**Document Review Worksheet**

**Staff Completing Worksheet:**

**Facility Name:**

**Employee/Contractor/Volunteer Records**

PREA Audit – Community Confinement

Standards 115.217, 115.231, 115.232, 115.234, 115.235, 115.267, 115.276, 115.277

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| --- | --- | --- | --- | --- |
| **Employee Name** | **Position/Title** | | **Date of Hire** | |
| **Check all that apply: ☐ New Hire (use new sheet if re-hired) ☐ Current Employee ☐ Promotion (Date of Promotion \_\_\_\_\_\_\_\_\_\_\_\_\_\_) ☐ Part-time**  **☐ Contractor ☐ Volunteer Program or Work Area or Service Provided: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **☐ Alleged abuser in SA/SH allegation ☐ Reported, cooperated w/ investigation or witness to SA/SH allegation (If so, review retaliation monitoring §115.267\*)**  **☐ Disciplined/sanctioned for violating agency sexual abuse or sexual harassment policies §115.276(a), 115.277(a)\***  **☐ Terminated for engaging in sexual abuse §115.276(b), 115.277(b)\* \*Obtain/review documentation (if applicable)** | | | | |
| **Record/File** | **Requirements** | **Comments** | | |
| **Hiring and Promotion Decisions §115.217**  (employees and contractors)  **For Hiring:**  Proof of required questions **§115.217(a), 115.217(f):**  ☐ On employment application  ☐ At interview for hire  ☐ On interview or self-evaluation form  **For Promotion (if applicable):**  Proof of required questions **115.217(a), 115.217(f)**:  ☐ On application for promotion  ☐ At interview for promotion | ☐ Initial criminal history check **§115.217 (c)(1**)  Date: | Source (e.g., FBI, other federal, state, local): | | |
| ☐ Contact with prior institutional employers **§115.217(a)(3) & 115.217(c)(2)** Date(s): | Facility(ies) contacted: | | |
| ☐ 5-year criminal history check **§115.217(e)** Date(s):  ☐ Alternative alert system **(if applicable, explain in “comments” column)** |  | | |
| ☐ Elder abuse registry check Date:  ☐ Child abuse registry check Date:    **Note**: Recommended, not required by Standard. | Registry source and state(s): | | |
| **Note: Auditor must ensure the employee, volunteer, and contractor training is compliant with the Standard and received prior to contact with inmates (see FAQ 10/22/2014).** | | | | |
| **Employee Training §115.231:**  ☐ Proof of initial PREA training  ☐ Proof of PREA refresher training  ☐ Proof of refresher information | ☐ Documented employee’s understanding of initial PREA training **§115.231(d)**  Date**:**  ☐ Documented employee’s understanding of PREA refresher training **§115.231(d)**  Date: | | | **Specialized PREA Training Received**  ☐ Proof of completed investigative training **§115.234** Date:  ☐ Proof of Medical/Mental health training received **§115.235** Date: |
| **Volunteer Training 115.232**  ☐ Proof of zero-tolerance policy notification  ☐ Informed how to report  ☐ Additional PREA training received (based on services they provide and level of contact they have with residents) | **Explain the level and type of contact, and corresponding training received:** | | | ☐ Documentation confirming volunteer understanding of the training received **§115.232(c)**  Date: |
| **Contractor Training §115.232:**  ☐ Proof zero-tolerance policy notification  ☐ Informed how to report  ☐ Additional PREA training received (based on services they provide and level of contact they have with residents) | **Explain the level and type of contact, and corresponding training received:** | | | ☐ Documentation confirming contractor understanding the training received **§115.232(c)**  Date: |

Note: SA = Sexual abuse, SH = Sexual harassment, Nat’l = National, FAQ = Frequently asked question