

Facility Name: _____

Document Review Worksheet Employee/Contractor/Volunteer Records

Staff Completing Worksheet: _____

PREA Audit – Adult Prisons & Jails
Standards 115.17, 115.31, 115.32, 115.34, 115.35, 115.67, 115.76, 115.77

Employee Name	Position/Title	Date of Hire
<p>Check all that apply: <input type="checkbox"/> New Hire (use new sheet if re-hired) <input type="checkbox"/> Current Employee <input type="checkbox"/> Promotion (Date of Promotion _____) <input type="checkbox"/> Part-time <input type="checkbox"/> Contractor <input type="checkbox"/> Volunteer Program or Work Area or Service Provided: _____ <input type="checkbox"/> Alleged abuser in SA/SH allegation <input type="checkbox"/> Reported, cooperated w/ investigation or witness to SA/SH allegation (if so, review retaliation monitoring §115.67*) <input type="checkbox"/> Disciplined/sanctioned for violating agency sexual abuse or sexual harassment policies §115.76(a), §115.77(a)* <input type="checkbox"/> Terminated for engaging in sexual abuse §115.76(b), §115.77(b) *Obtain/review documentation (if applicable)</p>		
Record/File	Requirements	Comments
<p>Hiring and Promotion Decisions §115.17 (employees and contractors)</p> <p>For Hiring: Proof of required questions §115.17(a), §115.17(f): <input type="checkbox"/> On employment application <input type="checkbox"/> At interview for hire <input type="checkbox"/> On interview or self-evaluation form</p> <p>For Promotion (if applicable): Proof of required questions §115.17(a), §115.17(f): <input type="checkbox"/> On application for promotion <input type="checkbox"/> At interview for promotion</p>	<p><input type="checkbox"/> Initial criminal history check §115.17(c)(1) Date:</p> <p><input type="checkbox"/> Contact with prior institutional employers §115.17(a)(3) & §115.17(c)(2) Date(s):</p> <p><input type="checkbox"/> 5-year criminal history check §115.17(e) Date(s): <input type="checkbox"/> Alternative alert system (if applicable, explain in "comments" column)</p> <p><input type="checkbox"/> Elder abuse registry Date: <input type="checkbox"/> Child abuse registry Date: Note: This is recommended, not required by Standard.</p>	<p>Source (e.g., FBI, other Nat'l, State, Local):</p> <p>Facility(ies) contacted:</p> <p>Registry source and state(s):</p>
<p>Note: Auditor must ensure the employee, volunteer, and contractor training is compliant with the Standard and received prior to contact with inmates (see FAQ 10/22/2019).</p>		
<p>Employee Training §115.31: <input type="checkbox"/> Proof of initial PREA training <input type="checkbox"/> Proof of PREA refresher training <input type="checkbox"/> Proof of refresher information</p>	<p><input type="checkbox"/> Documented employee's understanding of initial PREA training received §115.31(d) Date:</p> <p><input type="checkbox"/> Documented employee's understanding of PREA refresher training §115.31(d) Date:</p>	<p>Specialized PREA Training Received (if applicable): <input type="checkbox"/> Proof of completed investigative training received §115.34 Date: <input type="checkbox"/> Proof of Medical/Mental health training received §115.35 Date:</p>
<p>Volunteer Training §115.32: <input type="checkbox"/> Proof of zero-tolerance policy notification <input type="checkbox"/> Informed how to report <input type="checkbox"/> Additional PREA training received (based on services they provide and level of contact they have with inmates)</p>	<p>Explain the level and type of contact, and corresponding training received:</p>	<p><input type="checkbox"/> Documentation confirming volunteer understanding of the training received §115.32(c) Date:</p>
<p>Contractor Training §115.32: <input type="checkbox"/> Proof of zero-tolerance policy notification <input type="checkbox"/> Informed how to report <input type="checkbox"/> Additional PREA training received (based on services they provide and level of contact they have with inmates)</p>	<p>Explain the level and type of contact, and corresponding training received:</p>	<p><input type="checkbox"/> Documentation confirming contractors understanding of the training received §115.32(c) Date:</p>