PREA COMPLIANCE AUDIT INSTRUMENT – INTERVIEW GUIDE FOR FACILITY DIRECTOR (or DESIGNEE)

Community Confinement Facilities

May 9, 2014
1. Does your facility have a staffing plan? *(115.213)*
   a. Are adequate staffing levels to protect residents against sexual abuse considered in this plan, and if so, how? *(115.213)*
   b. Is video monitoring part of this plan? *(115.213)*
   c. Is the staffing plan documented, and if so, where? *(115.213)*

2. When assessing adequate staffing levels and the need for video monitoring, please explain if and how the facility staffing plan considers: *(115.213)*
   a. The physical layout of each facility.
   b. The composition of the resident population.
   c. The prevalence of substantiated and unsubstantiated incidents of sexual abuse.
   d. Any other relevant factors.

3. How do you check for compliance with the staffing plan? *(115.213)*

4. Does the facility document all instances of non-compliance with the staffing plan? *(115.213)*
   a. If YES, does this documentation include explanations for non-compliance?

5. *If any substantial expansions or modifications to the facility since August 20, 2012, or the last PREA audit (whichever is later), have been noted within the materials collected in advance, ask: How has the facility considered the effect of the expansion or modification upon the facility's ability to protect residents from sexual abuse? (115.218)*

6. When installing or updating monitoring technology, such as a video monitoring system or electronic surveillance, how has the facility considered using such technology to enhance residents' protection from sexual abuse? *(115.218)*

7. When you learn that a resident is subject to a substantial risk of imminent sexual abuse, what protective action does the facility take? *(115.262)*

8. Are all allegations of sexual abuse and sexual harassment (including those from third-party and anonymous sources) reported directly to designated facility investigators? *(115.261)*

9. *If an outside agency investigates allegations of sexual abuse, ask: How does the facility remain informed of the progress of a sexual abuse investigation? (115.271)*

10. Does your facility notify a resident who makes an allegation of sexual abuse when the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation? *(115.273)*

11. How do you respond when an allegation of sexual abuse or sexual harassment is made by someone under the age of 18 or someone considered a vulnerable adult under state or local law? *(115.261)*

12. What happens when your facility receives an allegation from another facility or agency that an incident of sexual abuse or sexual harassment occurred in your facility? *(115.263)*

13. Are there examples of another facility or agency reporting such allegations? *(Probe for information about response to allegations.) (115.263)*
14. Does the facility have a plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse? (Probe for information about how the plan is implemented.) (115.265)

15. For allegations of sexual abuse or sexual harassment, can you describe the different measures you take to protect residents and staff from retaliation? (Probes: Housing changes or transfers, removal of alleged abusers, emotional support services.) (115.267)

16. What measures do you take when you suspect retaliation? (115.267)

17. In the case of any violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, what remedial measures does your facility take? Does the facility always prohibit further contact with residents? (115.277)
   a. In such cases, can you describe examples of the remedial measures that the facility could enforce? (115.277)

18. What disciplinary sanctions are residents subject to following an administrative or criminal finding that the resident engaged in resident-on-resident sexual abuse? (115.278)
   a. Are the sanctions proportionate to the nature and circumstances of the abuses committed, the residents’ disciplinary histories, and the sanctions imposed for similar offenses by other residents with similar histories? (115.278)
   b. Is mental disability or mental illness considered when determining sanctions? (115.278)

19. Does your facility have a sexual abuse incident review team? (115.286)
   a. If YES, does the team include upper-level management officials and allow for input from line supervisors, investigators, and medical or mental health practitioners? (115.286)

20. How does the team use the information from the sexual abuse incident review? (Probe: to identify any policy, training, or other issue related to the incident that indicate a need to change policy or practice.) (115.286)

21. Does the review team: (115.286)
   a. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; and/or other group dynamics at the facility (by “transgender,” I mean: people whose gender identity and/or gender expression does not match the sex and/or gender they were assigned at birth; by “intersex,” I mean: an individual born with external genitalia, internal reproductive organs, chromosome patterns, and/or endocrine systems that do not seem to fit typical definitions of male or female; by “gender non-conforming,” I mean: individuals who express their gender in a manner that breaks societal norms for one’s gender (e.g., someone who identifies as a girl/woman but wears clothing typically assigned to boys/men))? b. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?
   c. Assess the adequacy of staffing levels in that area during different shifts?
   d. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?