

# PERFORMANCE WORK STATEMENT (PWS)

## American Sign Language (ASL) Interpreter Services

Western Oregon Service Unit (WOSU) / Chemawa Indian Health Center

Indian Health Service - Portland Area

Field	Entry
Document Type	Performance Work Statement (PWS)
Requirement	American Sign Language (ASL) Interpreter Services
Requiring Activity	Indian Health Service, Portland Area, Western Oregon Service Unit (WOSU) / Chemawa Indian Health Center
Primary Place of Performance	3750 Chemawa Road NE, Salem, OR 97305
Period of Performance	Base Year: 07/15/2026 - 07/14/2027; four option years through 07/14/2031, subject to funding availability and Government discretion

## 1.0 Purpose

The purpose of this Performance Work Statement (PWS) is to define the required results for American Sign Language (ASL) interpreter services supporting patient care at the Western Oregon Service Unit (WOSU), also known as the Chemawa Indian Health Center. The requirement supports effective communication between healthcare providers and Deaf and Hard of Hearing patients during scheduled clinical encounters.

This PWS is structured around performance outcomes. The Contractor is responsible for determining the appropriate means of delivering the required results, except where this PWS, applicable law, patient privacy requirements, clinic procedures, or contract terms establish mandatory requirements.

## 2.0 Background

WOSU provides comprehensive healthcare services to eligible beneficiaries. To support compliance with the Americans with Disabilities Act (ADA), Section 504 of the Rehabilitation Act, and federal healthcare accessibility requirements, WOSU requires qualified ASL interpretation services for Deaf and Hard of Hearing patients.

ASL interpreter services enable patients to understand medical information, treatment options, and provider instructions, and enable providers to accurately understand patient concerns. The requirement is primarily for in-person interpreter services, with contingency capability for alternative services when necessary to preserve continuity of patient care.

## 3.0 Scope

The Contractor shall provide qualified ASL interpreter services for patients receiving care at WOSU. Services shall support scheduled clinical encounters and related communication between healthcare providers and patients during normal clinic operating hours.

The primary service delivery mode is in-person ASL interpretation at the Chemawa Indian Health Center. When an in-person interpreter is not available within the required timeframe, the Contractor shall promptly notify the designated Government point of contact and coordinate an appropriate alternative solution, such as qualified Video Remote Interpreting (VRI), when approved by the Government.

## 4.0 Performance Objectives

ID	Performance Objective	Desired Outcome
PO-1	Ensure Deaf and Hard of Hearing patients receive effective communication support during scheduled clinical encounters.	Patients and providers can communicate accurately and timely regarding medical information, treatment options, and provider instructions.
PO-2	Provide in-person ASL interpreter coverage for scheduled appointments when requested with at least 72 hours advance notice.	At least 90% of qualifying requests are fulfilled with an in-person qualified ASL interpreter during the period being measured.
PO-3	Maintain professional, qualified interpreter personnel capable of interpreting medical terminology and clinical discussions.	Interpreter services are accurate, impartial, professional, and appropriate for healthcare encounters.
PO-4	Protect patient privacy and confidentiality.	Protected Health Information (PHI) is safeguarded and no unauthorized retention or disclosure occurs.
PO-5	Maintain continuity of patient care when in-person services cannot be provided.	The Government receives timely notice and a coordinated alternative solution when in-person fulfillment is unavailable.

## 5.0 Definitions and Operating Assumptions

Term	Definition / Assumption
ASL	American Sign Language.

Term	Definition / Assumption
Qualified ASL Interpreter	An interpreter who is fluent in ASL and English, capable of accurately and impartially interpreting medical terminology and clinical discussions, and who maintains all required certifications, licensure if applicable, and continuing education necessary to provide professional ASL interpretation services.
Qualifying Request	A Government request for in-person ASL interpreter services submitted to the Contractor at least seventy-two (72) hours before the scheduled appointment time.
Alternative Service	A Government-approved contingency service, such as qualified VRI, used when an in-person interpreter cannot be provided within the required timeframe.
Normal Clinic Operating Hours	Monday, Tuesday, Thursday, and Friday from 8:00 a.m. to 5:00 p.m.; Wednesday from 12:30 p.m. to 5:00 p.m.; excluding clinic closures.
Clinic Closure	A closure caused by federally recognized holidays, emergency closures, inclement weather, Executive Order, or other Government-directed closure.

## 6.0 Performance Requirements

The Contractor shall achieve the performance requirements in Table 1. The table states the required outcome, minimum standard, acceptable quality level (AQL), surveillance method, and acceptance basis for each performance area.

ID	Requirement	Performance Standard	AQL	Surveillance Method	Acceptance Basis
PR-1	Provide qualified ASL interpreters for scheduled medical appointments at WOSU.	A qualified ASL interpreter is present at the scheduled time and location and provides professional interpretation for the scheduled encounter.	100% of interpreters assigned to appointments are qualified; services accepted when the interpreter is present and performs professionally.	Appointment records; Government observation; provider or patient feedback; invoice review.	Service occurrence is accepted when performance is completed without substantiated deficiency.
PR-2	Fulfill in-person ASL interpreter requests submitted with at least 72 hours advance notice.	The Contractor provides in-person interpreters for qualifying requests.	At least 90% of qualifying requests are fulfilled in person during the measured performance period.	Fulfillment log; scheduling records; monthly invoice or performance report; COR/GPOC review.	Cumulative fulfillment rate meets or exceeds 90%; missed or unfulfilled qualifying requests are reviewed for cause.
PR-3	Provide accurate interpretation of medical terminology and clinical discussions.	Interpretation supports clear understanding of medical information, treatment options, patient concerns, and provider instructions.	No substantiated interpretation error that materially impairs patient-provider communication; concerns are addressed promptly.	Provider feedback; patient feedback when available; incident reports; COR/GPOC review.	Accepted unless a substantiated quality issue is documented.
PR-4	Maintain required certifications, licensure if applicable, and continuing education.	Interpreter personnel remain professionally qualified throughout the period of performance.	100% of assigned interpreters maintain required qualifications; documentation is provided upon Government request.	Credential review; Contractor records; spot checks.	Accepted when requested documentation supports qualifications.
PR-5	Protect PHI and maintain confidentiality.	Interpreter personnel comply with HIPAA, applicable federal privacy regulations, and facility privacy and conduct policies.	Zero substantiated unauthorized PHI disclosure, retention, or misuse incidents.	Incident reports; Government observation; privacy/security review; complaint review.	Accepted when no substantiated privacy violation occurs.
PR-6	Notify the Government when an in-person interpreter cannot be provided and coordinate an appropriate alternative.	The Government receives notice as soon as practicable and the Contractor assists in coordinating a Government-approved alternative such as qualified VRI.	100% of known non-availability situations are communicated as soon as practicable; alternatives are coordinated before the appointment when feasible.	Scheduling correspondence; GPOC review; appointment log.	Accepted when timely notice and reasonable alternative coordination are documented.
PR-7	Provide services during normal clinic operating hours.	Services are available for scheduled appointments during WOSU clinic hours unless the clinic is closed or the Government cancels/reschedules the appointment.	100% of accepted appointments occur within normal clinic operating hours unless otherwise authorized by the Government.	Appointment schedule; invoice review; GPOC confirmation.	Accepted when services align with the approved schedule.

ID	Requirement	Performance Standard	AQL	Surveillance Method	Acceptance Basis
PR-8	Submit accurate monthly invoices for services rendered through IPP.	IPP invoices reflect actual services provided and contain sufficient non-PHI supporting detail for Government review.	100% of invoices are submitted through IPP, are accurate and complete, and do not include unnecessary PHI.	IPP invoice review; comparison to appointment records.	Accepted when the IPP invoice supports payment for completed services.

## 7.0 Deliverables and Reporting Requirements

ID	Deliverable	Content / Outcome	Due Date / Frequency	Format
D-1	Scheduling Confirmation	For each accepted appointment request, confirm interpreter coverage or provide status sufficient for the Government to manage the appointment.	Before the scheduled appointment, or as coordinated with the GPOC.	Email or other Government-approved communication method.
D-2	Non-Availability / Alternative Service Notice	Notice that an in-person interpreter cannot be provided, with proposed alternative solution such as qualified VRI when appropriate.	As soon as practicable after the Contractor determines in-person coverage is unavailable.	Email or other Government-approved communication method.
D-3	Credential / Qualification Documentation	Evidence of interpreter qualifications, certifications, licensure if applicable, and continuing education, for assigned personnel.	Upon Government request.	PDF, email, or other Government-approved format.
D-4	Monthly IPP Invoice	Invoice submitted in IPP for services rendered, including date of service, appointment/service duration, service type, rate, total amount, and other non-PHI information needed for review.	Monthly in arrears.	Invoice Processing Platform (IPP), with supporting documentation attached in IPP as needed, unless otherwise directed in writing by the Contracting Officer.
D-5	Performance Summary, if Requested	Summary of total requests, qualifying requests, in-person fulfillments, alternative services, cancellations, and unfulfilled requests.	Monthly or as requested by the Government.	Spreadsheet, PDF, email, or other Government-approved format.
D-6	Incident / Privacy Notification	Notice of any suspected privacy, confidentiality, conduct, or service quality incident involving contract performance.	Immediately or as soon as practicable after discovery, consistent with applicable policy and contract requirements.	Email, phone notice, or other Government-directed method.

## 8.0 Quality Assurance Surveillance Plan (QASP)

The Government will monitor Contractor performance to determine whether services meet the standards in this PWS. Surveillance may be performed by the Contracting Officer, Contracting Officer Representative (COR), designated Government point of contact (GPOC), or other authorized Government personnel.

Surveillance Activity	Description	Frequency	Related Requirements
Appointment Fulfillment Review	Compare Government requests to services provided and identify in-person fulfillment percentage for qualifying requests.	Monthly or as needed	PR-1, PR-2, PR-6, PR-7
Invoice Review	Validate IPP invoices against appointment records and confirm invoices and supporting attachments contain sufficient detail without unnecessary PHI.	Monthly	PR-1, PR-2, PR-8
Credential Review	Request and review documentation supporting interpreter qualifications and certifications/licensure, if applicable.	At award, upon personnel change, or as requested	PR-4

Surveillance Activity	Description	Frequency	Related Requirements
Observation / Feedback	Review feedback from providers, patients when available, and clinic staff regarding communication effectiveness, professionalism, and timeliness.	As needed	PR-1, PR-3, PR-5
Incident Review	Review any reported privacy, confidentiality, conduct, no-show, late arrival, or quality issue and assess corrective action if required.	As incidents occur	PR-3, PR-5, PR-6
Option-Year Consideration	Consider performance trends, including fulfillment rate and quality issues, when determining whether to exercise future options.	Before option exercise	All requirements

## 9.0 Inspection and Acceptance Criteria

Services will be considered acceptable when all applicable conditions below are met:

- A qualified interpreter is present at the scheduled time and location for the approved appointment.
- Interpretation services are delivered professionally and accurately for the clinical encounter.
- Applicable privacy, confidentiality, and facility conduct requirements are followed.
- The Contractor maintains at least a 90% in-person fulfillment rate for qualifying requests submitted with 72-hour advance notice.
- If in-person services are unavailable, the Contractor provides timely notice and coordinates an appropriate Government-approved alternative when feasible.
- Invoices are submitted through IPP, accurately reflect services rendered, and contain no unnecessary patient-identifying information.

Failure to meet performance standards may require corrective action and may be considered in future option year determinations.

## 10.0 Government Responsibilities

The Government will support performance by providing information and coordination reasonably necessary for the Contractor to perform the required services. Government responsibilities include:

- Provide appointment scheduling information necessary for service delivery.
- Designate a Government point of contact for scheduling coordination and performance communication.
- Provide facility access information and applicable on-site conduct requirements for interpreter personnel.
- Notify the Contractor of known appointment cancellations, rescheduling, clinic closures, or other changes as soon as practicable.
- Review deliverables, performance documentation, and IPP invoices for acceptance and payment processing.

## 11.0 Contractor Responsibilities

The Contractor shall be responsible for managing personnel, scheduling, quality control, privacy compliance, and service delivery necessary to achieve the outcomes in this PWS. Contractor responsibilities include:

- Provide professional, qualified ASL interpreters for scheduled medical appointments at WOSU.
- Ensure interpreters are fluent in ASL and capable of accurately interpreting medical terminology and clinical discussions.
- Maintain all required certifications, licensure if applicable, and continuing education necessary to provide professional ASL interpretation services.
- Maintain a process to receive, track, confirm, and fulfill Government requests for interpreter services.
- Provide timely notice to the Government when in-person services cannot be fulfilled and coordinate alternative service options when appropriate.

- Ensure all assigned personnel comply with HIPAA, applicable federal privacy and confidentiality regulations, and facility conduct policies.
- Submit accurate monthly invoices for services rendered through the Invoice Processing Platform (IPP).

## 12.0 Security, Privacy, and Confidentiality

The Contractor shall comply with HIPAA and all applicable federal patient privacy and confidentiality regulations. The Contractor shall safeguard PHI and ensure interpreters adhere to facility privacy and conduct policies while on site or while providing any approved alternative service.

The Contractor shall not retain, use, or disclose patient information beyond the scope necessary to provide interpreter services under the contract. No Government IT system access is anticipated for this requirement.

If performance requires routine physical access to a federally controlled facility or other access controls not currently anticipated, the Contractor shall comply with all applicable access, identification, and security procedures included in the contract or provided by the Government.

## 13.0 Place of Performance

Primary place of performance:

Western Oregon Service Unit  
Chemawa Indian Health Center  
3750 Chemawa Road NE  
Salem, OR 97305

## 14.0 Hours of Service

Day	Normal Clinic Operating Hours
Monday	8:00 a.m. - 5:00 p.m.
Tuesday	8:00 a.m. - 5:00 p.m.
Wednesday	12:30 p.m. - 5:00 p.m.
Thursday	8:00 a.m. - 5:00 p.m.
Friday	8:00 a.m. - 5:00 p.m.

Services are subject to clinic closures due to federally recognized holidays, emergency closures, inclement weather, Executive Order, or other Government-directed closures.

## 15.0 Period of Performance

Period	Dates
Base Year	07/15/2026 - 07/14/2027
Option Year 1	07/15/2027 - 07/14/2028
Option Year 2	07/15/2028 - 07/14/2029
Option Year 3	07/15/2029 - 07/14/2030
Option Year 4	07/15/2030 - 07/14/2031

Exercise of option years is subject to funding availability and Government discretion.

## 16.0 Delivery Schedule

Interpreter services shall be provided on scheduled appointment dates during normal clinic operating hours. Requests for in-person interpreter services will generally be submitted at least seventy-two (72) hours in advance. Invoices shall be submitted monthly in arrears through IPP for services rendered.

Requests submitted with less than 72 hours advance notice may be fulfilled when resources are available; however, such requests should be treated as non-qualifying requests for purposes of the 90% in-person fulfillment standard unless the contract or subsequent Government direction states otherwise.

## 17.0 Mandatory Invoicing via Invoice Processing Platform (IPP)

All invoices under this contract shall be submitted electronically through the U.S. Department of the Treasury Invoice Processing Platform (IPP) at [www.ipp.gov](http://www.ipp.gov) unless the Contracting Officer provides written direction authorizing another invoicing method. Invoices submitted by email, paper copy, or other means are not considered properly submitted for payment processing unless expressly authorized by the Contracting Officer.

The Contractor shall maintain active IPP access and submit monthly invoices in arrears for services rendered and accepted. Each IPP invoice shall reference the contract or order number and applicable line item, identify the invoice period, and include supporting documentation sufficient for the Government to verify the services provided. Supporting documentation shall avoid unnecessary patient-identifying information or Protected Health Information (PHI).

The Contractor shall monitor invoice status in IPP and promptly correct and resubmit any rejected invoice. IPP access or system issues that may affect timely invoice submission shall be reported promptly to the Contracting Officer or designated Government point of contact.

## 18.0 Government-Furnished Equipment / Information

No Government-Furnished Equipment (GFE) is anticipated. The Government will provide appointment scheduling information necessary for service delivery. The Contractor shall use such information only for the purpose of performing services under the contract and shall protect it in accordance with applicable privacy and confidentiality requirements.

## 19.0 Special Considerations

The Contractor may use subcontractors or team members, subject to all applicable contract terms, including FAR 52.219-14 and HHSAR 352.226-6. The Contractor remains fully responsible for performance, quality, timeliness, privacy and confidentiality compliance, invoice accuracy, and compliance with all contract terms, including applicable Buy Indian Act subcontracting limitations.

## 20.0 Risk Control

Element	Description
Risk	Inability to secure in-person interpreter services on short notice.
Mitigation	Establish a minimum 72-hour advance scheduling requirement; maintain a 90% in-person fulfillment performance standard for qualifying requests; and provide a contingency option, such as qualified VRI, when in-person services are unavailable and the Government approves the alternative.

## 21.0 Nonpersonal Services Statement

This requirement is for nonpersonal services. Contractor personnel shall not be considered Government employees. The Government may provide schedule information, facility access instructions, and acceptance feedback, but it will not supervise Contractor personnel or control the manner and means by which the Contractor performs, except as required by the contract.

## Appendix A - Performance Requirements Summary

No.	Performance Area	Standard	AQL	Surveillance
1	Qualified interpreter service	Qualified interpreter present and professional at scheduled time/location.	100% assigned interpreters qualified; accepted services meet appointment requirements.	Appointment and invoice review; observation; feedback.
2	In-person fulfillment	In-person coverage for qualifying requests.	>= 90% of qualifying requests fulfilled in person.	Fulfillment log; monthly review.
3	Communication quality	Accurate interpretation of medical terminology and clinical discussions.	No substantiated material interpretation error.	Feedback and incident review.
4	Privacy	Safeguard PHI and comply with applicable privacy rules.	Zero substantiated unauthorized disclosure/retention/misuse.	Incident and complaint review.
5	Alternative coordination	Notify Government and coordinate approved alternative when in-person unavailable.	100% known non-availability situations communicated as soon as practicable.	Scheduling correspondence review.
6	Invoicing	Submit accurate monthly invoices through IPP without unnecessary PHI.	100% accurate, supportable IPP invoices.	IPP invoice and appointment record comparison.

## Appendix B - Non-PHI IPP Invoice Support Detail

IPP invoices and any supporting attachments shall contain sufficient information for the Government to verify services rendered while avoiding unnecessary PHI. Invoice support fields may include:

- Contract or order number and invoice period.
- Date of service.
- Appointment start and end time or billable duration.
- Service type: in-person ASL interpreter or Government-approved alternative service.
- Interpreter identifier or initials, when needed for validation and not prohibited by policy.
- Applicable rate and total amount billed.
- Cancellation or no-show information, if billable under contract terms.
- A statement that invoice documentation does not include unnecessary patient-identifying information.