**Document Review Worksheet**

**Staff Completing Worksheet:**

**Facility:**

**Resident Records**

PREA Audit – Juvenile Facilities

Standards 115.316, 115.333, 115.341, 115.363, 115.383

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| **Resident Name/ID#:** **Date of birth:** | **Date of current admission:**  ☐ Multiple admissions in the last 12 months. How many?: \_\_\_\_\_\_ Date(s): |  **Note:** If the record shows multiple admissions the auditor should assess whether all required screening and education requirements occurred (explain in comment section).  |
| **Record/File** | **Proof Documentation** | **Comments****(notations/explanation/missing info)** |
| **Obtaining Information from Residents §115.341**☐ Prior sexual victimization indicated  ☐ Prior sexual perpetration indicated  ☐ Is known, resident-on-resident abuser **Check (if applicable) §115.342** ☐transgender ☐intersex   | ☐ Intake screening (within 72 hours of arrival) **§115.341(a)** Date: **Note:** Auditor must ensure the intake screening considered all required factors in **§115.341(c)** ☐ If applicable, other facility head notified of allegation (within 72 hours)**§115.363**☐ Med/MH follow-up with victim offered within 14 days of intake screening **§115.381(a)** ☐ Perpetrator offeredfollow-up with MH offered within 14 days **§115.381(b)**☐ MH eval for known resident-on-resident abuser within 60 days of learning of such abuse history **§115.383(h)**☐ Known resident-on-resident abuser is offered treatment when deemed appropriate by MH practitioners **§115.383(h)**☐ Periodic reassessment **§115.341(a)** **Note:** Indicate date(s) and result(s) of the periodic reassessment in comments.☐ Placement and programming assignments for each transgender or intersex inmate is reassessed at least twice each year **§115.342(e)** Dates:  |  |
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| **Resident Education** **§115.333(e)****Limited English Proficient/Disability** **§115.316** | ☐ Information is age-appropriate **§115.333(a)**☐ Proof of PREA information at intake **§115.333(a)**☐ Proof of comprehensive age-appropriate education within 10 days of intake **§115.333(b)** **Check:** ☐ in-person ☐ through video☐ Resident education in accessible formats **§115.333(d)****Check (if applicable):** ☐ Limited English proficient ☐ Cognitively impaired ☐ Limited reading skills ☐ Physically disabled ☐ Otherwise disabled |  |

Note: Med = Medical, MH = Mental health