

## **APPENDIX B**

### **RFP STATEMENT OF WORK**

#### **Projects for Assistance in Transition from Homelessness (PATH) Program**

## TABLE OF CONTENTS

<b>SECTION</b>	<b>TITLE</b>	<b>PAGE</b>
1.0	OVERVIEW .....	1
2.0	POPULATION TO BE SERVED .....	1
3.0	SERVICES TO BE PROVIDED .....	2
4.0	EVIDENCE-BASED PRACTICES USED TO PROVIDE SERVICES .....	4
5.0	DISENROLLMENT FROM THE PATH PROGRAM.....	5
6.0	SERVICE DELIVERY SITES .....	5
7.0	SERVICE DAYS/HOURS .....	6
8.0	DAILY OPERATIONS.....	6
9.0	STAFFING .....	6
10.0	PARTNERSHIPS .....	9
11.0	COMMUNITY AND CLIENT INVOLVEMENT .....	9
12.0	PATH FUNDING MATCH REQUIREMENTS.....	9
13.0	DATA COLLECTION AND REPORTING REQUIREMENTS .....	10
14.0	ADMINISTRATIVE TASKS.....	11
15.0	QUALITY MANAGEMENT, CLIENT SATISFACTION SURVEYS, PROGRAM MONITORING, POLICIES AND PROCEDURES AND DATA COLLECTION PLANS.....	12
16.0	CONTRACT DISCREPANCY REPORT .....	14
17.0	INFORMATION TECHNOLOGY.....	14
18.0	GREEN INITIATIVES .....	15
19.0	PERFORMANCE REQUIREMENTS SUMMARY.....	16

**STATEMENT OF WORK (SOW)****Projects for Assistance in Transition from Homelessness (PATH) Program****1.0 OVERVIEW**

The Stewart B. McKinney Homeless Assistance Amendments Act of 1990 created the Projects for Assistance in Transition from Homelessness (PATH) program. The PATH program is administered by the U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS), Homeless Programs Branch. The PATH program is a Federal formula grant distributed to each State, the District of Columbia, Puerto Rico, Guam, the Northern Mariana Islands, American Samoa, and Virgin Islands. In California, the State Department of Health Care Services administers the PATH funding and distributes the funds to the participating Counties by formula.

Each year, CMHS issues a Request for Applications (RFA) that the States and territories prepare and submit under the signature of the governor or designees of the State or territory. The RFA includes Intended Use Plans that describe how PATH funding will be used to deliver PATH allowable services and Federal Grant Detailed Program Budgets. The Los Angeles County Department of Mental Health (DMH) submits an RFA to the State annually.

The Federal intent of the PATH program is to provide outreach and engagement and case management to individuals who are literally homeless or at imminent risk for homelessness that are not being served by the mental health system. The primary goals of the PATH program are to assist individuals in accessing mental health services and housing. In accordance with the 1993 Government Performance Results Act, PATH programs are held accountable for performance results including measuring what the program actually accomplished with the funding expended.

**1.1 Glossary of Terms and Acronyms**

Specialized terms, roles, groups and departments/agencies referenced throughout this SOW are defined in Appendix C, Exhibit 1 – Glossary of Terms and Acronyms.

**2.0 POPULATION TO BE SERVED**

The target population for DMH's PATH program is individuals 18 and over who have a Severe Mental Illness (SMI) and are homeless and have high vulnerability as determined by a standardized assessment tool. Individuals with high vulnerability most likely have co-occurring mental health, physical health

conditions and/or substance use disorders and other factors that place them at risk such as length of time homeless and age.

Contractor is required to enroll a minimum of 55 percent of the individuals who receive outreach and engagement services into their PATH program. Contractor is required to maintain a 1:15 staff to client ratio for PATH program enrolled clients.

Contractor is required to use a standardized assessment tool as determined by DMH to identify individuals who meet DMH's PATH program target population. The assessment tool shall be used to measure client vulnerability and to prioritize and match individuals to the most appropriate permanent supportive housing.

### **3.0 SERVICES TO BE PROVIDED**

The Contractor is required to implement PATH program services by a field-based Multidisciplinary Integrated Team (MIT) within 30 days of the commencement of the contract. The following services shall be provided:

#### **3.1 Outreach and Engagement shall include:**

- Informing individuals who are homeless about PATH program services.
- Establishing trusting relationships through an intensive, sustained and consistent process. Through these relationships the goal is to engage PATH eligible individuals by helping them understand how PATH services can assist them with transitioning from homelessness to having a home and for the client to agree to enroll in the PATH program to receive on-going services.

3.1.1 A team with a minimum of two staff is required to provide outreach and engagement services. Services to address immediate and basic needs may be provided during outreach and engagement.

3.1.2 Contractor is required to provide clear documentation supporting the following:

- Reason for terminating outreach and engagement for individuals who meet the target population but do not enroll in the PATH program.
- The number of contacts made to engage the individual.
- The number of attempts to locate individuals who became missing during outreach.

#### **3.2 Assessments shall include:**

- Standardized assessment of vulnerability as determined by DMH.

- PATH program Eligibility and Needs Assessment.
- DMH Adult Initial Assessment.
- Critical Time Intervention Assessment.

3.3 Housing services shall include:

- Participating in other local community efforts to end homelessness such as the Coordinated Entry System (CES) to identify and locate permanent supportive housing.
- Assisting clients with obtaining any documentation needed to apply for housing.
- Assisting clients with completing housing applications and accompanying clients to meetings with property managers and/or housing authorities.
- Assisting clients with submitting housing applications.
- Tracking the status of housing applications and providing any necessary advocacy.
- Assisting clients with accessing funding for security deposits and one-time rental payments to prevent eviction, if necessary.
- Assisting clients with accessing furniture and other household goods.
- Assisting clients with moving into housing.
- Using Critical Time Intervention (CTI) to provide the ongoing supports and advocacy to ensure clients retain their housing.

3.4 PATH case management shall include:

Assisting clients with referrals and confirming attainment of the referrals to one or more of the following based on client need/desire:

- Community mental health services.
- Substance abuse/use treatment.
- Primary health services.
- Income assistance/benefits establishment.
- Job training.
- Educational services.
- Employment services.

Assisting a client with a referral includes assisting with **all** of the following:

- Obtaining the application/intake packet **and**
- Obtaining any supporting documents needed **and**
- Completing the application/intake packet **and**
- Filing the application/intake packet.

The Contractor is required to assist 100% of clients with referrals they request/need. Contractor is required to demonstrate that 80% of clients who requested/needed a referral attained the referral.

3.5 Transportation shall include:

- Transporting clients to services to which they have been referred.
- Accompanying clients on public transportation to ensure the assistance needed to attain services.

3.6 Medication Support shall include:

- Prescribing, administering and dispensing psychiatric medications.
- Monitoring the client's use of psychiatric medication.
- Providing medication education.

3.7 Crisis Intervention shall include:

- Assessing acute psychiatric and other emergency situations.
- Initiating hospitalization.

3.8 Individual Therapy/Counseling shall include:

- Using short-term solution and trauma focused interventions to assist clients to manage symptoms, understand problematic behaviors and to develop and use more adaptive behaviors.

3.9 Life Skills Training shall include:

- Using habilitation interventions to assist clients to gain, restore, improve or maintain daily independent living including money management, social/leisure and personal hygiene skills.

3.10 Substance Abuse Treatment shall include:

- Using interventions that assist clients to reduce the harm and risks associated with using substances.
- Providing referrals to residential and detoxification programs.
- Providing referrals to self-help groups and other community supports.

#### 4.0 EVIDENCE-BASED PRACTICES (EBPs) USED TO PROVIDE SERVICES

**The following EBPs with adherence to fidelity are required to be used when providing PATH program services:**

- Critical Time Intervention (CTI) to provide short-term intensive services for about nine (9) months to assist individuals' transition from homelessness to housing. The goals of CTI are to help individuals stabilize in housing and to

link them to community-based services including a medical home, longer term mental health services and other supportive services.

- Motivational interviewing that is goal-directed and client-centered and elicits behavioral change by helping individuals to explore and resolve ambivalence.
- Housing First to assist individuals attain the housing of their choice without any prerequisites/conditions for psychiatric treatment or sobriety. Individuals do not have to demonstrate “housing readiness” as evidenced by sobriety, psychiatric treatment compliance and/or living successfully in transitional housing prior to being housed.
- Harm Reduction that uses specific strategies that are non-judgmental and focus on the prevention of harm and risks associated with a behavior rather than on requiring adherence to a particular treatment plan. Individuals are allowed to make their own choices and are not treated adversely on the choices made.
- Although not an Evidence-Based Practice, staff are required to complete Preparing Disability Claims training or a similar training as determined by DMH and to use the information provided in this training when assisting clients to apply for any Social Security benefits.

## **5.0 DISENROLLMENT FROM THE PATH PROGRAM**

Disenrollment from the PATH program shall occur when the Contractor has lost contact with the client despite repeated efforts to locate them, the client is repeatedly refusing services over a period of approximately 90 days, the client will be incarcerated over 90 days or at the termination of CTI because the client has successfully transitioned into permanent supportive housing and has been linked to other community-based supportive services including longer term mental health services and a medical home.

Contractor is required to link clients that are disenrolled from their PATH program who continue to need intensive services to their Full Service Partnership (FSP), Integrated Mobile Health Team (IMHT) or other intensive field-based program. If a client no longer needs intensive services as determined by an assessment, Contractor is required to link the client to another one of their field-based mental health programs that meets the client’s assessed needs. If Contractor does not have a mental health program that meets the client’s assessed needs, they are required to provide services until the client is successfully linked to another field-based mental health program that can meet the client’s needs.

## **6.0 SERVICE DELIVERY SITES**

Contractor is required to provide all services in the field unless otherwise approved by DMH. Outreach and engagement shall be provided only to individuals who are street homeless including those who are living in encampments, abandoned buildings and other outdoor areas. Contractor shall also provide outreach and engagement to specific individuals as requested by DMH, local businesses, law enforcement and other community members/agencies.

## **7.0 SERVICE DAYS/HOURS**

Contractor is required to provide the services described in Section 2.0, in person, 52 weeks a year, at a minimum of 40 hours a week over six days including evenings and/or early mornings. PATH staff is required to be available after regular business hours to speak with landlords and to address client crisis and other emergency situations.

## **8.0 DAILY OPERATIONS**

Contractor's PATH MIT is required to adhere to an operational schedule that includes a team meeting a minimum of three times a week. The consulting psychiatrist/psychiatric physician assistant/psychiatrist nurse practitioner shall participate in the team meeting at a least once a week. The team meeting shall be facilitated by a licensed mental health professional. During the team meeting, the staff at a minimum will discuss the mental health, physical health, case management, housing and substance use treatment needs of each individual receiving outreach and engagement as well as other services.

Staff is required to communicate with each other throughout the day to ensure that the service needs of each individual are met.

## **9.0 STAFFING**

### **9.1 General Staffing Requirements**

Contractor shall ensure that staffing conforms to the following staff and volunteer requirements:

- 9.1.1 Criminal Clearances: Contractor shall ensure that criminal clearances and background checks have been conducted for all Contractor's staff prior to beginning and continuing work under any resulting Contract. The cost of such criminal clearances and background checks is the responsibility of

the Contractor whether or not the Contractor's staff passes or fails the background and criminal clearance investigations.

9.1.2 Language Ability: Contractor's personnel who are performing services under this Contract shall be able to read, write, speak, and understand English in order to conduct business with County.

9.1.2.1 Contractor shall have a plan to provide PATH services to clients whose primary language is not English.

9.1.3 Cultural Competency: The Contractor shall ensure all staff providing PATH program services are able to provide culturally competent services in a manner that effectively responds to differences in cultural beliefs, behaviors, learning, and communication styles within the communities in which services will be provided.

9.1.4 Driver's License: Contractor shall maintain copies of current driver's licenses, including current copies of proof of auto insurance of staff.

9.1.5 Driving Record: Contractor shall maintain copies of driver's Department of Motor Vehicles (DMV) printouts for all Contractors' drivers providing service under this Contract. Reports shall be available to DMH on request. The County reserves the option of doing a DMV check on Contractor's drivers once a year.

9.1.6 Education and Experience: Contractor shall be responsible for securing and maintaining staff that possess sufficient experience and expertise required for providing services as reflected in this SOW.

9.1.7 Staff Training: Contractor shall provide orientation and training to all staff providing PATH services of their expected duties prior to their delivering services.

9.1.7.1 Contractor shall have a PATH specific training curriculum that is used to provide staff training.

9.1.7.2 Contractor shall train all staff including, interns and volunteers, in the areas of Health Insurance Portability & Accountability Act (HIPAA), sexual harassment, and cultural competency as provided in Appendix A (Sample LE Contract), Paragraph 9 (STAFF TRAINING AND SUPERVISION).

9.1.8 Documentation: Contractor shall maintain documentation in the personnel files of all staff. This documentation shall include: (1) all training hours and topics; (2) copies of resumes, degrees, and professional licenses; and (3) current criminal clearances.

9.1.9 Rosters: Contractor shall provide DMH, at the beginning of each Contract term and within 30 days of any staff change(s), a roster of all staff that includes: (1) name and positions; (2) work schedule; and (3) fax and telephone numbers.

9.1.10 Changes in Staffing: Contractor shall advise DMH in writing of any change(s) in Contractor's key personnel at least 24 hours before proposed change(s), including name and qualifications of new personnel. Contractor shall ensure that no interruption of services occurs as a result of the change in personnel.

## 9.2 PATH STAFFING REQUIREMENTS

The following full time staff is required to be part of the field-based MIT at a minimum:

9.2.1. A full time licensed mental health professional whose scope of practice includes making a Diagnostic Statistical Manual V diagnosis and who has a minimum of one (1) year experience providing services to individuals who have a mental illness and who are homeless. The licensed mental health professional should be trained in motivational interviewing and harm reduction treatment modalities.

9.2.2 A full time certified substance abuse counselor with a minimum of six (6) months of experience providing services to individuals who have a mental illness and who have used

motivational interviewing and harm reduction treatment modalities.

9.2.3 A full time case manager with a Bachelor's degree and a minimum of two (2) years experience providing mental health services to individuals who have a mental illness and who are homeless.

9.2.4 A full time peer advocate with lived mental health experience.

The following part time staff is required to be part of the field-based MIT:

9.2.5 A part time consulting psychiatrist/psychiatric physician's assistant/psychiatric nurse practitioner.

9.2.6 A part time Registered Nurse (RN). The design of the PATH program is predicated on a proposed in-kind RN by the County pending appropriation of funding for this purpose.

## 10.0 PARTNERSHIPS

Contractor is required to establish and maintain partnerships through a Memorandum of Understanding (MOU) with one or more physical health providers in close proximity to the targeted area of service provision to streamline linkage to physical health care.

## 11.0 COMMUNITY AND CLIENT INVOLVEMENT

11.1 Contractor is required to participate in local Continuum of Care meetings and other local planning meetings that address ending homelessness.

11.2 Contractor is required to participate in other local community homeless outreach teams such as CES teams.

11.3 Contractor is required to involve clients who have received or are currently receiving PATH program services in one of the following ways:

- As a participant in the agency's planning, implementation and evaluation of PATH funded services.
- As a member of the agency's governing or formal advisory board(s).
- As an employee.

**12.0 PATH FUNDING MATCH REQUIREMENTS**

Contractor is required to match one dollar (\$1) of State or local resources for every three dollars (\$3) of Federal PATH funds received. These non-Federal contributions, also known as match funds, may be in cash or in-kind. The in-kind match may only be associated with the costs of any of the following:

- Personnel and consultants that provide services to the PATH program target population.
- Personnel that oversee or provide clerical support to the PATH program.
- PATH program office/outreach supplies.
- PATH program staff mileage/telephones.

PATH funds cannot be used as Medi-Cal match or for administrative overhead costs. PATH match funds cannot be used as match for any other funding such as Medi-Cal.

**13.0 DATA COLLECTION AND REPORTING REQUIREMENTS**

Contractor is required to use the Homeless Management Information System (HMIS) and any other databases as determined by DMH.

Contractor is required to collect, enter, manage and submit the following data required by SAMHSA/PATH and the Department of Health Care Services on a quarterly and annual basis:

- The total count of individuals who received any PATH funded service.
- The total number of individuals (unduplicated) who were outreached.
- The total number of individuals who were outreached and who became enrolled.
- The total number of individuals who could not be enrolled because they were not homeless and did not have a mental illness or a co-occurring mental health and substance use disorder.
- The total number of enrolled individuals.
- The total number of times contacts are made with individuals who are being outreached.
- The total number of services provided to all the enrolled clients.
- The total number of referrals given to all the enrolled clients. This is an aggregate total. It includes every type of referral given to each enrolled client.
- Housing status at first outreach contact.

- Total number of times each service was provided and the total number of enrolled clients who were provided the service.
- The total number of times each type of referral was made, the number of clients who received assistance with each type of referral and the number of clients that attained each type of referral.
- Demographics for each individual to whom outreach is provided and for each enrolled client.

Contractor is also required to submit any other data as required by DMH and at the frequency required by DMH.

#### **14.0 ADMINISTRATIVE TASKS**

##### 14.1 Record Keeping:

Contractor is required to maintain a record of the following for individuals who receive PATH program outreach services:

- The name and demographics of the individual (if known) to whom outreach was provided.
- The date outreach was provided.
- The location of the outreach. (name of major cross streets, park, shelter/community resource center)
- PATH program eligibility.
- If the individual agrees to be enrolled in the PATH program.

Contractor is required to maintain a record for each PATH program enrolled client. The record shall contain the following and any other applicable documentation:

- A PATH program Eligibility and Needs Assessment.
- Consent for Services.
- An Adult Initial Assessment.
- A Client Care Coordination Plan that is reviewed and re-written every three months.
- A Housing Stabilization Plan.
- Progress Notes.
- A PATH program Discharge Summary.

14.2 Cooperation: Contractor shall work cooperatively with DMH PATH program administrative staff.

14.3 Meetings: Contractor shall send a representative to attend PATH program provider and/or other meetings as determined by DMH.

14.4 Contractor's PATH Manager: Contractor's designated PATH Program Manager shall have full authority to act for the Contractor on all matters relating to the daily operation of this Contract and shall be accessible via telephone, e-mail, or fax during regular business hours to respond to County inquiries and/or concerns.

14.5 Computer and Information Technology Requirements: Within 30 days of commencement of the Contract, Contractor shall possess or acquire a computer system with the capability to comply with the terms of the Contract, with sufficient hardware and software and on-site maintenance for the entire term of this contract.

**15.0 QUALITY MANAGEMENT, CLIENT SATISFACTION SURVEYS, PROGRAM MONITORING, POLICIES AND PROCEDURES AND DATA COLLECTION PLANS**

15.1 Quality Management

The Contractor shall establish and utilize a comprehensive written Quality Management Program and Plan including Quality Assurance and Quality Control processes to ensure the required services are provided at a consistently high level of service throughout the term of the Contract. The Plan shall be submitted to DMH for review and approval prior to the Contract start date. The Plan shall be effective on the Contract start date and shall be updated and re-submitted for DMH approval as changes occur.

15.1.1 The Plan will include an identified monitoring system covering all the services listed in this SOW. The system of monitoring to ensure that contract requirements are being met will include:

15.1.1.1 Activities to be monitored, frequency of monitoring, samples of forms to be used in monitoring, title/level and qualifications of personnel performing monitoring functions.

15.1.1.2 Ensuring that services meet requirements for timeliness, accuracy, completeness, consistency and conformity as defined in the SOW.

15.1.1.3 Ensuring that professional staff rendering services under the contract has met the necessary prerequisites.

15.1.1.4 Identifying and preventing deficiencies in the quality of service before the level of performance becomes unacceptable including description of the Quality Improvement strategy and intervention methods.

15.1.1.5 Taking any corrective action, if needed, including a commitment to provide to the County upon request a record of all reviews, the corrective action taken, the time the problem was first identified, a clear description of the problem, and the time elapsed between identification and completed corrective action.

15.1.1.6 Continuing to provide services to the County, in the event of a strike or other labor action of the Contractor's employees.

15.1.2 Contractor shall provide DMH with a copy of their Quality Assurance/Quality Control policy and/or procedure.

## 15.2 Client Satisfaction Surveys

Contractor is required to administer a PATH client satisfaction survey as determined by DMH a minimum of two times a year. Contractor is required to use the information obtained from the survey to improve the quality of the PATH services provided if applicable. Contractor is required to submit to DMH, a summary of the survey responses and how these were used to improve the quality of the PATH services, if applicable.

## 15.3 Program Monitoring

Contractor is required to complete and submit for review, a PATH program self-assessment monitoring tool and submit the self-assessment to DMH on a yearly basis or as directed by DMH. Contractor is required to use the information obtained from the self-assessment monitoring tool to improve the quality of the PATH services provided if applicable. Contractor is required to monitor their program's CTI fidelity and submit a copy of their fidelity scale to DMH at a frequency determined by DMH. Contractor is required to use the fidelity information to improve the adherence to fidelity, if applicable.

## 15.4 Policies and Procedures

Contractor is required to develop and use PATH program specific policies and procedures that address the PATH program requirements within 90 days of commencement of the Contract.

#### 15.5 Data Collection

The Contractor shall establish and implement a Data Collection Plan to collect, manage, and submit data and reports as directed by DMH. This will include collecting, managing, and submitting the data described in this SOW.

15.5.1 The Contractor's Plan shall include a description of specific measures and data analysis methods that are currently in place and/or those to be delivered to ensure the collection and reporting of required data as described in this SOW.

15.5.2 The Contractor's Plan shall include a description of how data accuracy problems will be managed and resolved including a description of current data collection, data entry, data analysis, data reporting, and/or other data accuracy problems and actions already taken.

#### 16.0 CONTRACT DISCREPANCY REPORT (Appendix C, Exhibit 2)

Verbal notification of a Contract discrepancy will be made to the Contract Program Manager as soon as possible whenever a Contract discrepancy is identified. The problem shall be resolved within a time period mutually agreed upon by the County and the Contractor. The County Contract Program Manager will determine whether a formal Contract Discrepancy Report (CDR) shall be issued. Upon receipt of this document, the Contractor is required to respond in writing to the County Contract Program Manager within five workdays, acknowledging the reported discrepancies or presenting contrary evidence. A plan for correction of all deficiencies identified in the CDR shall be submitted to the County Contract Program Manager within 10 workdays.

#### 17.0 INFORMATION TECHNOLOGY

##### 17.1. Technology Requirements

17.1.1 Contractor shall provide their own computer hardware and software to include but not limited to the ability to provide Microsoft Office and Microsoft Project 2003 or higher.

- 17.1.2 Contractor's information system or information technology system shall meet the functional, workflow, and privacy/security requirements referenced in Section 17.2 (Privacy and Electronic Security).
- 17.1.3 Contractor shall be solely responsible for complying with all applicable State and Federal regulations affecting the maintenance and transmittal of electronic information. Upon execution of the Contract applicable DMH policies shall be provided to the Contractor.

## 17.2 Privacy and Electronic Security

- 17.2.1 To the extent relevant, to deliver the services required by this SOW, Contractor shall comply with all Federal and State laws as they apply to Protected Health Information (PHI), Individually Identifiable Health Information (IIHI), and electronic information security.
- 17.2.2 Any Contractor that is deemed a "Covered Entity" under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") shall comply with the HIPAA privacy and security regulations independently of any activities or support of DMH or the County of Los Angeles.
- 17.2.3 Any Contractor that is deemed a "Business Associate" of County under the Health Insurance Portability and Accountability Act of 1996 ("HIPAA") shall enter into a Business Associate Agreement with the County of Los Angeles to ensure compliance with the privacy standards. For example, if the training is to be designed and delivered by a covered entity such as a Community Mental Health Center and the logistical services providers, vendors, or facilities managers are Sub-Contractors, then a Business Associate Agreement would be required between the covered entity and the logistical services or facility providers in case the Sub-Contractors may handle information regarding the health statues of the students who are consumers or family members. If the training is to be designed and delivered by a non-covered entity, then a Business Associate Agreement shall be required between the Contractor and the County in case the Contractor

may handle information regarding the health statuses of the students who are consumers or family members.

## **18.0 GREEN INITIATIVES**

- 18.1 Contractor shall describe a plan to use reasonable efforts to initiate “green” practices for environmental and energy conservation benefits.
- 18.2 Contractor shall notify County’s Program Manager of Contractor’s new green initiatives prior to the contract commencement.

## **19.0 PERFORMANCE REQUIREMENTS SUMMARY**

All listings of services used in the Performance Requirements Summary (PRS) are intended to be completely consistent with the Contract and the SOW, and are not meant in any case to create, extend, revise, or expand any obligation of the Contractor beyond that defined in the Contract and the SOW. In any case of apparent inconsistency between services as stated in the Contract and the SOW and this PRS, the meaning apparent in the Contract and the SOW will prevail. If any service seems to be created in this PRS which is not clearly and forthrightly set forth in the Contract and the SOW that apparent service will be null and void and place no requirement on Contractor (Appendix C, Exhibit 3).