**Document Review Worksheet**

**Staff Completing Worksheet:**

**Facility Name:**

**Employee/Contractor/Volunteer Records**

PREA Audit – Juvenile Facilities

Standards 115.317, 115.331, 115.332, 115.334, 115.335, 115.367, 115.376, 115.377

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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 §115.367\*)**  **☐ Disciplined/Sanctioned for violating agency sexual abuse or sexual harassment policies §115.376(a), §115.377(a)\***  **☐ Terminated for engaging in sexual abuse §115.376(b), §115.377(b)\* \*Obtain documentation (if applicable)** | | | | |
| **Record/File** | **Requirements** | **Comments** | | |
| **Hiring and Promotion Decisions §115.317** (employees and contractors)  **For Hiring:**  Proof of required questions **§115.317(a), §115.317(f):**  ☐ On employment application  ☐ At interview for hire  ☐ On interview or self-evaluation form  **For Promotion (if applicable):**  Proof of required questions **§115.317(a), §115.317(f)**:  ☐ On application for promotion  ☐ At interview for promotion | ☐ Initial criminal history check **§115.317(c)(1) & (d)** Date: | Source (e.g., FBI, other federal, state, local): | | |
| ☐ Contact with prior institutional employers**§115.317(a)(3) & 115.317(c)(2)** Date(s): | Facility(ies) contacted: | | |
| ☐ 5-year criminal history check **§115.317(e)** Date(s):  ☐ Alternative alert system **(if applicable, explain in “comments” column)** |  | | |
| ☐ Child abuse registry check **§115.317(c)(2)**  Date: | 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 residents(see FAQ 10/22/2019).** | | | | |
| **Employee Training §115.331:**  ☐ Proof of initial PREA training  ☐ Proof of PREA refresher training  ☐ Proof of refresher information | ☐ Documented employee’s understanding of initial PREA training received **§115.331(d)**  Date:  ☐ Documented employee’s understanding of PREA refresher training **§115.331(d)**  Date: | | **Specialized PREA Training (if applicable):**  ☐ Proof of investigative training received **§115.334**  Date:  ☐ Proof of Medical/Mental health training received **§115.335**  Date: | |
| **Volunteer Training §115.332:**  ☐ 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 the training received **§115.332(c)**  Date: | |
| **Contractor Training §115.332:**  ☐ 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 contractors understanding the training received **§115.332(c)**  Date: | |

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