



## Aerospace Medicine Specialist Support for Neuropsychiatry Branch

Wright-Patterson AFB, OH

USAFSAM/FECN

FOPR 22-129

**PERIOD OF PERFORMANCE:** 30 SEPT 2022 - 29 SEPT 2023

**OPTION YEARS:** 2

### INTRODUCTION

The 711th Human Performance Wing (711 HPW), headquartered at Wright-Patterson Air Force Base in Ohio, is the first human-centric warfare wing to consolidate human performance research, education and consultation under a single organization. Established under the Air Force Research Laboratory, the 711 HPW is comprised of the Airman Systems Directorate (RH) and the United States Air Force School of Aerospace Medicine (USAFSAM). The Wing delivers unparalleled capability to the Air Force through a combination of world class infrastructure and expertise of its diverse workforce of military, civilian and contractor personnel encompassing 75 occupational specialties including science and engineering, occupational health and safety, medical professions, technicians, educators, and business operations and support.

### DESCRIPTION OF SERVICES

The contractor shall meet all requirements per the basic contract and provide professionally and technically qualified individual(s) to perform all tasks in the following paragraphs to fulfill the requirements of this task order.

This effort includes tasks and activities to be performed by the contractor in support of USAFSAM **Aerospace Medicine Clinical Sciences Division, Neuropsychiatry Branch (FECN)**. The contractor will provide a professionally and technically qualified individual to perform the tasks outlined in the following paragraphs to fulfill the requirements of this task order.

**USAFSAM/FECN has a requirement from AFMRA, ACC, and AETC to provide updated data on seizure risk in USAF flying and special duty personnel who have neurologically and cognitively recovered from a traumatic brain injury (TBI).**

This is a personal services contract, which is intended to create an employer-employee relationship between the Government and the individual health care providers. The performance of the individual health care providers under this task order is subject to day-to-day supervision and control by healthcare facility personnel comparable to that exercised over military and civil service health care providers engaged in comparable work. Any personal injury claims



alleging negligence by the individual health care providers within the scope of the health care providers' performance of this personal services contract shall be processed by DoD as claims alleging negligence by DoD military or civil service health care providers. This personal services contract does not create any employer- employee relationship between the Government and any corporation, partnership, business association or other party or legal entity with which the individual health care providers may be associated.

## QUALIFICATIONS

- Possess current, active, unrestricted license to practice medicine
- Possess current, active NPI#
- Possess current, active DEA
- Possess current BLS
- Ability to complete favorable credentialing and security processes
- The contractor shall be a fully licensed physician with a specialty in at least one of the following:
  - a) aerospace neurology minimum 1 year aerospace neurology experience;
  - b) aerospace medicine, with 10 years of experience; or
  - c) disciplines of preventative medicine with flight medicine experience and be board certified in that specialty with at least 10 years of experience.
- The contractor should be able to interpret clinical evaluations for aircrew, special duty operators, and other airmen required in support of FE consultation, teaching and clinical research investigations study task requirements as they pertain FEC's studies and analysis portfolio
- The contractor shall maintain permanent, full and unrestricted state license to practice medicine, and must meet credentialing/accreditation requirements of the Wright-Patterson AFB Medical Group, AAAHC, JCAHO, MAJCOM HQ, and HQ USAF.
- Contractor shall have experience working with and evaluating USAF personnel or other DOD aviation or special duty personnel for a minimum of one year.
- The contractor shall have experience with writing comprehensive reports for third party use, as well as working on publications for peer review neurology or aerospace or preventative medicine journals and be able to create articles for publication independently.

## TASKS

The contractor shall:

Conduct comprehensive occupational aeromedical neurologic chart reviews on disqualified USAF aircrew with neurologic conditions or other conditions if aerospace medicine specialist, requiring a waiver to return to operational duties, in support of the traumatic brain injury and as needed to maintain clinical proficiency in aeromedical neurology or aerospace medicine.



Operate as an independent specialist within the Neuropsychiatry Branch and Aeromedical Consultation Service. The contractor shall participate in clinical conferences and consult with other aeromedical specialists within the division in support of traumatic brain injury and as needed to maintain clinical proficiency in aeromedical neurology or aerospace medicine

Serve as an expert consultant or advisor as required in aeromedical neurologic matters or aerospace medicine matters or epidemiologic matters in the course of maintaining clinical proficiency in aeromedical neurology or aerospace medicine or other preventative medicine disciplines within flight medicine.

Provide and will be responsible for complete literature search on TBI, seizure risk in various population, risk factors for recovery after TBI, and TBI imaging.

Be responsible for data abstraction from AIMWTS, PSW, AHLTA, JLV, MHS Genesis, ASIMS and other data-bases and keeping a secured data-base which includes PII as well as producing an anonymized data-base without PHI.

Collect data to be used to teach AI/Natural Language Processing of terms related to TBI and imaging to be used in further studies of TBI and outcomes during a military career.

Conduct FECN instruction/lectures via PowerPoint presentations to flight surgeons, aerospace physiologists, psychologists, and international flight surgeons in training at USAFSAM on results of FECN case reviews and research related to traumatic brain injury/seizures and other neurological diagnoses as applied to the delivery of aeromedical neurological consultations; or other aeromedical and epidemiologic topics as applied to the delivery of aeromedical consultation.

Design plans for scientific and statistical investigations regarding traumatic brain injury and seizures utilizing data from FECN research data determined to be relevant to teaching and consultative mission tasks and applicability to aerospace medicine and present findings at national and international conferences. All scientific and statistical investigation plans will be coordinated with and approved by the FE S&A review team, FECN professional staff and Contracting Officer Representative (COR) for improving branch teaching and consultation capabilities.

Collaborate with FECN professional colleagues and other FECN staff and organize review of scientific literature on traumatic brain injury and seizures and participate in discussion of same with FECN professional staff and contractors, as needed in support of study tasks.

Assist FECN professional staff and senior statistician in creating/authoring scientific paper(s), professional presentation(s), and DoD technical report(s) in support of traumatic brain injury and seizure research tasks. The number of presentations, reports and papers shall be determined by FECN branch chief and principal investigator based upon the relevance of findings as they become available.

Perform, assist or supervise in the data analyses, research design, report writing and research collaboration of FECN aeromedical research that support the traumatic brain injury and seizures in USAF Aviators study.

Assure confidentiality of documents, communications and data (i.e., follow HIPPA and IRB requirements) related to all clinical and research tasks.

Provide and receive technical guidance and advisory recommendations to and from FECN professional staff regarding traumatic brain injury and seizure research project management, as well as complex case reviews. Coordinate as required with the FESS program manager to provide updates on the traumatic brain injury and seizure study.



Assist the FESS program manager and FECN professional staff to assure traumatic brain injury and seizures research projects are executing on schedule.

Mentor medical students, residents and adjunct flight surgeons in participation this research and sub-projects of this study area.

Participate in designing other projects to further elucidate the seizure risk in aviators.

#### **BASE SUPPORT**

The contractor shall be provided office/laboratory space, furniture and equipment, routine office/laboratory supplies, computer hardware and software necessary to perform tasks described in this performance work statement. The government will also provide telephone service and access to a fax machine and a copier as required. All software and hardware, passwords/access to military Internet/E-mail and applicable database will be available within the scope of the contract. The contractor shall comply with local, AF and DoD policies.

#### **GENERAL INFORMATION**

Work will be accomplished at **Wright Patterson AFB, OH**. Temporary alternate work locations may be assigned as circumstances dictate by the Contracting Officer Representative. Partial telework may be considered upon review after 30 days of performance after start date with determination advised by the COR.

This position of support and the work schedule is based upon needs of the contract and fulfillment of objectives. Although contractor work schedule is flexible, it is expected that the contractor shall participate in team meetings and interact with government personnel, as needed, during regular duty hours (M-F 0730-1630).

The Contractor must have a Non-Disclosure Agreement in place with their company, and the company must provide a copy to the Program Manager of this task order. This is necessary in order to mitigate transfer of any confidential, proprietary and/or sensitive information while in this position.

The contractor must complete annual training with their branch/division to include: Latex Allergy Training, HAZCOM (branch specific), Infection Control Training (ICT), Job Safety Training (JST), Fire Extinguisher Training, Operational Risk Management, and all other training deemed necessary by the joint commission for inspection and healthcare facility compliance.

Information Regarding Non-US Citizens Assigned to this effort –

- (a) Contractor employees requiring access to USAF bases, AFRL facilities, and/or access to U.S. Government Information Technology (IT) networks in connection with the work on this contract must be U.S. citizens. For the purpose of base and network access, possession of a permanent resident card (“Green Card”) does not equate to U.S. citizenship. This requirement does not apply to foreign nationals approved by the U.S. Department of Defense or U.S. State Department under international personnel exchange agreements with foreign governments. Any waivers to this requirement must be granted in writing by the Contracting Officer prior to providing access. The above requirements are in addition to any other contract requirements related to obtaining a Common Access Card (CAC).
- (b) For purposes of paragraph (a) above, if an IT network/system does not require AFRL to endorse a contractor’s application in order to gain access, the organization operating the IT network/system is responsible for controlling



access to its system. If an IT network/system requires a U.S. Government sponsor to endorse the application in order for access to the IT network/system; AFRL will only endorse the following types of applications; consistent with the requirements above:

- (1) Contractor employees who are U.S. citizens performing work under this contract.
- (2) Contractor employees who are non-U.S. citizens and who have been granted a waiver.
- (3) Any additional access restrictions established by the IT network/system owner apply.

#### **VACCINATION REQUIREMENTS FOR HEALTH CARE WORKERS (HCW)**

- (a) **HCW Health Requirements:** The Contractor shall comply with all health requirements in the contract. Prior to physical performance of services by the HCW, but no earlier than 60 days prior to physical performance of services by the HCW, the Contractor shall provide documentation certifying CDC-recommended health requirements for HCWs such as immunizations, annual vaccinations and medical testing at the time of initial placement and annually thereafter, as required IAW AFI 44-108, *Infection Prevention and Control Program*. The expense for all health requirements, to include monitoring and tracking annual requirements, shall be borne by the Contractor at no additional cost to the Government. The CDC and AFI 44-108 categorize administrative staff in medical settings as health care workers.
- (b) **Annual Vaccination Requirements** The contractor will be immunized annually with vaccines recommended by the Advisory Committee on Immunization Practices (ACIP) of the Centers for Disease Control (CDC) for HCWs IAW AFI 44-108, *Infection Prevention and Control Program*. Some annual vaccinations may be provided by the Government, if available, as determined by the local MTF. If the contractor chooses to be immunized by the Government, the contractor shall sign a waiver releasing the Government from the legal liability IAW local procedures and policies. Alternately, the contractor may obtain vaccinations at another facility, at no cost to the Government, and provide proof of vaccination to the Government.
- (c) **Immunization Tracking** The Contractor shall maintain their own process and system of tracking the currency of health immunizations and shall not rely on the Government for ensuring the HCWs are in compliance.
- (d) **Training Requirements** - The contractor shall maintain all required qualifications, licenses, certifications, and training (to include training needed for compliance with healthcare facility clinical quality accreditation standards).

#### **OTHER DIRECT COSTS AND TRAVEL**

**Contractor will be required to travel** when authorized to participate in customer business line related travel, to include meetings and conferences, to fulfill respective mission goals. Such travel will only be as directed and coordinated through the COR two weeks in advance of all contractor travel in order to obtain proper authorizations. The specific travel locations, duration, and number of trips will be upon direction of the Contracting Officer and/or Contracting Officer Representative without modification to the task order, as long as adequate travel funding is available in accordance with the resulting task order. Contractor shall bill the government as reimbursable expense in accordance with the Joint Travel Regulation (JTR) applicable for the appropriate geographical area for non-local travel costs incurred as a result of a request by the government to execute the task requirements. When travel is identified, the contractor shall provide an estimate of all travel costs by location, broken out by item, to the Program Manager and COR for review prior to travel.





## **SECURITY**

Position of Trust. All contractor personnel require a minimum of a Tier 1 background check (T1)/SF85 for any position that requires access to the internet, use of automated information systems to cover standalone computers or unescorted entry into restricted or controlled areas prior to reporting for duty in support of any requirement. The investigation is not for a security clearance; it is for a position of trust. This is a mandatory requirement set forth in DoDM 5200.02\_AFMAN 16-1405, Air Force Personnel Security Program. All documentation required for security certification shall be the responsibility of the contractor.

No foreign nationals shall be employed for any requirement issued under this contract without prior approval of the Government.

The contractor shall provide OPSEC protection for all sensitive/critical information and indicators involved in execution of this contract/Task Order, as defined by AFI 10-701 (Operations Security). 711 HPW Critical Information and Indicators are protected under the 711 HPW Operations Security Program and the 711 HPW Critical Information and Indicators List (CIIL). Contractor employees granted access to critical information and indicators shall be provided initial OPSEC training by the 711 HPW OPSEC Coordinator upon in-processing and prior to being granted access to CIIL items related to the contract/Task Order. The contractor shall also participate in 711 HPW's annual OPSEC training and education programs, which includes periodic updates and refresher training on CIIL items applicable to the contract/Task Order. The 711 HPW OPSEC coordinator shall evaluate the OPSEC posture of AF contract activities and operations.

## **DELIVERABLE**

Contractor Progress, Status and Management Report (PSMR). On a monthly basis, the contractor shall provide a status report with each monthly invoice. The information will be on project status and describe the work accomplished. The contractor shall also identify any issues/problems anticipated in schedule or cost ceiling during the next reporting period. (Ref Para 2.1.2), Contract Deliverable Requirements List (CDRL) – A003, as per the contract.

Technical Report – Study/Services. Final reports are to be submitted upon completion of each project. (Ref Para 2.1), CDRL - A007, as per the basic contract.

All reports and data shall be submitted in a non-proprietary, easily transferrable format.

All reports, data, findings and literature shall be property of the USAF School of Aerospace Medicine Aerospace Medicine Consultation Division (USAFSAM/FEC). The contractor shall not reuse or distribute project information without the express permission of USAFSAM/FEC and shall retain all USAFSAM/FEC origin markings.



**CONTINUATION OF ESSENTIAL DoD CONTRACTOR SERVICES DURING A CRISIS:**

The performance of these **services is considered not mission essential** during time of crisis. Should a crisis be declared, the Contracting Officer or his/her representative will verbally advise the Contractor or the revised requirements, followed by written direction.

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**I have read and fully understand the minimum qualifications and duties and will comply with all requirements under this contract service.**

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(Print Name)

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(Signature)

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(Date)

