

EXHIBIT 1
STATEMENT OF WORK

I. EXECUTIVE SUMMARY

This Statement of Work (SOW) defines the pest control and monitoring services that the Contractor must provide at Logansport State Hospital (LSH). The objective is to support a safe, sanitary, and compliant healthcare environment. This document states service requirements, performance expectations, documentation obligations, communication protocols, and compliance responsibilities.

II. BACKGROUND AND CURRENT STATE

LSH currently receives preventive pest control services, rodent control services, and response to unplanned pest issues. Services include preventive treatments, rodent control, and responses to unplanned service needs. These services have not been governed by an executed agreement. The State of Indiana maintains a Quantity Purchase Agreement with another vendor, but pricing varies across the market. With IDOA approval, LSH is issuing a Request for Quotation (RFQ) to establish a clearly defined, competitively priced agreement for services consistent with State requirements.

The intended contract term is five years.

III. SCOPE OF WORK

a. OBJECTIVES OF ENGAGEMENT

The Contractor shall provide routine and responsive pest control and monitoring services at all designated LSH areas. The Contractor shall perform services required to prevent, identify, and address pest activity in a manner appropriate to healthcare environments and consistent with applicable regulatory requirements.

The Contractor shall:

- a. Perform routine pest control treatments at all designated service locations. All interior areas of each building are included unless explicitly excluded.
- b. Address pest activity involving rodents, roaches, ants, silverfish, spiders, bees, wasps, fleas, flies, boxelder bugs, crawling insects, and comparable pests.
- c. Address specialty pests, such as bedbugs, as listed in the Rate Chart upon request.
- d. Implement a structured rodent control program using interior and exterior placement strategies based on conditions observed on site.
- e. Use pesticides and related products that comply with applicable regulations and apply them in a manner appropriate for healthcare settings.
- f. Provide up to 36 Emergency Responses annually, as defined in this SOW. .

These obligations do not restrict the Contractor's choice of professional methods or specific treatment strategies, provided the Contractor complies with Section V.

b. DELIVERABLES AND DEADLINES

The Contractor shall:

- a. Respond to callback requests and be on site within 24 hours of notification.
- b. Provide an initial service schedule specifying service intervals, locations, and planned monitoring activity. The Contractor shall submit this schedule before performing the first service.

All deliverables must be submitted in a format that is complete, legible, and consistently usable by LSH staff.

c. PAYMENT MILESTONES

- a. The Contractor shall submit monthly invoices, itemized by service date, building, treatment category, chemicals used, and personnel.
- b. Payment is contingent upon the State's receipt of all documentation required under this SOW.
- c. The Contractor shall not perform or invoice for any Emergency Response beyond the annual limit. Any work that would exceed the annual limit is outside the scope of this Contract.

IV. PROJECT MANAGEMENT

a. PROJECT MANAGEMENT PLAN

The Contractor shall:

- a. Perform monthly and quarterly services consistent with Exhibit 2, Service Locations and Frequencies.
- b. Coordinate with LSH to establish recurring service days and times consistent with Exhibit 2.
- c. Perform routine services between 8:00 a.m. and 3:30 p.m. Eastern Time, Monday through Friday, excluding [State holidays](#).
- d. During each routine service visit, the Contractor shall complete at least the following tasks:
 - i. Inspect interior areas for signs of pest activity.
 - ii. Apply preventive treatments consistent with the service plan.
 - iii. Document findings and treatments in the service receipt.
 - iv. Report any inaccessible areas or conditions requiring State correction.
- e. Provide Emergency Response outside the routine service window when required. A service request requires an Emergency Response if the State determines that the issue requires urgent attention for patient care or operational reasons, or if the Contractor determines that the issue requires emergency pest-control methods.
- f.
- g. Notify the designated operational lead when an area is inaccessible. The operational lead may make the area accessible or excuse the area from coverage for that visit.

These requirements govern timing and coordination only; they do not prescribe technical methods.

b. PRIMARY CONTACT

The Contractor shall designate an Account Manager who is available Monday through Friday from 8:00 a.m. to 4:30 p.m. Eastern Time, excluding [State holidays](#), to address service issues, scheduling matters, and performance questions.

c. OTHER PROJECT STAFF

The Contractor shall ensure that all technicians:

- a. Hold required licenses and certifications,
- b. Possess experience appropriate for healthcare and foodservice settings.
- c. Maintain a professional appearance and wear uniforms with the Contractor's logo.

d. DOCUMENT MANAGEMENT

The Contractor shall maintain accurate and complete records. The Contractor shall provide and update the following:

- a. Complaint Logbook. Record all service dates, observations, and corrective actions.
- b. Bait-Station Map. Provide a complete, clearly labeled bait-station map after the initial visit and update it whenever stations are added, removed, or moved.
- c. Service Receipts. Document date, time in and time out, EPA numbers, product names, active ingredients, concentrations, and application methods. Note any areas that were inaccessible and approved by operational lead to be excused from coverage.
- d. Post-Service Documentation: After each service, provide a signed, dated service receipt to the State.

V. COMPLIANCE REQUIREMENTS

The Contractor shall comply with all applicable requirements of the FDA, USDA, EPA, IDOH, and any other authority governing pest-control activities in healthcare environments. The Contractor shall:

- a. Maintain a valid pesticide business license and ensure all technicians maintain required certifications.
- b. Provide Material Safety Data Sheets (MSDS) for all chemicals used.
- c. Perform services consistent with standards commonly applied in healthcare facilities of comparable complexity.

The Contractor is responsible for selecting methods and products that comply with these requirements. Nothing in this SOW mandates specific treatment methods.

VI. KEY PERFORMANCE INDICATORS

Performance will be evaluated using the following criteria:

- a. The Contractor performs services on schedule and within defined service windows.
- b. The Contractor responds to callback requests within 24 hours.
- c. The Contractor submits complete, accurate, and legible documentation immediately following each service.

These indicators measure compliance with operational obligations rather than technical methods.

VII. END OF CONTRACT TRANSITION AND TURNOVER

The Contractor shall:

- a. Participate in transition planning during the 30–90 days preceding contract expiration.
- b. Provide all service records, inspection logs, complaint logs, schedules, MSDS, and bait-station maps, and any updated versions created during the Contract, in an organized and usable form.
- c. Remove all Contractor-owned equipment, chemicals, traps, and materials at the final service visit unless otherwise directed.
- d. Cooperate with any successor Contractor as needed for continuity, including sharing non-proprietary placement strategies and active service concerns.
- e. Submit written confirmation that all transition tasks are complete before submitting the final invoice.

EXHIBIT 2
SERVICE LOCATIONS AND FREQUENCIES

I. OVERVIEW

Exhibit 2 lists the buildings included in the pest-control program and the routine service frequency for each. Before the first routine visit, the Contractor shall coordinate with LSH to establish a recurring service schedule. The Contractor shall adhere to this routine schedule unless the State approves adjustments. Adjustments that do not materially alter scope, cost, or intent do not require an amendment.

II. SERVICE LOCATIONS AND FREQUENCIES

Building/Location	Square Footage	Frequency of Service	
		Monthly	Quarterly
Dietary Complex/Building 103, 103A	41,039	X	
Dietary Complex tunnel entrance	230	X	
Isaac Ray dining rooms and food service area	3,750	X	
Larson Treatment Center	63,124		X
Isaac Ray Treatment Center	109,250		X
Maintenance Building	23,700		X
Quality Building	45,514		X
Dodds	14,400		X
Building 8A	5931		X
Concourses	12,608		X
Laundry	13,177		X
Museum	24,364		X
Cottage 3	3,079		X
Cottage 10	3,130		X
Cottage 8	3,130		X
Cottage 1114	3,115		X
Cottage 1174	1,350		X
Cottage 1206	1,350		X
Cottage 1070	3,176		X
Building F	3,600		X
Building F tunnel entrance	230		X