PROFESSIONAL DEVELOPMENT REQUIREMENTS

In order to maintain eligibility as a certified Post-Conviction Sex Offender Polygraph Examiner, a person must:

- A. Accumulate a minimum of 30 verifiable hours of continuing education in the form of workshops, conferences, or symposia related to the field of polygraphy, over the course of the two-year period subsequent to the initial application and certification by the SOMB.
 - a. Teaching relevant coursework at an accredited university or college, or providing training at a conference or workshop (to be reviewed and approved by the SOMB) can substitute for up to one-third (10 hours) of the total of 30 continuing education hours requirement for an applicant.

X. CONDITIONAL WAIVER

- A. A conditional waiver request shall only be considered one time for:
 - a. A person not meeting the *continuing education* requirement at the time of Senior/Approved Post-Conviction Sex Offender Polygraph Examiner certification renewal; and
 - b. An Associate/Supervised Post-Conviction Sex Offender Polygraph Examiner not meeting the minimum requirements for certification level upgrade to Senior/Approved Post-Conviction Sex Offender Polygraph Examiner.

- B. Conditional waivers are not permitted and will not be considered by the SOMB with respect to the *educational and specialized training* requirements for Post-Conviction Sex Offender Polygraph Examiners as specified in this section.
- C. A person submitting a petition for conditional waiver shall clearly articulate in writing the reasons that the time-limited exception for the requirement should be considered by the SOMB. The request shall be submitted on a specialized renewal application developed by the SOMB for such purpose.
- D. The SOMB has sole discretion and final authority for granting or denying any conditional waiver requests and determining any terms of the waiver if so granted.
 - a. At the end of the 2-year conditional waiver term, a person is required to fully meet the continuing education requirements outlined in this section to be eligible for renewal of their certification. Failure to fully meet the requirement may result in remedial action or certification denial as determined by the SOMB.
 - b. The terms of remedial actions may, at the SOMB's discretion, include a period of supervision.

XI. SOMB DECISIONMAKING PROCESSES FOR CERTIFYING POST-CONVICTION SEX OFFENDER POLYGRAPH EXAMINERS

- A. Certification Committee. The SOMB shall establish/appoint a Certification Committee composed of no fewer than 4 members to oversee the certification of post-conviction sex offender polygraph examiners pursuant to this section. The Certification Committee will review all applications for initial certification, requests for changes in level of certification, reinstatement requests, or applicants on monitoring status. Renewal applications will be reviewed by the Certification Committee when requested by the SOMB coordinator.
- B. The Certification Committee shall minimally include:

- a. Two current SOMB members eligible for certification as a Senior/Approved Evaluator or Treatment Provider;
- b. A non-clinical SOMB member;
- c. An SOMB member of the board's choosing; and
- d. An SOMB member who is eligible for certification as a Senior/Approved Post-Conviction Sex Offender Polygraph Examiner.

The Certification Committee will provide a recommendation to the SOMB for final approval or denial of the application. No Certification Committee member holding a personal or financial interest in an application before the committee shall participate in the deliberation or voting on approval of the application.

- C. Verification of Completeness of Applications. The SOMB coordinator shall:
 - a. Determine, using an established checklist, the completeness of any application submitted for certification;
 - b. Provide written notification to the applicant within 5 business days of the receipt of the application and indicate whether:
 - i. All required items (the application, supporting documentation, and fees) have been received and the application is complete and ready for review by the Certification Committee; and
 - ii. Any required items are absent and needed to complete the application in order to be forwarded to the Certification Committee for review and a deadline for submitting these items.
 - c. Provide to the Certification Committee the completed packet of applications for initial certification, requests for changes in level of certification, reinstatement requests, or applicants on monitoring status for review prior to the regularly scheduled meeting.
 - d. Provide to the Certification Committee a completed renewal application packet if the SOMB coordinator has questions regarding the application
- D. To be considered for review by the Certification Committee in a given month, the completed application and all supporting documentation must be received no less than 30 days prior to the next scheduled meeting date, with such meeting dates

published on the SOMB calendar/website. Late submission of an application will be reviewed by the SOMB as time allows and under no circumstances will the SOMB consider an application submitted within 14 days of the next scheduled meeting.

- E. A Certification Review Form shall be completed for each applicant reviewed on the date of the meeting, noting the decision of the committee.
- F. The Certification Committee shall, make a recommendation to the SOMB to approve, deny or otherwise monitor certification with the SOMB making the final certification decision.
- G. The SOMB shall provide each applicant a written notification, within 15 business days, of the final SOMB decision.
- H. Denial of Certification.
 - a. The SOMB shall provide written notification to the applicant within 15 business days of the denial decision, the reason(s) for the denial and notice of the right to a hearing; and
 - b. The SOMB may provide the applicant any recommended remedial steps or actions that can be taken to support a further consideration for certification and any deadlines or timeframes in which such remedial action should occur.
 - c. A person who submits, less than 365 days from the submission of the previously denied application for certification, a revised application shall not be required to provide another application processing fee.
- I. The SOMB shall retain a complete file for each applicant seeking initial or renewal certification, including all written correspondence, applications and supporting documentation, and approval/denial decisions.

XII. CERTIFICATION PERIOD

- A. Certification as a Senior/Approved Post-Conviction Sex Offender Polygraph Examiner shall remain in effect for 2 years provided that the examiner continues to meet the criteria for such certification and such certification has not been suspended, revoked, otherwise restricted or on voluntary inactive status. Renewal

application shall typically occur during a person's month of birth 2 years following initial certification, and every 2 years thereafter.

- B. Certification as an Associate/Supervised Post-Conviction Sex Offender Polygraph examiner shall remain in effect for 2 years provided that the examiner continues to meet the criteria for such certification and such certification has not been suspended or revoked. Certification as an Associate/Supervised Post-Conviction Sex Offender Polygraph is limited to a 2 year period at which time the examiner must request advancement in certification status to a Senior/Approved Post-Conviction Sex Offender Polygraph Examiner, unless extended by conditional waiver.
- C. The SOMB shall issue to each applicant approved for a certificate that:
 - a. Designates the person as either a certified Senior/Approved Post-Conviction Sex Offender Polygraph Examiner or an Associate/Supervised Post-Conviction Sex Offender Polygraph Examiner;
 - b. Indicates the effective period of the person's certification, including the expiration date; and
 - c. Is signed by the Chair and Vice Chair of the SOMB.
- D. The SOMB shall notify in writing each certified Post-Conviction Sex Offender Polygraph Examiner within 90 days of the expiration of the effective term of certification, the steps necessary to apply for renewal, and the deadline for providing a completed application for renewal. However, the certificate holder is ultimately responsible for timely renewal of certification.
- E. A person whose certification has not been renewed by the expiration date on the certificate issued by the SOMB shall no longer be certified as such and shall be removed from the central roster.
- F. Expiration. A person whose certification by the SOMB has expired may reapply at any time for certification as follows:
 - a. A person whose certification has been expired for less than 365 days may reapply for certification following the certification *renewal* process as outlined in this section.

- b. A person whose certification by the SOMB has been expired for 365 days or more may reapply for certification by following the *initial* certification process as outlined in this section.

Section 5: SOMB Application Process and Disciplinary and Complaint Procedures

I. APPLICATION PROCESS

- A. Any person seeking certification by the SOMB to provide sexual offender services pursuant to these standards does so voluntarily and shall apply for certification only upon reviewing and understanding the certification requirements of the certification type.
- B. By submitting an application for SOMB certification to conduct sexual offender services in accordance with these standard, the applicant:
 - a. Attests that they meet the minimum requirements and qualifications for the category of certification for which they are applying;
 - b. Agrees that the information provided through the application process is truthful and accurate;
 - c. Agrees to participate in any quality assurance or auditing processes as established by the SOMB in support of upholding the goals, objectives, and guiding principles as set forth in these standards; and
 - d. Understands that the SOMB has statutory responsibility and final authority for making all initial and renewal certification decisions – including approval, denial, suspension, revocation or other monitoring of certification.
- C. Application for Initial Certification. A person seeking certification shall submit the following:
 - a. A completed application using any forms developed by the SOMB for the purposes of certification;
 - b. Any and all accompanying supporting documentation as indicated on such application form(s) and in accordance with the criteria and requirements set forth in this section including, but not limited to:
 - i. Proof of licensure, if applicable for the level of certification;
 - ii. Verification of educational requirements;
 - iii. Proof of professional liability insurance;

- iv. The assurances and release form;
- v. The applicable non-refundable initial application fee payable to the Idaho Sexual Offender Management Board; and
- vi. Any additional information or documentation as deemed necessary by the SOMB to make an appropriate certification decision.

c. Psychosexual evaluator required documentation

- i. Attestation of clinical experience and specialized training requirements, if applicable for the level of certification
- ii. For a Senior/Approved Psychosexual Evaluator or an Associate/Supervised Psychosexual Evaluator applicant, copies of 2 adult psychosexual evaluation reports that:
 - 1. Were conducted by the applicant on separate clients;
 - 2. Were completed within the year preceding the application;
 - 3. Have the identifying information and characteristics redacted; and
 - 4. Have not been previously submitted to the SOMB as part of any review and certification process as set forth in this section.
- iii. Supervision agreement for an Associate/Supervised Psychosexual Evaluator or a Provisional/Supervised Psychosexual Evaluator applicant;

d. Treatment provider required documentation

- i. Attestation of clinical experience and specialized training requirements, if applicable for level of certification;
- ii. For a Senior/Approved Sex Offender Treatment Provider or an Associate/Supervised Sex Offender Treatment Provider, copies of 2 treatment plans, 2 progress reports and 2 treatment summary reports that:
 - 1. Were developed by the applicant on separate clients;
 - 2. Were developed within the year preceding the application;
 - 3. Have the identifying information and characteristics redacted; and

4. Have not been previously submitted to the SOMB as part of any review and certification process as set forth in this section.
- iii. For a Senior/Approved Sex Offender Treatment Provider or an Associate/Supervised Sex Offender Treatment Provider, documentation related to the person's treatment program curriculum to include:
1. A program narrative describing the sex offender treatment program theory/model;
 2. Modality (e.g. individual, group, family, etc.) of treatment used for the sex offender treatment program;
 3. Acceptance criteria for the sex offender treatment program;
 4. Descriptions about how treatment plans are developed and modified;
 5. Templates of treatment plans, contracts and agreements;
 6. Treatment program rules and expectations;
 7. Assessment tools to be used to inform treatment planning and gauge treatment progress;
 8. An outline of modules, exercises and activities;
 9. Data to be collected to assess program impact and effectiveness;
and
 10. The supervision agreement for an Associate/Supervised Sex Offender Treatment Provider or a Provisional/Supervised Sex Offender Treatment Provider.

e. Polygraph examiner required documentation

- i. Three (3) professional references attesting to the quality and integrity of the applicant's polygraph examination practices, of which:
 1. One (1) must be from a peer outside of the person's place of business and who is PCSOT certified;
 2. One (1) must be from professional certified by the SOMB as a Post-Conviction Sex Offender Treatment Provider pursuant to this

section and who is familiar with the polygraph practices of the applicant; and

3. One (1) must be from a supervision officer/manager from the Idaho Department of Correction or Idaho Department of Juvenile Corrections, who is familiar with the practices of the applicant and who is so authorized to provide such a reference letter.
- ii. The supervision agreement for an Associate/Supervised Post-Conviction Sex Offender Polygraph Examiner applicant;
 - iii. **Application for Renewal of Certification.** A person seeking renewal of certification to provide sexual offender services shall submit, within 30 days of the expiration of the effective dates of the initial certification period indicated on the certificate issued by the SOMB:
 - a. A completed application using any forms developed by the SOMB for the purposes of certification;
 - b. Any and all accompanying supporting documentation as indicated on such application form(s) and in accordance with the criteria and requirements set forth in this chapter, including, but not limited to:
 - i. Proof of licensure if applicable for level of certification;
 - ii. Proof of professional liability insurance;
 - iii. Verification of continuing educational requirements if applicable for level of certification or a request for an extension of time to complete continuing education;
 - iv. The assurances and release form;
 - v. Supervision agreement if applicable for level of certification;
 - vi. The applicable non-refundable renewal application fee payable to the Idaho Sexual Offender Management Board;

- vii. Any additional information or documentation as deemed necessary by the SOMB to make an appropriate certification decision.
- c. Treatment providers must submit documentation related to any changes to the person's initial certification application treatment program curriculum.
- d. At the time of renewal providers are required to submit the following documentation for quality assurance review:
 - i. Senior/Approved **Psychosexual Evaluator** or Associate/Supervised Psychosexual Evaluator will submit copies of 2 psychosexual evaluation reports that:
 1. Were conducted or assisted with by the applicant on separate clients;
 2. Were completed within the two years preceding the application;
 3. Have the identifying information and characteristics redacted; and
 4. Have not been previously submitted to the SOMB as part of any certification or quality assurance process as set forth in these standards.
 - ii. Senior/Approved **Treatment Provider** or Associate/Supervised Treatment Provider will submit copies of 2 treatment plans, 2 progress reports, and 2 treatment summary reports that:
 1. Were developed by the applicant on separate clients;
 2. Were developed with the two years preceding the application;
 3. Have the identifying information and characteristics redacted; and

4. Have not been previously submitted to the SOMB as part of any review and certification process as set forth in this section.
- iii. Senior/Approved **Post-Conviction Sex Offender Polygraph Examiner** will submit copies of 2 redacted PCSOT polygraph examination reports that were conducted by the applicant within the previous 2 years.
- iv. **Request for Change in Level of Certification**
 - a. **Psychosexual Evaluators**
 - i. *Request to Advance to a Senior/Approved Level of Certification.* A person currently certified as an Associate/Supervised Psychosexual Evaluator may apply, at any time during an effective period of certification as an Associate/Supervised Psychosexual Evaluator, for a change of certification status to a Senior/Approved Psychosexual Evaluator level, provided that:
 1. The person meets the established requirements and qualifications for initial certification as a Senior/Approved Psychosexual Evaluator;
 2. A completed change in certification level application is received, using proper forms developed by the SOMB for the purposes of certification, along with any accompanying supporting documentation as indicated on such application form;
 3. A letter of attestation and support is received from the Senior/Approved Psychosexual Evaluator responsible for the supervision of the applicant while certified as an Associate/Supervised Psychosexual Evaluator; and

4. Payment of a non-refundable renewal application processing fee, if applicable.
- ii. *Request to Advance to an Associate/Supervised Level of Certification.* A person currently certified as a Provisional/Supervised Psychosexual Evaluator may apply, at any time during an effective period of certification as a Provisional/Supervised Psychosexual Evaluator, for a change of certification status to an Associate/Supervised Psychosexual Evaluator level provided that:
1. The person meets the established requirements and qualifications for initial certification as an Associate/Supervised Psychosexual Evaluator;
 2. A completed change in certification level application is received, using proper forms developed by the SOMB for the purposes of certification, along with any accompanying supporting documentation as indicated on such application form;
 3. A letter of attestation and support is received from the Senior/Approved Psychosexual Evaluator responsible for the supervision of the applicant while certified as a Provisional/Supervised Psychosexual Evaluator; and
 4. Payment of a non-refundable renewal application processing fee, if applicable.
- iii. *Request to Change to Less Independent Level of Certification.* An evaluator may apply, at any time during an effective period of certification for a change in certification status to a less independent level of certification in the event that:
1. The person no longer meets the established requirements and qualifications for their current level of certification;

2. The person meets the established requirements and qualifications for the less independent level of certification;
3. A completed change in certification level application is received, using proper forms developed by the SOMB for the purposes of certification, along with any accompanying supporting documentation as indicated on such application form, and specifying in writing the reason(s) for the request for a lower level of certification; and
4. Payment of a non-refundable renewal application processing fee, if applicable.

iv. Voluntary Request for Placement on Inactive Status

1. A person certified in accordance with this section may, at any time, voluntarily request placement on inactive status by submitting a written request to the SOMB, specifying the reason(s) for the request and indicating the date at which their inactivity or removal is to be effective;
2. The SOMB shall respond in writing within 15 business days of receipt of the request to provide confirmation of the request;
3. A person voluntarily placed on inactive status shall be removed from the central roster of certified evaluators;
4. To reinstate their certification, a person who has been placed voluntarily on inactive status for less than 365 days must reapply for certification in accordance with the certification renewal process as outlined in this section, and any processing fees shall be waived; or

5. To reinstate their certification, a person who has been placed voluntarily on inactive status for 365 days or more must reapply for certification in accordance with the initial certification process as outlined in this section and submit the applicable processing fees.

b. Treatment Providers

- i. *Request to Advance to a Senior/Approved Level of Certification.* A person currently certified as an Associate/Supervised Sex Offender Treatment Provider may apply, at any time during an effective period of certification as an Associate/Supervised Sex Offender Treatment Provider, for a change of certification status to a Senior/Approved Sex Offender Treatment Provider level provided that:
 1. The person meets the established requirements and qualifications for initial certification as a Senior/Approved Sex Offender Treatment Provider;
 2. A completed change in certification level application is received, using proper forms developed by the SOMB for the purposes of certification, along with any accompanying supporting documentation as indicated on such application form;
 3. A letter of attestation and support is received from the Senior/Approved Sex Offender Treatment Provider responsible for the supervision of the applicant while certified as an Associate/Supervised Sexual Offender Treatment Provider; and
 4. Payment of a non-refundable renewal application processing fee, if applicable.
- ii. *Request to Advance to an Associate/Supervised Level of Certification.* A person currently certified as a

Provisional/Supervised Sex Offender Treatment Provider may apply, at any time during an effective period of certification as a Provisional/Supervised Sex Offender Treatment Provider, for a change of certification status to an Associate/Supervised Sex Offender Treatment Provider level provided that:

1. The person meets the established requirements and qualifications for initial certification as an Associate/Supervised Sex Offender Treatment Provider;
 2. A completed change in certification level application is received, using proper forms developed by the SOMB for the purposes of certification, along with any accompanying supporting documentation as indicated on such application form;
 3. A letter of attestation and support is received from the Senior/Approved Sex Offender Treatment Provider responsible for the supervision of the applicant; and
 4. Payment of a non-refundable renewal application processing fee, if applicable.
- iii. *Request to Change to Less Independent Level of Certification.*
- Treatment provider may apply, at any time during an effective period of certification for a change in certification status to a less independent level of certification in the event that:
1. The person no longer meets the established requirements and qualifications for their current level of certification;
 2. The person meets the established requirements and qualifications for the less independent level of certification;

3. A completed change in certification level application is received, using proper forms developed by the SOMB for the purposes of certification, along with any accompanying supporting documentation as indicated on such application form, and specifying in writing the reason(s) for the request for a lower level of certification; and
 4. Payment of a non-refundable renewal application processing fee, if applicable.
- iv. *Voluntary Request for Placement on Inactive Status.*
1. A person certified in accordance with this section may, at any time, voluntarily request placement on inactive status by submitting a written request to the SOMB, specifying the reason(s) for the request and indicating the date at which their inactivity or removal is requested to be effective;
 2. The SOMB shall respond in writing within 15 business days of receipt of the request to provide confirmation of the request;
 3. A person voluntarily placed on inactive status shall be removed from the central roster of certified treatment providers;
 4. To reinstate their certification, a person who has been placed voluntarily on inactive status for less than 365 days must reapply for certification in accordance with the certification renewal process as outlined in this section, and any processing fees shall be waived; or
 5. To reinstate their certification, a person who has been placed voluntarily on inactive status for 365 days or more must reapply for certification in accordance with

the initial certification process as outlined in this section and submit the applicable processing fees.

c. Polygraph Examiners

i. *Request to advance to a Senior/Approved level of certification.*

A person currently certified as an Associate/Supervised Post-Conviction Sex Offender Polygraph Examiner may apply for a change of certification status to a Senior/Approved Post-Conviction Sex Offender Polygraph Examiner within 2 years from the person's month of birth following initial certification, provided that:

1. The person meets the established requirements and qualifications for a Senior/Approved Post-Conviction Sex Offender Polygraph Examiner;
2. A completed change in certification level application is received, using proper forms developed by the SOMB for purposes of certification, along with any supporting documentation as indicated on such application form;
3. A letter of attestation and support is received from the SOMB-certified Senior/Approved level Post-Conviction Sex Offender Polygraph Examiner responsible for supervision of the applicant and as outlined in the formal supervision agreement previously approved by the SOMB; and
4. Payment of a non-refundable renewal application processing fee, if applicable.

ii. A person who fails to request advancement to Senior/Approved Post-Conviction Sex Offender Polygraph Examiner status upon completion of the 2-year time limitation shall no longer be certified and shall be removed from the central roster.

- iii. Voluntary Request for Placement on Inactive Status.
 1. A person certified to conduct post-conviction sex offender polygraph examinations in accordance with this section may, at any time, voluntarily request placement on inactive status by submitting a written request to the SOMB, specifying the reason(s) for the request and indicating the date(s) at which their inactivity is requested to be effective.
 2. The SOMB shall respond in writing within 15 business days of receipt of the request to provide confirmation of the request and the person shall be removed from the roster of certified Sex Offender Polygraph Examiners.
 3. An examiner who has been placed voluntarily on inactive status for less than 365 days may reapply for certification in accordance with the certification renewal process as outlined in this section, and any processing fees shall be waived.
 4. An examiner who has been placed voluntarily on inactive status for 365 days or more may reapply for certification in accordance with the initial certification process as outlined in this section and submit the applicable processing fees.

II. APPLICABLE FEES

A. Psychosexual Evaluator

- a. \$75 for each person submitting an application for initial certification as a Senior/Approved Psychosexual Evaluator or as an Associate/Supervised Psychosexual Evaluator;

- b. \$50 for each person applying for a 2-year renewal of certification as a Senior/Approved Psychosexual Evaluator or as an Associate/Supervised Psychosexual Evaluator;
- c. \$50 for each person submitting an application for initial certification as a Provisional/Supervised Psychosexual Evaluator;
- d. \$30 for each person applying for annual renewal of certification as a Provisional/Supervised Psychosexual Evaluator;
- e. \$50 renewal processing fee for each person submitting an application for change in certification level from Senior/Approved Psychosexual Evaluator or Associate/Supervised Psychosexual Evaluator 365 days or more subsequent to the most recent effective certification date issued by the SOMB; and
- f. \$30 renewal processing fee for each person submitting an application for change in certification level from Provisional/Supervised Psychosexual Evaluator 365 days or more subsequent to the most recent effective certification date issued by the SOMB.
- g. \$25 processing fee for each person submitting a request for an extension of time to complete continuing education requirements.

B. Treatment Provider

- a. \$75 for each person submitting an application for initial certification as a Senior/Approved Sex Offender Treatment Provider or as an Associate/Supervised Sex Offender Treatment Provider;
- b. \$50 for each person applying for a 2-year renewal of certification as a Senior/Approved Sex Offender Treatment Provider or as an Associate/Supervised Sex Offender Treatment Provider;
- c. \$50 for each person submitting an application for initial certification as a Provisional/Supervised Sex Offender Treatment Provider;
- d. \$30 for each person applying for annual renewal of certification as a Provisional/Supervised Sex Offender Treatment Provider;
- e. \$50 renewal processing fee for each person submitting an application for change in certification level status from Senior/Approved Sex Offender

Treatment Provider or Associate/Supervised Sex Offender Treatment Provider 365 days or more subsequent to the most recent effective certification date issued by the SOMB; and

- f. \$30 renewal processing fee for each person submitting an application for change in certification level status from Provisional/Supervised Sex Offender Treatment Provider 365 days or more subsequent to the most recent effective certification date issued by the SOMB.
- g. \$25 processing fee for each person submitting a request for an extension of time to complete continuing education requirements.

B. Polygraph Examiner

- a. \$75 for each person submitting an application for initial certification as a Senior/Approved Post-Conviction Sex Offender Polygraph Examiner and an Associate/Supervised Post-Conviction Sex Offender Polygraph Examiner;
- b. \$50 for each person applying for a 2-year renewal of certification as a Senior/Approved Post-Conviction Sex Offender Polygraph Examiner; and
- c. \$50 for each person submitting an application for change in certification level from Associate/Supervised Post-Conviction Sex Offender Polygraph Examiner 365 days or more subsequent to the most recent effective certification date issued by the SOMB.
- d. \$25 processing fee for each person submitting a request for an extension of time to complete continuing education requirements.

XIII. CERTIFICATION DENIAL, SUSPENSION, REVOCATION, RESTRICTION, OR MONITORING

The SOMB may deny, suspend, revoke, restrict or otherwise monitor certification of an applicant or a person who is currently certified by the SOMB for any of the following reasons.

A. Grounds for Denial, Suspension, Revocation, Restriction or Other Monitoring of Certificate.

- a. Failure to meet or maintain the minimum eligibility criteria and qualifications for certification established by law or rule adopted by the SOMB;

- b. Falsification of any information or documentation, or concealing a material fact in the application for (re)certification, or during any investigation or quality assurance review;
- c. Misrepresentation of current level/designation of certification, or practicing outside the scope of current level/designation of certification;
- d. Failure to comply with Section 18-8316, Idaho Code, the Rules of the Sex Offender Management Board (IDAPA 57.01.01), or the standards adopted by the SOMB;
- e. Failure to demonstrate an understanding of counter-transference issues and a broad knowledge of sexuality in the general populations, and basic theories and typologies of sex offenders and sexual assault victims;
- f. Failure or refusal to comply with the quality assurance review process or to cooperate during any investigation concerning certification, or otherwise interfering with the quality assurance review or investigative processes, which includes the failure or refusal to provide data, information or records as requested by the SOMB or designee;
- g. Failure to comply with any Final order issued by the SOMB, informal disciplinary measures, or remedial steps or corrective action ordered by the SOMB as a condition of continued certification, including practicing on a suspended or restricted certification;
- h. Engaging in conduct that departs from the SOMB Standards;
- i. Revocation, suspension, limitation, reprimand, voluntary surrender or any other disciplinary action or proceeding, including investigation against a license, certificate or privilege to practice by a professional licensing board;
- j. Conviction of, or entry of a withheld judgment or plea of *nolo contendere* to, conduct constituting a felony;
- k. Conviction of a crime of moral turpitude; or
- l. Failure to notify the SOMB in writing of any circumstances that affect their eligibility for certification, including any disciplinary action taken against the

certification holder by a respective professional licensing board, or conviction of any felony or crime of moral turpitude.

B. Mirroring Orders and Emergency Suspensions.

a. Mirroring Orders.

- i. In the event a state licensing board with authority over a certificate holder's professional license takes action against the certificate holder's professional license in any fashion which suspends, restricts, limits or affects the certificate holder's ability to provide services pursuant to their SOMB certification, the certificate holder shall promptly notify the SOMB of the action.
- ii. Upon notification of such action and receipt of an official order from the professional licensing board, the SOMB shall be authorized to issue its order suspending, restricting, limiting or otherwise affecting the certificate holder's SOMB certification in the same fashion as the professional licensing board action.
- iii. The SOMB order may be issued without further hearing or proceeding, but shall be subject to the effect of any reversal or modification of the professional licensing board action by reason of appeal or rehearing.

b. Emergency Suspension.

- i. Pursuant to Section 67-5247, Idaho Code, if the SOMB finds that public health, safety or welfare requires immediate emergency action the SOMB may take such action necessary to prevent or avoid the immediate danger.
- ii. The SOMB may issue an order suspending a certificate pending formal proceedings for revocation or other action. Such order shall include a brief, reasoned statement justifying the existence of an emergency and the decision to take the specific action. The order will be effective when issued.

- iii. After issuance of an emergency order, the SOMB will immediately initiate the disciplinary process procedures that would have occurred had an emergency not existed.

C. Levels of Discipline.

- a. Formal Discipline. Formal disciplinary action consists of suspension, revocation, or other restrictions. Formal disciplinary actions restrict or otherwise impede a certificate holder's ability to perform sex offender services consistent with their certification level. Formal disciplinary action decisions will be posted on the SOMB website and the central roster, and notification will be made to the courts.
 - i. Suspension. A certificate may be suspended by the SOMB for a period not to exceed one (1) year. During a period of suspension, the certificate holder may not perform post-conviction evaluations, provide specialized sex-offender treatment or conduct post-conviction sex offender polygraphs as provided in Section 18-8314, Idaho Code.
 - ii. Revocation. A certificate may be revoked by the SOMB for a period not to exceed one (1) year. Upon a second or subsequent revocation, a certificate may be revoked for a period not to exceed five (5) years. During a period of revocation, the certificate holder may not perform post-conviction evaluations, provide specialized sex-offender treatment or conduct post-conviction sex offender polygraphs as provided in Section 18-8314, Idaho Code.
 - iii. Restrictions. A certificate may be restricted by requiring that the certificate holder comply with the SOMB's directives. The duration of any restriction placed on a certificate will be established by a specified date, by the performance of a certain remedial or corrective action, or a combination thereof; however, the duration of a certificate under restriction should not exceed one (1) year.
- b. Informal Discipline. Informal disciplinary action consists of monitoring a certificate holder or issuing letters of informal reprimand or counseling.

Informal disciplinary actions do not restrict or otherwise impede a certificate holder's ability to perform sex offender services consistent with their certification level. Informal disciplinary actions are not public, will not be posted on the SOMB website or central roster, and notification will not be made to the courts.

- i. Monitoring consists of routinely reviewing a certificate holder's performance to assist the certificate holder with understanding the dynamics of the population served and compliance with the SOMB standards. Monitoring may also include recommendations for specialized training or use of a mentor approved by the SOMB.
 - ii. Letters of Informal Reprimand or Counseling are used to provide guidance or recommendations to the certificate holder concerning areas for improvement.
- c. Withholding Formal Discipline and Probation. The SOMB may withhold the imposition of any formal discipline and place the certificate holder on a period of probation not to exceed two (2) years. The SOMB may impose any conditions of probation as deemed necessary to ensure compliance with the SOMB standards of practice, including but not limited to attendance at specialized training, review of work product by the SOMB or designee, or supervision by a senior level certificate holder. Failure to comply with a probationary term may result in the imposition of any suspended discipline after a hearing.
- d. Certificate holders facing formal disciplinary action will have a right to a hearing as provided below. Certificate holders facing informal disciplinary action will not have a right to a hearing, but may face formal disciplinary action for not complying with any informal disciplinary action as agreed to by both parties. Should a certificate holder not agree to the informal disciplinary action recommended by the SOMB, the SOMB reserves the right to initiate formal disciplinary proceedings.

- e. The SOMB is not authorized to impose civil remedies, such as monetary damages or restitution, to compensate complainants or to resolve fee disputes, which are civil matters.
- f. The SOMB is not authorized to impose criminal penalties, such as criminal probation or incarceration.

XIV. DISCIPLINARY PROCESS

The disciplinary process begins upon receipt of information by the SOMB that a certificate holder has violated any of the provisions of Idaho Code, SOMB Rules or SOMB standards.

- A. The disciplinary process may be initiated by the receipt of a written complaint from any person, including any member of the public, a client of the certificate holder, court personnel, and legal representatives. The disciplinary process may also be initiated as a result of a quality assurance review or based upon a review of information submitted to the SOMB during the certification process, monitoring process or while under formal probation.
- B. Process for Submitting Complaints.
 - a. All complaints must be in writing and contain the following information:
 - i. The full name and address of the complainant;
 - ii. The name, address and telephone number (if known) of the certificate holder; and
 - iii. A clear and accurate statement of the facts describing the allegations against the certificate holder.
 - b. Complaints filed against a person who is not certified by the SOMB at the time of the events contained in the allegation will not be reviewed by the SOMB.
 - c. The SOMB will provide written notice to the complainant that the complaint has been received and under review. Notice shall occur within fifteen (15) business days of receiving the complaint.
 - d. The identity of the complainant will remain confidential until such time as it is determined that disciplinary action will be taken.

- e. Anonymous complaints will be accepted and reviewed; however, the inability of the SOMB to obtain information to support the allegations will result in the complaint being dismissed.
- C. Initial Review.
- a. An initial or preliminary review of any complaint or information received will be conducted by the SOMB coordinator to determine if the SOMB has jurisdiction.
 - b. If the SOMB has jurisdiction, the complaint and any supporting information will be routed to the Certification Committee for review to determine if there is a possible violation of the SOMB's rules or standards.
 - c. If there is no jurisdiction or if the review does not reveal any possible violations, the case will be closed with a letter sent to the certificate holder and the individual, if any, who filed the complaint.
 - d. Any complaints received alleging criminal activity will be referred to the appropriate law enforcement agency.
 - e. Any complaints received alleging activity in violation of any professional licensing standards will be referred to the appropriate professional licensing board.
- D. Investigation. If it is determined that the SOMB has jurisdiction and the Certification Committee identifies possible violations exist, an investigation will be conducted by a Certification Committee member(s) or designee.
- a. The certificate holder will be notified in writing that a complaint against them has been received by the SOMB or that the SOMB is in receipt of other information causing concern with the certificate holder's compliance with Idaho Code, SOMB Rules, or the SOMB standards and is under investigation. This notice shall occur within fifteen (15) business days.
 - b. At a minimum, the investigation will consist of gathering relevant documents, meeting with the complainant (if any) and any witnesses, and meeting with the certificate holder.

- c. A certificate holder is required to participate in the investigative process as a condition of certification.
 - d. The investigative findings will be presented to the SOMB, without revealing the identity of the certificate holder, with recommendations for formal discipline, informal discipline, or closure with no further action. The SOMB will either:
 - i. Approve the recommendations of the investigation;
 - ii. Modify the recommendations of the investigation; or
 - iii. Close the case without further action.
- E. Informal Discipline.
- a. The imposition of informal discipline must be approved by the SOMB.
 - b. Letters of Informal Reprimand or Counseling.
 - i. Letters will be mailed to the certificate holder without consultation with the certificate holder.
 - ii. These letters do not constitute a final order and are not subject to review by the district court.
 - c. Monitoring.
 - i. Upon approval by the SOMB, Certification Committee member(s) or designee will contact the certificate holder to discuss the informal discipline and monitoring being recommended.
 - ii. Any agreement to informal discipline involving monitoring will be reduced to writing and signed by both parties.
 - iii. The written informal discipline agreement will be presented to the SOMB for final approval. The final approval by the SOMB does not constitute a final order and is not subject to review by the district court.
- F. Formal Disciplinary Action When the SOMB has determined there is cause for formal discipline against the certificate holder, disciplinary proceedings will be initiated pursuant to the Idaho Rules of Administrative Procedure of the Attorney General (IDAPA 04.11.01).

G. Reinstatement of Certification after Denial or Formal Disciplinary Action.

- a. Denial. An applicant whose certification has been denied may reapply subsequent to completing any remedial steps or corrective action as recommended by the SOMB, or when evidence is available confirming that the person meets the required qualifications.
- b. Suspension. A person whose certification has been suspended may apply for reinstatement of their certification after the duration of the suspension has expired by providing the following:
 - i. Submitting a completed application for reinstatement. Reinstatement shall follow the certification *renewal* process as outlined in these standards;
 - ii. Payment of any reinstatement fees;
 - iii. Providing evidence to the satisfaction of the SOMB of compliance with any remedial steps or corrective action ordered by the SOMB; and
 - iv. Any other information requested by the SOMB to demonstrate compliance with minimum criteria and qualifications for certification.
- c. Restriction. A person whose certification has been restricted shall request the SOMB remove the restrictions after the duration of the restriction as established by the SOMB has expired. If a time frame for restriction was not established, the request may be made after the certificate holder has completed any remedial steps or corrective action required by the SOMB. The certificate holder must provide the following:
 - i. Evidence to the satisfaction of the SOMB of compliance with any remedial steps or corrective action ordered by the SOMB; and
 - ii. Any other information requested by the SOMB to demonstrate compliance with minimum criteria and qualifications for certification.
- d. Revocation. A person whose certification has been revoked may request reinstatement after the one (1) year revocation period has expired. Reinstatement shall follow the *initial* certification process as outlined in these standards.

- i. A person must meet all minimum criteria and qualifications for certification to be eligible for reinstatement.
 - ii. The SOMB shall have discretion to impose any monitoring conditions upon a certificate holder whose certificate has been reinstated following revocation.
- e. Withheld Discipline and Probation. A certificate holder whose formal discipline was withheld and placed on probationary status, may seek reinstatement after the period of probation has expired and any conditions imposed have been met providing the following:
 - i. Submitting a completed application for reinstatement. Reinstatement shall follow the certification *renewal* process as outlined in these standards;
 - ii. Payment of any reinstatement fees;
 - iii. Providing evidence to the satisfaction of the SOMB of compliance with any remedial steps or corrective action ordered by the SOMB; and
 - iv. Other any other information requested by the SOMB to demonstrate compliance with minimum criteria and qualifications for certification.

Section 6: Quality Assurance for Community Providers

I. GENERAL CONSIDERATIONS

- A. The following quality assurance provisions are designed to provide a mechanism to advance the integrity and effectiveness of the minimum requirements, standards and guidelines for specialized evaluation, treatment, polygraph and/or other sex offender management services.
- B. It is the intent of the SOMB to foster a supportive and collaborative relationship with providers to enhance service delivery while identifying areas that can be improved through materials and program reviews combined with site visits.
- C. In the event adverse findings are noted during the quality assurance/audit process, the SOMB shall develop a course of action to remedy the findings including and up to formal discipline.
- D. All quality assurance/audit reviews shall be conducted utilizing the applicable quality assurance/audit tools approved by the SOMB.
- E. The SOMB has the authority to request a quality assurance/audit review of any person certified by the SOMB at any time, should questions arise regarding ethics and/or appropriate standards of practice.
 - a. The duty to participate in any quality assurance/audit process is a condition of certification and failure to participate is grounds for discipline.
 - b. A request for exceptions pertaining to the quality assurance/audit process shall be made in writing to the SOMB. Requests shall be granted solely at the discretion of the SOMB. Possible reasons for exceptions may include:
 - i. The certificate holder selected to participate in the quality assurance/audit process is currently addressing remedial action requested by the SOMB; or
 - ii. Extenuating circumstances.
- F. The certificate holder will be notified of the findings in any quality assurance process completed in accordance with these standards within 45 days of the

completion of such review. The notice shall minimally include the following elements;

- a. Strengths identified and recorded in the written documentation of the review and included on the quality assurance/audit tool;
- b. Adverse findings identified and recorded in the written documentation of the review and included on the quality assurance/audit tool; and
- c. Any expectations for remediation, which may include, but not be limited to, the following:
 - i. Development of a formal clinical supervision plan with an SOMB-certified Senior/Approved level provider;
 - ii. Specific corrective measures to address any identified deficiencies; and
 - iii. Requirements for submitting additional documentation for review by the SOMB to support quality assurance in accordance with these standards and guidelines.
- G. The results of any quality assurance/audit process completed in accordance with these standards shall be maintained in the SOMB file for the certificate holder.

II. QUALITY ASSURANCE PERTAINING TO PSYCHOSEXUAL EVALUATIONS

- A. The SOMB shall establish a Quality Assurance Committee to assess SOMB-certified psychosexual evaluators' adherence to the standards and guidelines for psychosexual evaluations as set forth in these provisions. This committee shall at a minimum, include a clinical member of the SOMB.
- B. No individual serving on the Quality Assurance Committee shall review their own psychosexual evaluations or the psychosexual evaluations of an individual to whom they are related, who is a business partner, or otherwise has a potential conflict of interest.
- C. Any quality assurance/audit process findings involving an Associate/Supervised Psychosexual Evaluator or a Provisional/Supervised Psychosexual Evaluator shall also be forwarded to the supervising senior-level psychosexual evaluator.

- D. The SOMB shall utilize formal, objective and random selection procedures to carry out quality assurance/audit processes outside of the initial certification process for SOMB-certified psychosexual evaluators.
- E. Ongoing Quality Assurance/Auditing. SOMB will utilize two processes for ongoing quality assurance/auditing.
 - 1. Providers will be required to submit work product for quality assurance/auditing review at the time of renewal of their certification.
 - a. If a provider fails to submit the required documents for quality assurance/auditing review, the providers certification may be denied.
 - b. The documents submitted for quality assurance/auditing review will be provided to the Quality Assurance Committee for review.
 - 2. Current psychosexual evaluations shall be randomly selected annually for quality assurance/audit review on newly convicted offenders. These psychosexual evaluations will be obtained by the SOMB from Idaho Department of Correction records.
 - a. The SOMB coordinator shall obtain copies of the psychosexual evaluations conducted prior to sentencing on newly convicted sex offenders and redact identifying information prior to submission to the Quality Assurance Committee.
 - b. The SOMB coordinator shall notify the SOMB-certified psychosexual evaluators whose psychosexual evaluations have been selected for ongoing quality assurance/audit review within 15 business days of evaluation selection.
- F. On-site/Office Visit Reviews. The SOMB may conduct random on-site/office visit reviews.
 - a. Any on-site/office visit reviews shall be conducted by an SOMB member or an independent assessor selected by the SOMB (hereinafter “reviewer”).
 - b. SOMB-certified psychosexual evaluators selected to participate in the on-site/office visit review process shall be notified in writing of the following:

- i. Their selection for participation in the quality assurance review process, for which agreement to participate is required pursuant to SOMB certification to conduct psychosexual evaluations;
 - ii. The required documentation to be submitted for the quality assurance/audit process as specified herein; and
 - iii. The criteria used for and processes by which the psychosexual evaluations shall be reviewed by the reviewer.
 - iv. Evaluations that were previously submitted to and/or reviewed by the SOMB as part of the individual's initial or renewal application documentation or for any previous quality assurance review/audit by the SOMB shall be excluded from the on-site/office visit quality assurance/audit process.
- c. Verbal notification will be made within 48 hours prior to the on-site/office visit review.
- d. The reviewer conducting an on-site/office visit review shall report the findings in writing to the SOMB within 14 days of completion of such review.
- i. The reviewer may, at the discretion of the SOMB, be requested to meet with the SOMB to respond to any questions or challenges to the quality assurance/audit review findings.

III. QUALITY ASSURANCE PERTAINING TO SEX OFFENDER-SPECIFIC TREATMENT

- A. The SOMB shall establish a Quality Assurance Committee to assess SOMB-certified sex offender treatment providers' adherence to the standards and guidelines for sex offender treatment as set forth in these provisions. This committee shall at minimum, include a clinical member of the SOMB.
- B. No individual serving on the SOMB Quality Assurance Committee shall review their own treatment program records/individual client records, or records documented by an individual to whom they are related, who is a business partner, or otherwise has a potential conflict of interest.
- C. Ongoing Quality Assurance/Auditing
 - a. Providers will be required to submit work product for quality assurance/auditing review at the time of renewal of their certification.
 - i. If a provider fails to submit the required documents for quality assurance/auditing review, the providers certification may be denied.
 - ii. The required documents submitted for quality assurance/auditing review will be provided to the Quality Assurance Committee for review.
- D. The SOMB may conduct random on-site/office visit reviews.
 - a. Any on-site/office visit reviews shall be conducted by an SOMB member or an independent assessor selected by the SOMB (hereinafter "reviewer").
- E. SOMB-certified sex offender treatment providers selected to participate in the on-site/office visit quality assurance/audit review process shall be notified in writing of the following:
 - a. Their selection for participation in the quality assurance/audit review process, for which agreement to participate is required pursuant to SOMB certification to provide sex offender treatment;
 - b. The required treatment program records/individual client record documentation to be submitted for the quality assurance/audit review process; and

- c. The criteria used for and processes by which the treatment program/service delivery documentation shall be reviewed by reviewer.
 - d. The treatment program records/individual client record documentation previously submitted to and/or reviewed by the SOMB as part of the individual's initial or renewal application documentation or for any previous quality assurance review/audit by the SOMB shall be excluded from the on-site/office visit quality assurance/audit process.
- F. Verbal notification will be made within 48 hours prior to the on-site/office visit review.
- G. The reviewer shall report the findings in writing to the SOMB within 14 days of completion of such review.
- a. The reviewer may, at the discretion of the SOMB, be requested to meet with the SOMB to respond to any questions or challenges to the quality assurance/audit review findings.

IV. QUALITY ASSURANCE PERTAINING TO POST CONVICTION SEXUAL OFFENDER POLYGRAPH EXAMINER

- A. The SOMB shall establish a Quality Assurance Committee to assess SOMB-certified sex offender polygraph examiner adherence to the standards and guidelines for PCSOT polygraph exams as set forth in these provisions. This committee shall at minimum, include a clinical member of the SOMB.
- B. No individual serving on the SOMB Quality Assurance Committee shall review their own polygraph exams, or records documented by an individual to whom they are related, who is a business partner, or otherwise has a potential conflict of interest.
- C. Ongoing Quality Assurance/Auditing
- a. Providers will be required to submit work product for quality assurance/auditing review at the time of renewal of their certification.
 - i. If a provider fails to submit the required documents for quality assurance/auditing review, the providers certification may be denied.
 - ii. The required documents submitted for quality assurance/auditing review will be provided to the Quality Assurance Committee for review.

- D. The SOMB may conduct random on-site/office visit reviews.
 - a. Any on-site/office visit reviews shall be conducted by an SOMB member or an independent assessor selected by the SOMB (hereinafter “reviewer”).
- E. SOMB certified PCSOT polygraph examiners selected to participate in the on-site/office visit quality assurance/audit review process shall be notified in writing of the following:
 - a. Their selection for participation in the quality assurance/audit review process, for which agreement to participate is required pursuant to SOMB certification to provide PCSOT polygraph exams;
 - b. The required polygraph/individual client record documentation to be submitted for the quality assurance/audit review process; and
 - c. The criteria used for and processes by which the polygraph delivery documentation shall be reviewed by reviewer.
 - d. The polygraph records/individual client record documentation previously submitted to and/or reviewed by the SOMB as part of the individual’s initial or renewal application documentation or for any previous quality assurance review/audit by the SOMB shall be excluded from the on-site/office visit quality assurance/audit process.
- F. Verbal notification will be made within 48 hours prior to the on-site/office visit review.
- G. The reviewer shall report the findings in writing to the SOMB within 14 days of completion of such review.
 - a. The reviewer may, at the discretion of the SOMB, be requested to meet with the SOMB to respond to any questions or challenges to the quality assurance/audit review findings.

Appendices

PSYCHOLOGICAL TESTING QUALIFICATIONS

Pearson:

- MMPI-2 – level C
- MCMI-III – level C
- PCL-R – level C
- WAIS-IV – level C
- SASSI-3 – level A

- Level A: No special qualifications to purchase
- Level C: Requires a high level of expertise in test interpretation, and can be purchased by individuals with licensure or certification to practice in your state in a field related to the purchase ;

or

A doctorate degree in psychology, education, or closely related field with formal training in the ethical administration, scoring, and interpretation of clinical assessments related to the intended use of the assessment.

PAR:

- PAI – level C
- PPI-R – level B
- Shipley-2 – level B
- STAXI-2 – level B
- HCR-20 – level B or S
- SVR-20 – level B or S

- Level B: Degree from a 4-year college or university in psychology or counseling related field, plus completion of coursework in test interpretation, psychometrics and measurement theory, educational statistics, or a closely related area;

or

License or certification from an agency/organization that requires appropriate training and experience in the ethical and competent use of psychological tests.

- Level C: All level B qualifications plus an advanced professional degree that provides appropriate training in the administration and interpretation of psychological tests;

or

License or certification from an agency that requires appropriate training and experience in the ethical and competent use of psychological tests.

- Level S: A degree, certificate or license to practice in a physical or mental health care profession or occupation, plus training and experience in the ethical administration, scoring, and interpretation of clinical behavioral assessment instruments.

MHS:

- LSI-R – level B

- Level B: Completed graduate-level courses in tests and measurements at a university or has received equivalent documented training.

REQUIRED FORMAT FOR ADULT PSYCHOSEXUAL EVALUATION REPORTS

- | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>I. Preliminary Statement (See SOMB Guidelines)</p> <p>II. Identifying Information Name, birth date, age, evaluation date, criminal case number, etc.</p> <p>III. Synopsis</p> <ul style="list-style-type: none">a. Risk level – Low, Moderate or Highb. Amenability for treatmentc. Pertinent information for court consideration supported in body of report, including what lead to conclusions about risk level and amenability for treatment <p>IV. Referral Information and Nature of Evaluation</p> <ul style="list-style-type: none">a. How referred for evaluationb. Structure of the evaluationc. Applicable statutes <p>V. Confidentiality</p> <ul style="list-style-type: none">a. Evaluation confidentiality and how explained to examineeb. Notice and Consent for Psychosexual Evaluation <p>VI. Sources of Information</p> <ul style="list-style-type: none">a. List of tests and measuresb. Collateral information, interviews, other relevant sources <p>VII. Mental Status Examination and Psychological Symptoms</p> <ul style="list-style-type: none">a. Standard mental status information and relevant psychological symptomsb. Appearance and behavior observation <p>VIII. Background, Criminal and Social History</p> <ul style="list-style-type: none">a. Developmental historyb. Interpersonal relationshipsc. Medical historyd. Mental health history | <ul style="list-style-type: none">e. History of harm to self or othersf. Education, employment, and/or militaryg. Prior and current criminality or delinquencyh. Substance use and/or abusei. Prior responses to juvenile or adult justice system or other interventionsj. Family of origin historyk. Recreation/leisurel. Cultural/spiritualm. Capacity to identify problems/solutions <p>IX. Description of Current Offense(s)</p> <p>X. Sexual History Behavior</p> <ul style="list-style-type: none">a. Sexual development, early experiencesb. History of age-appropriate, consensual, non-coercive sexual relationshipsc. History of being subjected to non-consensual or coercive sexual behaviorsd. Historical and current sexual interests, fantasies, practices/behaviorse. Sexual functioning, sexual dysfunctionf. Use of sexually oriented materials or servicesg. Prior sexual offender treatmenth. Intent related to treatmenti. Offense-related sexual arousal, interests and preferencesj. Evidence or characteristics of paraphiliask. History of sexually abusive behaviors, documented and unreportedl. Number of victims identified through credible records or sourcesm. Current and previous victim-related factorsn. Contextual elements of sexually abusive behaviorso. Attitudes supportive of sexually abusive behaviorp. Demonstrated level of insight, self-disclosure, denial, and minimization relative to sexually abusive behavior |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

- XI. Psychological Test Results (Personality and mood, and Intellectual functioning measures are required; remaining categories are recommended but at the discretion of the evaluator)
 - a. Personality and mood – must use at least one of
 - i. MMPI-2
 - ii. MCMI-III
 - iii. PAI
 - b. Intellectual functioning – must use one of
 - i. Shipley (preferred)
 - ii. WAIS-IV (preferred)
 - iii. Other validated assessment tool
 - c. Psychopathic tendencies – (recommended but optional) such as
 - i. PPI-R
 - ii. PCL-R (Hare)
 - iii. Other validated assessment tool
 - d. Substance abuse – (recommended but optional) such as
 - i. SASSI-3
 - ii. GAIN-I (core)
 - iii. Other validated assessment tool
 - e. Additional optional testing, but not exclusive to
 - i. STAXI-2 (anger)
 - ii. HCR-20
 - iii. SVR-20
 - iv. LSI-R
- XII. Current DSM Diagnosis
- XIII. Specialized Risk Assessment Measures and Measures of Sexual Behavior

All risk assessments must be used in accordance with the assessment’s standards. He evaluator will determine whether use of a specific assessment is appropriate based on the individual case. If a required assessment is not used, the provider must explain why.

 - a. Risk assessment *must include*
 - i. STATIC-99 or STATIC-99R
 - ii. STABLE 2007
 - b. Measurement of sexual behavior *must include*
 - i. MSI-II

- c. Additional optional measures, but not exclusive to
 - i. ACUTE 2007
 - ii. SORAG
 - iii. VASOR
 - iv. Viewing time measure (e.g. Abel screen)
 - v. Phallometric testing
 - vi. Polygraph
- XIV. Risk Factors
 - a. Static Factors
 - b. Dynamic Factors
 - c. *Attach Sex Offender Risk and Protective Factors Checklist*
- XV. Risk Level
 - a. Estimated classification – Low, Moderate or High
- XVI. Potential for Future Harm (optional but encouraged)
 - a. Level of awareness or insight into potential harm/impact on the victim(s) and others
 - b. Most likely victim type and potential harm they could experience based on literature
- XVII. Amenability for Intervention and Treatment and Recommended Treatment Focus
- XVIII. Additional Suggestions for Management (optional)

SEX OFFENDER RISK AND PROTECTIVE FACTORS CHECKLIST

The evaluation must support the identification or rule-out of any risk or protective variable identified on this checklist.

STATIC RISK FACTORS

- ___ Offender's age under 35
- ___ History of paraphilia(s)
- ___ History of impulsiveness -or- recklessness
- ___ History of major mental illness (including mood disorder -or- personality disorder -or- psychotic disorder)
- ___ History of substance abuse or dependency as an adolescent
- ___ History of substance abuse or dependency as an adult
- ___ Having ever had a sexual victim that was not related
- ___ Having ever had a sexual victim that was a stranger (knew less than 24 hours)
- ___ Having ever had a sexual victim that was a male
- ___ Having one prior conviction for a sexual offense -or- one to two prior charges for sexual offenses with no convictions
- ___ Having two to three prior convictions for sexual offenses -or- three to five prior charges for sexual offenses with no convictions
- ___ Having four or more prior convictions for sexual offenses -or- six or more prior charges for sexual offenses with no convictions
- ___ History of high density of sexual offending
- ___ History of a conviction for a non-contact sexual offense
- ___ History of multiple sexual offense behaviors and types
- ___ History of grooming a sexual victim
- ___ History of childhood aggression or violence problems prior to age of 15
- ___ History of aggression or violence at and/or after age 15 (including adulthood)
- ___ Victim being physically injured in the course of the sexual offense being committed
- ___ Use of a weapon or threat of death occurring during the sexual offense
- ___ History of family of origin instability associated with the offender not living with parents until age 16
- ___ History of family of origin instability associated with family members having mental illness and/or substance abuse issues
- ___ History of family of origin instability associated with family members having antisocial or criminal issues

- ___ History of family of origin instability associated with the offender witnessing abuse of other family members
- ___ History of the offender experiencing abuse (physical, emotional, or sexual)
- ___ Offender having no history of a long term relationship (never living with lover/romantic partner for two years or longer)
- ___ History of antisocial influences or affiliations
- ___ History of problems with school performance
- ___ History of employment issues
- ___ History of discipline issues in elementary school (1st through 8th grade)
- ___ History of discipline Issues in high school (9th through 12th grade)
- ___ Displaying antisocial behavior prior to the age of 15
- ___ Displaying antisocial behavior at and/or after age 15 (including adulthood)
- ___ Having a prior arrest history that includes four or more convictions prior to the index sexual offense
- ___ History of discipline issues while incarcerated
- ___ Psychopathy
- ___ History of treatment failure
- ___ History of supervision failure

DYNAMIC RISK FACTORS

- ___ Unstable or untreated major mental illness (including mood disorder -or- personality disorder -or- psychotic disorder)
- ___ Negative mood -or- anger issues
- ___ Poor emotional regulation
- ___ Poor impulse control
- ___ Fragile narcissism
- ___ Poor insight
- ___ High stress lifestyle
- ___ Unstable or untreated substance abuse or dependency
- ___ Unstable or untreated paraphilia(s)
- ___ Emotional congruence with children
- ___ Attitudes supporting sexual offending
- ___ Adversarial sexual beliefs
- ___ Sexual entitlement
- ___ Sexual preoccupation

- ___ Deviant sexual preference
- ___ Sex as a method for coping
- ___ Extreme minimization of a sexual offense
- ___ Victim blaming
- ___ Loneliness or social rejection
- ___ Relationship instability
- ___ Problems developing and/or maintaining pro-social relationships
- ___ Problems avoiding negative and/or antisocial relationships
- ___ Hostile beliefs toward women
- ___ Insufficient fear of punishment or consequences
- ___ Pride in delinquent or antisocial behavior
- ___ Failure to recognize risk to re-offend
- ___ Callousness or lack of concern for others
- ___ Beliefs that support the manipulation of others
- ___ Attitudes supporting an antisocial lifestyle
- ___ Propensity to break rules
- ___ Poor problem solving skills
- ___ Negative attitudes towards treatment -or- unresponsiveness to treatment -or- rejection of treatment
- ___ Negative attitudes towards supervision -or- unresponsiveness to supervision -or- rejection of supervision
- ___ Lack of feasible plans to prevent offender from re-offending

ADULT SEX OFFENDER PROTECTIVE FACTORS

The following is a list of protective factors which can reduce an examinee's risk to re-offend. Some of these protective factors are directly supported by empirical research, and some are inferred from the evolving psychological literature. Many professionals in the field commonly consider these protective factors when estimating risk, and Idaho's psychosexual evaluators are encouraged to utilize this list to assist in determining an examinee's estimated risk to re-offend.

GENERAL

Age over 40

Age over 60 (stronger protective variable than age 40)

FAMILY OF ORIGIN

Having a stable childhood with no family history of psychological or substance abuse issues

Having no history of a family with criminal issues

Having no history of criminal peer relations

Having no history of abuse (physical, emotional, or sexual)

Having a family that represents pro-social behavior

SCHOOL AND EMPLOYMENT

Having no history of discipline issues in school

Having no history of problems with school performance (grades, peers, completion of school)

Functioning well in an employment setting (maintaining long term employment, no current conflicts with peers or authority, advancement in career)

Functioning well in a school setting

MENTAL

Having no history of serious mental health issues

Having no history of impulsiveness or recklessness

Having emotional issues that are well managed

VIOLENCE

Having no history of violence

SUBSTANCE ABUSE

Having no history of substance abuse

Maintaining ongoing sobriety (if examinee has a history of substance abuse)

SEXUAL

Having no prior history of sexual offense

Having a satisfying and appropriate sexual relationship

RELATIONAL

Having a history of living with lover for two years of longer

Having a current romantic relationship that was functioning well

Engaging pro-social people in support network

Ability to avoid negative relationships

CRIMINAL

Having no prior or very limited arrest history

Having pro-social attitudes

Having no history of criminal peer relations

TREATMENT AND SUPERVISION

Having no history of mental health, substance abuse or sexual offender treatment failure

Having no history of supervision failure

Having a positive attitude toward treatment

Having a positive attitude toward supervision

Successful completion of treatment

Successful completion of supervision

RECREATIONAL

Engaging in healthy, pro-social recreational activities

Having recreational activities that are effective at reducing stress

NOTICE AND CONSENT FOR PSYCHOSEXUAL EVALUATION

A psychosexual evaluation is being performed pursuant to guidelines and standards established in Sections 18-8314 and 18-8316, Idaho Code. In order to conform to Idaho regulations, the psychosexual evaluation must include certain topics of a personal and detailed nature which may be difficult to discuss. The psychosexual evaluation will also include several psychological tests.

(Initial each statement of understanding below)

___ I understand that the results of the psychosexual evaluation will be released to relevant individuals which may include a defense attorney, prosecuting attorney, the court, presentence investigator, probation or parole officer, treatment provider or other relevant people. Release of the psychosexual evaluation is not automatic and requires authorization. Authorization for release of the psychosexual evaluation may come from the court, the Commission for Pardons and Parole, or through a plea agreement with the prosecuting attorney, even if I don't want the results of the psychosexual evaluation released.

___ I understand that if it has only been authorized to release the psychosexual evaluation to my defense attorney or myself, then only my defense attorney and myself will receive a copy from the evaluator. However, if the evaluator receives an order from the court indicating the psychosexual evaluation must be released to other individuals, the evaluator must release the report. Other individuals may include, but are not limited to, the prosecuting attorney, the court, presentence investigator, probation or parole officer, treatment provider, or other relevant people.

___ I understand that I may sign a release of information form directing the evaluator to release the psychosexual evaluation and the evaluator will likely release the psychosexual evaluation to the individual indicated on the form. Additionally, if I agree to release the psychosexual evaluation as a condition of probation or parole, the psychosexual evaluation will likely be released to my probation or parole officer.

___ I understand that there are limits to confidentiality in the psychosexual evaluation process. The evaluator may be obligated under Idaho law to report newly disclosed acts of abuse or crimes of violence to appropriate authorities.

___ I understand that in order to write the psychosexual evaluation, the evaluator may consider details of past behavior that led to my arrest, details from my history, psychological test results, results from specialized assessment measures designed to evaluate sexual offenders, police reports, criminal history, and other relevant documents. Additionally, polygraph results, interviews with victim(s), and interviews with other relevant people could be considered. The evaluator could also consider relevant research for making report conclusions.

___ I understand the psychosexual evaluation may discuss the potential harm I could cause another individual in the community (this might include my household, neighborhood, county, etc.), and discuss what types of people in the community I may engage with if I was to commit a sexual

offense in the future (such as males, females, children, adolescents, adults, vulnerable people, or others).

___ I understand the psychosexual evaluation is a process intended to estimate a person's risk to commit a sexual offense in the future. After completing the psychosexual evaluation, the evaluator may estimate me as being either a low, moderate, or high risk to reoffend.

___ I understand the psychosexual evaluation is a process to determine my amenability for treatment. Amenability for treatment can be understood as my willingness to participate in treatment, motivation for treatment, likelihood to understand treatment, and likelihood to make changes through treatment.

___ I understand the psychosexual evaluation may also provide recommendations on how I could be supervised if I am living in the community. Supervision could come from a probation or parole officer, treatment provider, or other.

___ I understand the psychosexual evaluation does not make a recommendation for sentencing by the court, but the conclusions made in the psychosexual evaluation could influence the sentencing process. Conclusions could also influence treatment requirements and probation or parole conditions.

___ I understand the psychosexual evaluation conclusions could impact sexual offender registration.

___ I understand that I have the constitutional right to refuse to participate in any or all aspects of the psychosexual evaluation.

___ I have discussed my participation in this psychosexual evaluation including the effect on my right against self-incrimination with a criminal defense attorney and agree to proceed.

___ I have been provided the opportunity to discuss my participation in this psychosexual evaluation with a criminal defense attorney and I agree to proceed without having such discussion.

Print Name

Signature

Parent or Guardian (if applicable)

Date

Witness

Date

**IDAHO SEX OFFENDER TREATMENT
MONTHLY STATUS UPDATE**

Date: _____ Officer Name: _____
 Client Name (Last, First): _____ DOC Number: _____
 Treatment Fees: Current Overdue Past Due Amount (if applicable)

 Monthly Treatment Participation

Current Status: Attending Not Attending Late/Missed Appts Discharged Unsuccess Disch
 Participation: Active Minimal Disengaged
 Attitude/Behavior: (Rate 1 to 5: 1= Positive, 3= Fair, 5= Poor) 1 2 3 4 5
 Denial: (Rate 1 to 5: 1= No offense denial, 3= Some denial present, 5= Definitely denies) 1 2 3 4 5
 Minimization: (Rate 1 to 5: 1= No minimization present, 3= Some minimization present, 5= Definite minimization present) 1 2 3 4 5

Treatment Progress Concerns:

 Dynamic Risk Factors

Acute Dynamic Risk Factors: (Rate 0 to 5: 0=Not present, 1=No concern, 3=Possible issue, 5=High risk) (also note last report's rating on line prior to each risk factor)

| | | | | | | | | | | | | | |
|----------------------------------|---|---|---|---|---|---|------------------------------------|---|---|---|---|---|---|
| ___ Negative Mood | 0 | 1 | 2 | 3 | 4 | 5 | ___ Anger | 0 | 1 | 2 | 3 | 4 | 5 |
| ___ Substance Abuse | 0 | 1 | 2 | 3 | 4 | 5 | ___ Victim Access | 0 | 1 | 2 | 3 | 4 | 5 |
| ___ Sexual Preoccupation | 0 | 1 | 2 | 3 | 4 | 5 | ___ Poor Hygiene | 0 | 1 | 2 | 3 | 4 | 5 |
| ___ Sees Self as No Risk | 0 | 1 | 2 | 3 | 4 | 5 | ___ Collapse of Family Support | 0 | 1 | 2 | 3 | 4 | 5 |
| ___ Collapse of Residence | 0 | 1 | 2 | 3 | 4 | 5 | ___ Collapse of Employment | 0 | 1 | 2 | 3 | 4 | 5 |
| ___ Noncompliance with Treatment | 0 | 1 | 2 | 3 | 4 | 5 | ___ Noncompliance with Supervision | 0 | 1 | 2 | 3 | 4 | 5 |

Stable Dynamic Risk Factors: (Rate 0 to 5: 0=Not present, 1=No concern, 3=Possible issue, 5=High risk) (also note last report's rating on line prior to each risk factor)

| | | | | | | | | | | | | | |
|----------------------------------|---|---|---|---|---|---|------------------------------------|---|---|---|---|---|---|
| ___ Intimacy Deficits | 0 | 1 | 2 | 3 | 4 | 5 | ___ Conflicts in Relationships | 0 | 1 | 2 | 3 | 4 | 5 |
| ___ Deviant Sexual Arousal | 0 | 1 | 2 | 3 | 4 | 5 | ___ Poor Self Regulation | 0 | 1 | 2 | 3 | 4 | 5 |
| ___ Pro-Offending Attitudes | 0 | 1 | 2 | 3 | 4 | 5 | ___ Negative Social Supports | 0 | 1 | 2 | 3 | 4 | 5 |
| ___ Noncompliance with Treatment | 0 | 1 | 2 | 3 | 4 | 5 | ___ Noncompliance with Supervision | 0 | 1 | 2 | 3 | 4 | 5 |

Risk Factor Comments:

New Potential or Actual Criminal Disclosures: (misdemeanor or felony)

Additional Comments/Concerns:

Therapist/Title: _____

**IDAHO SEX OFFENDER TREATMENT
QUARTERLY PROGRESS REPORT**

Date: _____ Officer Name: _____

Client Name (Last, First): _____ DOC Number: _____

Quarter Being Reported: _____

 Number of groups attended this quarter:
 Number of individual sessions attended this quarter:
 Current treatment status:
 Outstanding balance (if applicable):

Last Polygraph: _____ Next Polygraph: _____

Specific issues addressed in treatment:

Treatment compliance and progression:

Life stresses, areas of concern or issues:

Additional comments/concerns:

Dynamic Risk Factors

Acute Dynamic Risk Factors: (Rate 0 to 5: 0=Not present, 1=No concern, 3=Possible issue, 5=High risk)

| | | | | | | | | | | | | | |
|------------------------------|---|---|---|---|---|---|--------------------------------|---|---|---|---|---|---|
| Negative Mood | 0 | 1 | 2 | 3 | 4 | 5 | Anger | 0 | 1 | 2 | 3 | 4 | 5 |
| Substance Abuse | 0 | 1 | 2 | 3 | 4 | 5 | Victim Access | 0 | 1 | 2 | 3 | 4 | 5 |
| Sexual Preoccupation | 0 | 1 | 2 | 3 | 4 | 5 | Poor Hygiene | 0 | 1 | 2 | 3 | 4 | 5 |
| Sees Self as No Risk | 0 | 1 | 2 | 3 | 4 | 5 | Collapse of Family Support | 0 | 1 | 2 | 3 | 4 | 5 |
| Collapse of Residence | 0 | 1 | 2 | 3 | 4 | 5 | Collapse of Employment | 0 | 1 | 2 | 3 | 4 | 5 |
| Noncompliance with Treatment | 0 | 1 | 2 | 3 | 4 | 5 | Noncompliance with Supervision | 0 | 1 | 2 | 3 | 4 | 5 |

Stable Dynamic Risk Factors: (Rate 0 to 5: 0=Not present, 1=No concern, 3=Possible issue, 5=High risk)

| | | | | | | | | | | | | | |
|------------------------------|---|---|---|---|---|---|--------------------------------|---|---|---|---|---|---|
| Intimacy Deficits | 0 | 1 | 2 | 3 | 4 | 5 | Conflicts in Relationships | 0 | 1 | 2 | 3 | 4 | 5 |
| Deviant Sexual Arousal | 0 | 1 | 2 | 3 | 4 | 5 | Poor Self Regulation | 0 | 1 | 2 | 3 | 4 | 5 |
| Pro-Offending Attitudes | 0 | 1 | 2 | 3 | 4 | 5 | Negative Social Supports | 0 | 1 | 2 | 3 | 4 | 5 |
| Noncompliance with Treatment | 0 | 1 | 2 | 3 | 4 | 5 | Noncompliance with Supervision | 0 | 1 | 2 | 3 | 4 | 5 |

Therapist/Title: