**Document Review Worksheet**

**Staff Completing Worksheet:**

**Facility Name:**

**Investigation & Response Records**

PREA Audit – Community Confinement Facilities

Standards 115.221, 115.222, 115.234, 115.263, 115.264, 115.267, 115.271, 115.273, 115.277, 115.278, 115.282, 115.283

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| **Use a separate worksheet for each allegation.** **Note:** Criminal and administrative investigations could occur simultaneously. Indicate both when applicable.**☐ Criminal Case ID#: ☐ Ongoing**  **☐ Concluded:**  **☐ Substantiated ☐ Unsubstantiated ☐ Unfounded** **☐ Administrative Case ID#: ☐ Ongoing**  **☐ Concluded:**  **☐ Substantiated ☐ Unsubstantiated ☐ Unfounded**  | **☐ Sexual Abuse** **☐ Sexual Harassment** **☐ Staff-on-resident ☐ Resident-on-Resident** | **Date of Incident:****Date Reported:****Date Investigation Started:** **Date Investigation Concluded:** |
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| **Source of Allegation:** ☐ Website/online ☐ Anonymous ☐ Verbal ☐ Hotline ☐ Grievance ☐ Third-party ☐ External source (i.e., Department of Homeland Security, consular office, Office of Inspector General) ☐ Other: Made by (e.g., victim, witness, third party, parent, or attorney): Made to (e.g., security, medical, mental health, or other): |
| **Check all that apply:** ☐ Criminal charges were filed by the prosecutor ☐ Case is pending prosecutorial review ☐ Case is pending trial ☐ Case was refused by the prosecutor ☐ Case was referred back to agency/facility for investigation |
| **Investigator Name and Title: ☐ Documentation of Specialized Training §115.234**  |
| Name/Initials of alleged victim: | ☐ Currently housed ☐ Released | Victim required to submit to a polygraph/truth-telling device as a condition for proceeding with the investigation **§115.271(e)** ☐ Yes ☐ No **Victim forensic medical exam offered §115.221(c):**  ☐ Onsite ☐ Offsite ☐ Refused ☐ Received Date: | ☐ **Referred for Criminal Investigation §115.222 to:** ☐ Police ☐ Sheriff ☐ External ☐ Internal investigator ☐ Other:  |
| Name/Initials of alleged abuser(s): | ☐ Currently housed ☐ Released |  Compelled staff interviews? **§115.271** ☐ Yes ☐ No ☐ Indicted ☐ Not indicted If yes, consulted with the prosecutor(s) before compelling staff interviews? ☐ Yes ☐ No  | Date referred for investigation**§115.222**:Date referred for prosecution**§115.222**: |
| **Investigations §115.271**Documented in a written report (check both if applicable):☐ Administrative (internal) investigation report ☐ Criminal investigation report **Investigation was:**☐ Prompt ☐ Thorough ☐ Objective | **Criminal Investigation** **§115.271** ☐ Copies of documentary evidence included☐ Described physical evidence☐ Described testimonial evidence ☐ Described documentary evidence ☐ Documentation of the agency remaining informed of the pending investigation conducted by outside investigators (i.e., status checks/ communication with external entity) | **Adm. Crim.**☐ ☐ Described investigative facts and findings☐ ☐ Gathered & preserved direct/circumstantial evidence (i.e., DNA, physical evidence, video, etc.)☐ ☐ Interviewed victim(s), abuser(s), and witness(es)☐ ☐ Described reasoning behind credibility assessment (for victim, abuser, staff, and witnesses)☐ ☐ Reviewed prior reports involving the perpetrator☐ ☐ Departure of alleged abuser/victim was not the basis for terminating investigation | **Adm. Investigation (cont.)** **§115.271**☐ Preponderance of evidence standard applied ☐ Determined if staff actions/ failures contributed to abuse☐ Described physical evidence☐ Described testimonial evidence  |
| **Coordinated Response** |
| **Emergency & Ongoing Medical and Mental Health Services**  | **Official Response** | **Reporting & Notifications to Resident Victim** |
| ☐ Medical practitioner(s) notified **§115.282** Date:☐ Mental Health practitioner(s) notified **§115.282** Date: ☐ Victim received emergency medical treatment **§115.282**  ☐ Onsite ☐ Offsite Date:☐ **Agency attempted to make available victim advocate from a rape crisis center §115.221(d)** If a victim advocate from a rape crisis center was not available: ☐ Qualified agency staff member utilized;  ☐ Qualified community-based organization staff member utilized; or ☐ Agency made no attempt(s)**As requested by the victim, they were accompanied by an advocate for §115.221(e):** ☐ Medical forensic exam ☐ Investigative interviews ☐ Emotional support ☐ Crisis intervention ☐ Information ☐ Referrals or ☐ Refused accompaniment. If checked, explain which services were refused:**All victims §115.282(c) and 115.283(d),(e):** ☐ Offered timely info about STI prophylaxis ☐ Offered timely access to STI prophylaxis ☐ Offered test for STI as medically appropriate **Resident victims of sexually abusive vaginal penetration** **Check if applicable****§115.282(c) and 115.283(d),(e)*:***☐ Offered timely information about emergency contraception ☐ Offered timely access to emergency contraception☐ Offered pregnancy tests☐ Received pregnancy-related medical services  | ☐ Notification to licensing body(ies) **[if applicable] §115.276(d) & §115.277** Date:**Reporting to other confinement facilities §115.263** ☐ Other facility head notified if applicable (within 72 hrs.) Date:**Staff first responder duties §115.264** ☐ Separation of victim and abuser (e.g., incident reports documenting response to allegation, documented housing transfer, etc.) **Agency Protection Duties §115.262** ☐ Immediate protection from a substantial risk of imminent sexual abuse (e.g., incident reports documenting response to allegation, documented housing transfer, etc.)**Retaliation Monitoring §115.267**(Evidence the agency acted promptly to remedy retaliation)Date initiated:Date concluded:**Periodic status checks for residents §115.267(d)**☐ Yes ☐ NoDetails: **Protection measures employed: §115.267** Victim Abuser Witness  ☐ ☐ ☐ Housing changed ☐ ☐ ☐ Transferred ☐ ☐ ☐ No contact ordered ☐ ☐ ☐ Emotional Support**Items monitored for retaliation: §115.267** Victim Abuser Witness  ☐ ☐ ☐ Discipline;  ☐ ☐ ☐ Housing changes ☐ ☐ ☐ Program changes  ☐ ☐ ☐ Staff reassignment  ☐ ☐ ☐ Staff negative performance review  | Notified resident of outcome **§115.273**(i.e., substantiated, unsubstantiated, unfounded)☐Yes ☐ No**Notification to resident when allegation is substantiated or unsubstantiated §115.273(c)(b)(d)** ☐ Staff abuser is no longer posted on the resident’s unit☐ Staff abuser is no longer employed at the facilityAbuser indicted; ☐ Staff ☐ ResidentAbuser convicted; ☐ Staff ☐ ResidentIf notice was not provided:  ☐ Resident released from custody  ☐ Agency requested relevant info. from the investigative agency in order to inform the resident Resident notifications or attempts documented? **§115.273**☐Yes ☐ NoDate(s) of notification: **Disciplinary sanctions for residents §115.278** [provide details in notes section] ☐ Resident subject to disciplinary sanctions pursuant to provisions (a)-(g) |

**Notes:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_