

**ARIZONA SUPREME COURT
ADMINISTRATIVE OFFICE OF THE COURTS
JUVENILE JUSTICE SERVICES DIVISION
Contract Year 2014 - 2019
SERVICE SPECIFICATION**

CLINICAL POLYGRAPH EXAMINATION OF JUVENILE SEX OFFENDERS
Service Code 177

SERVICE DEFINITION:

Clinical Polygraph Examination means the employment of any instrumentation used for the purpose of detecting deception or verifying the truth of statements of any person under supervision and/or treatment for the commission of sex offenses. Clinical polygraph examination is specifically intended to assist in the treatment and supervision of sex offenders. Sex offender meaning is defined in A.R.S. §13-1401 et seq.

STANDARDS/LICENSURE REQUIREMENTS:

1. Polygraph examiners must hold a full membership in good standing with the American Polygraph Association or another polygraph practitioner association/licensure approved by the AOC.
2. Complete no less than two- hundred (200) actual polygraph examinations using a standardized polygraph technique.
3. At a minimum, a Baccalaureate Degree from an accredited college or university.
4. Complete a minimum of forty (40) hours of specialized sex offender polygraph examination training recognized and approved by the American Polygraph Association. This training shall focus on sex offender assessment, evaluation, and monitoring in the following manner:
 - a. Twenty-four (24) hours of training consisting of:
 - i. Pre-test interview procedures and formats;
 - ii. Valid and reliable examination formats;
 - iii. Post-test interview procedures and formats;
 - iv. Reporting format (i.e., to whom, disclosure content, forms);
 - v. Recognized and standardized polygraph procedures;
 - vi. Administering examinations consistent with CSOT guidelines;
 - vii. Professional standards and conduct;
 - viii. Expert witness qualifications and courtroom testimony.
 - b. Sixteen (16) hours of specialized training associated with:
 - i. Behavior and motivation of sex offenders;
 - ii. Trauma factors associated with victims/survivors of sexual assault.

**ARIZONA SUPREME COURT
ADMINISTRATIVE OFFICE OF THE COURTS
JUVENILE JUSTICE SERVICES DIVISION
Contract Year 2014 - 2019
SERVICE SPECIFICATION
CLINICAL POLYGRAPH EXAMINATION OF JUVENILE SEX OFFENDERS
Service Code 177**

CONTINUING EDUCATION:

All polygraph examiners shall, at a minimum, successfully complete forty (40) hours of continuing education every two (2) years. This continuing education shall consist of:

1. Sixteen (16) hours of polygraph procedures and other professional topics applicable to polygraph and the sex offender.
2. Eight (8) hours of training on the behavior and motivation of sex offenders.
3. Eight (8) hours of training on trauma factors and sexual assault issues associated with victims/survivors.
4. Eight (8) hours of training on adolescent development, brain development, and other adolescent related topics.

GUIDELINES:

1. Recording
 - a. All clinical polygraph examinations will be appropriately recorded for diagnostic and documentation purposes.
 - b. Recording channels/component required for these polygraph examinations will be:
 - i. Respiration patterns made by two separate pneumograph components. One respiration component will record the thoracic (upper chest) respiration and the other component will record the abdominal (lower stomach) respiration pattern.
 - ii. One of the chart tracings will record the Skin Conductance Response (SCR), which reflects relative changes and the conductivity/resistance of very small amounts of current by the epidermal tissue. The SCR is commonly referred to as the Galvanic Skin Response (GSR).
 - iii. A cardiograph tracing will be utilized to record changes in the pulse rate, pulse amplitude, and changes in the relative blood pressure.

**ARIZONA SUPREME COURT
ADMINISTRATIVE OFFICE OF THE COURTS
JUVENILE JUSTICE SERVICES DIVISION
Contract Year 2014 - 2019
SERVICE SPECIFICATION**

CLINICAL POLYGRAPH EXAMINATION OF JUVENILE SEX OFFENDERS
Service Code 177

- c. To effectively evaluate the polygraph tracings collected during any polygraph examination, it is understood by all professional examiners that easily readable trace recordings must be obtained. Tracings that are either too large, too small, or that have extraneous responses to outside stimuli are difficult, if not impossible to evaluate. In order to allow the examiner to render a valid and reliable opinion based on the information contained within the polygraph charts, it is recommended that all pneumograph and cardiograph tracings recorded during the polygraph examination be of sufficient amplitude to be easily read and evaluated by the initial examiner, by a reviewing examiner, and for any quality control review purpose.

- d. All pneumograph and cardiograph tracings should be not less than one half inch in amplitude in the pneumograph and/or cardiograph tracings, without sufficient documented explanation of physiological cause, will be considered insufficient for analysis purposes. Every effort should be made by the examiner to increase baseline amplitude recordings that are less than recommended minimums. Charts that are evaluated and determined to be inadequate, may require additional testing of the examinee (test subject).

2. Instrument Calibration

- a. Polygraph instruments utilized for the recording of changes in the physiological responses as produced by the human body during polygraph examination, at a minimum, will be calibrated once per month according to the manufacturer's guidelines as provided in the instruction and operation manuals. Calibration of polygraph instruments will be performed to ensure that every examinee is afforded a polygraph examination utilizing an instrument that is demonstrated to be functioning according to the manufacturer's required specification at the time that polygraph examination was conducted. In addition, calibration charts are required to document instrument operation, for quality control review, for purposes of research and data gathering, for purposes of courtroom defense and documentation, and for purpose of peer review.

- b. Calibration Charts
 - i. A hard copy (print out) calibration chart will be generated by analog polygraph instruments.

 - ii. All calibration charts should be filed and available along with all other pertinent papers for a period of not less than three (3) years.

**ARIZONA SUPREME COURT
ADMINISTRATIVE OFFICE OF THE COURTS
JUVENILE JUSTICE SERVICES DIVISION
Contract Year 2014 - 2019
SERVICE SPECIFICATION
CLINICAL POLYGRAPH EXAMINATION OF JUVENILE SEX OFFENDERS
Service Code 177**

- iii. Calibration charts will be filled out with the below listed data:
 - A. Instrument make, model, and serial number;
 - B. Date, location, and time of instrument calibration;
 - C. Identity of examiner performing the instrument calibration procedure;
 - D. Identification of each component, i.e., mechanical or electronic pneumographies, GSR/SCR, mechanical or electronic cardiograph, etc.;
 - E. Applied sensitivity units;
 - F. Sensitivity checks;
 - G. Applied mm of air pressure;
 - H. Kymograph checks;
 - I. Pneumograph leak checks; and
 - J. Cardiograph leak checks, to include start and end times.
 - c. Standardized Chart Markings, recognized and utilized within the polygraph profession will be employed to annotate all calibration and examination charts.
 - d. Calibration Requirements: Polygraph instruments utilized will be calibrated on a regular basis as follows:
 - i. All analog polygraph instruments in use will be calibrated at least once a week if the instrument remains stationary.
 - ii. Each analog polygraph instruments will be calibrated prior to its use if the instrument was moved subsequent to its last calibration procedure.
 - iii. Digital polygraph instrument will be calibrated according to factory specifications and the manufacturer's recommendations.
3. Examination Frequency
- a. To safeguard against habituation and familiarization between the examiner and the subject, it is recommended that the polygraph examiner not conduct more than two (2) separate clinical polygraph sessions per year on the same offender unless significant reason exists for more frequent testing. A re-examination over previously examined issues where no opinion was formed would not be considered a separate session.

**ARIZONA SUPREME COURT
ADMINISTRATIVE OFFICE OF THE COURTS
JUVENILE JUSTICE SERVICES DIVISION
Contract Year 2014 - 2019
SERVICE SPECIFICATION
CLINICAL POLYGRAPH EXAMINATION OF JUVENILE SEX OFFENDERS
Service Code 177**

- b. In order to allow sufficient time for the pre-test, actual test, and post-test phases of the examination, it is recommended that the examiner schedule not less than ninety (90) minutes for each examination session. In many cases, it should be anticipated that the examination session will take considerably longer.

4. Testing Techniques & Procedures

- a. Clinical polygraph examination techniques will be limited to those techniques that are recognized and published, within the industry, as standardized and validated examination procedures. To be a recommended examination format, the examination procedure must include appropriately designed relevant questions, appropriately designed control questions for diagnostic purposes, and appropriately designed irrelevant questions as applicable to that defined and standardized procedure. A standardized examination technique or procedure is defined as:
 - i. A technique or procedure which has achieved a published, scientific database sufficient to support and demonstrate validity and reliability from the application and use of that specific polygraph technique; and,
 - ii. A technique or procedure that is evaluated according to the published methods for that specific procedure, and that provides for numerical scoring and quantification of the chart data, where applicable; and,
 - iii. A technique or procedure that has not been modified without the support of published validity and reliability studies for that particular modification.
- b. Stimulation/Acquaintance Test
 - i. The Stimulation/Acquaintance Test will be employed during each polygraph examination session as the first chart. The Stimulation/Acquaintance Test is used to demonstrate that the psychological set of the examinee and the examinee's reaction capabilities are established for diagnostic purposes. This test is a recognized test procedure utilized in conjunction with professional examination formats and should be made a part of the clinical polygraph examination of any sex offender.
 - ii. Blind or known stimulation procedures, as published, may be used for the Acquaintance Test.

ARIZONA SUPREME COURT
ADMINISTRATIVE OFFICE OF THE COURTS
JUVENILE JUSTICE SERVICES DIVISION
Contract Year 2014 - 2019
SERVICE SPECIFICATION

CLINICAL POLYGRAPH EXAMINATION OF JUVENILE SEX OFFENDERS
Service Code 177

c. Number of Relevant Questions

All standardized and recognized published examination formats and procedures define the number of relevant questions (pertaining to the issues under investigation) that may be utilized. Those applications should not be modified or altered. No recognized or validated examination procedure allows for more than five (5) relevant questions to be asked during any given polygraph examination. Therefore, not more than five relevant questions pre-examination may be asked, regardless of the examination procedure selected.

d. Single-Issue Examinations

Only single-issue examinations have demonstrated scientific validity and reliability. Single issue examinations, therefore, should be adhered to in order to ensure the clinical polygraph examination produce maximum validity and reliability. Based on all available scientific research, mixing issues during an examination significantly reduces the validity and reliability of opinions based on that data. Issues of psychological set, anti-climactic dampening, and other principles forming the foundation of the polygraph science must be adhered to; thus, the requirement for single issue examinations only. For example, any examination mixing a sexual history topic questioning about the instant offense (disclosure) or violations of probation/parole (monitoring) would be considered mixing issues, and would not be considered a valid or appropriate examination.

e. Relevant Question Construction

In order to design an effective polygraph examination and to adhere to standardized and recognized procedures, the questions to be utilized should be constructed to be:

- i. Simple and direct.
- ii. As short as possible.
- iii. Should not include legal terminology (sexual assault, homicide, incest). This terminology allows for examinee rationalization and utilization of other defense mechanisms.
- iv. The meaning of each question must be clear and not allow for multiple interpretations.
- v. Should not be accusatory in nature.
- vi. Should never presuppose knowledge on the part of the examiner.

ARIZONA SUPREME COURT
ADMINISTRATIVE OFFICE OF THE COURTS
JUVENILE JUSTICE SERVICES DIVISION
Contract Year 2014 - 2019
SERVICE SPECIFICATION
CLINICAL POLYGRAPH EXAMINATION OF JUVENILE SEX OFFENDERS
Service Code 177

- vii. Should contain reference to only one element of the issue under investigation.
- viii. Should use language easily understood by the examinee.
- ix. Must be easily answerable yes or no.
- x. Should avoid the use of any emotionally laden terminology, such as rape, molest, murder, etc.

POLYGRAPH EXAMINATIONS & FORMATS:

1. Disclosure Issue Examinations

- a. Must be adjudicated delinquent.
- b. Must be 12 years or older.
- c. Must be evaluated through the use of a psychosexual examination that meets the Administrative Office of the Courts (AOC) contract standards prior to the polygraph examination.
 - i. The psychosexual evaluation must certify that the youth is able to clearly distinguish right from wrong.
 - ii. Determine any mental problems or deficiencies of the youth
- d. Specific issue examination for the instant offense, resulting in conviction
 - i. The specific issue examination is utilized to determine if the examinee appears deceptive or non-deceptive in his/her denial of guilt to the offense(s) for which he/she has been convicted. The use of this disclosure examination as the issue under investigation for the polygraph examiner should be made by the examiner in conjunction with the treatment provider and/or the supervision specialist.
 - ii. Specific issue allegations under indictment or pending court action are not clinical polygraph examinations and should not be examined as a disclosure test. Disclosure test procedures are designed for the purpose of assisting therapists and/or supervision officials in evaluation denial in order to enhance the effectiveness of treatment and supervision programs only.

ARIZONA SUPREME COURT
ADMINISTRATIVE OFFICE OF THE COURTS
JUVENILE JUSTICE SERVICES DIVISION
Contract Year 2014 - 2019
SERVICE SPECIFICATION

CLINICAL POLYGRAPH EXAMINATION OF JUVENILE SEX OFFENDERS
Service Code 177

- iii. Disclosure examinations, used for verification of sexual histories, explore sexual histories, therapeutic issues, and sexual deviance prior to the time of conviction. In conjunction with appropriate examination procedures and professional obligations, admissions are often obtained during the pre-test phase, as well as the post-test phase of the examination. Oftentimes, offenders deny illegal sexual behavior and ideation, except for what has been identified by the judicial process. Disclosure examinations and admissions are relied upon by therapists, court officers, attorneys, supervision officials, and others on the team in their development of appropriate supervision and treatment programs. The issue under examination should pertain to sexual history deviance by the examinee. For example, those issues identified by therapists on sexual history questionnaires are appropriate subject matter for this examination format.

2. Monitoring and Maintenance Examinations

- a. Must be adjudicated delinquent.
- b. Must be 12 years or older.
- c. The treatment provider must recommend, in writing, specific areas to be covered by the polygraph examiner, but should not include specific questions.
- d. Monitoring and maintenance polygraph examinations have different purpose and intent from disclosure examinations dealing with an instant offense or a sexual history.
 - i. Monitoring and maintenance polygraph examinations have been found to be extremely important in the supervision process. This examination is specifically targeted to deal with issues of violation of probation and/or the commission of additional sexual offenses, yet unidentified, while on probation or parole. (Abrams, **Polygraph Testing of the Pedophile**, 1993). Results of these examinations are meant to assist treatment providers and supervision specialist in development of individual treatment and supervision strategies.

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JUVENILE JUSTICE SERVICES DIVISION
Contract Year 2014 - 2019
SERVICE SPECIFICATION
CLINICAL POLYGRAPH EXAMINATION OF JUVENILE SEX OFFENDERS
Service Code 177**

- ii. These examinations are often the most difficult to administer and the probability for error will be the greatest in these types of examinations due to:
 - A. The probability of examinee habituation, due to testing frequency; and,
 - B. Specific targets (issues) are often unknown or unidentified; specific allegations have not been made and questioning may be more general than in specific target tests.
- iii. Monitoring and maintenance polygraph examinations will require the greatest commitment of time on the part of the examiner and the examinee, and will require special care and special preparation by the examiner to minimize the possibility of error.
- iv. Monitoring and maintenance polygraph examinations are particularly useful in reducing the probability of recidivism, but caution should be observed in scheduling these examinations too frequently.
- v. In addition, polygraph examiners should obtain in writing at the beginning of each examination session, the examinee's written authorization regarding the release of information, regarding any and all admissions, statements and opinions resulting from the examination session.

REPORTING REQUIREMENTS:

- 1. Polygraph examiners shall report the result of examination either verbally (phone call) or in writing (email or letter); to the probation department and referral source, as applicable, within 24 hours of the examination.
- 2. Polygraph examiners shall submit a written report within ten (10) business days to the probation department of the examination that will be factual and descriptive of the information and results of each examination. Written reports are intended for treatment and supervision purposes only. Each report shall include information regarding:
 - a. The date of the examination;
 - b. Beginning and ending time;

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JUVENILE JUSTICE SERVICES DIVISION
Contract Year 2014 - 2019
SERVICE SPECIFICATION
CLINICAL POLYGRAPH EXAMINATION OF JUVENILE SEX OFFENDERS
Service Code 177**

- c. Name of person requesting examination;
 - d. Name of examinee;
 - e. Birth date of examinee;
 - f. Type of court supervision;
 - g. Reason for examination;
 - h. Date of last clinical polygraph examination;
 - i. Examination questions and answers;
 - j. Any additional information deemed pertinent by the examiner;
 - k. Reasons for inability to complete the examination;
 - l. Post-test phases of the examination; and
 - m. Test results.
3. Prepare and provide all required reports in accordance with AOC Standard Terms and Conditions.

**ARIZONA SUPREME COURT
ADMINISTRATIVE OFFICE OF THE COURTS
JUVENILE JUSTICE SERVICES DIVISION
Contract Year 2014 - 2019
SERVICE SPECIFICATION
CLINICAL POLYGRAPH EXAMINATION OF JUVENILE SEX OFFENDERS
Service Code 177**

I have read and fully understand the requirements to provide sex offender polygraph services and agree to all requirements and restrictions and propose the following rate:

Proposed Service Rate:

Clinical Polygraph Examination of Juvenile Sex Offender (service code 177) \$ _____ / exam

Other proposed agreement: _____

Contractor Signature / Date

AOC USE ONLY: DO NOT FILL IN BEYOND THIS LINE

Final Contract Service Rate:

Clinical Polygraph Examination of Juvenile Sex Offender (service code 177) \$ _____ / exam

Other agreement _____

Contractor Signature / Date

AOC Signature / Date