**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