

PREA Audit: Auditor Compliance Tool

Adult Prisons and Jails

NATIONAL
PREA
RESOURCE
CENTER



BJA
Bureau of Justice Assistance
U.S. Department of Justice

Facility audited:
Dates of PREA Audit:
Date of Initial Submission:
Date of Final Submission:
Completed by:
Title:

PREVENTION PLANNING

§115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator.

Auditor Findings

115.11 (a) The agency shall have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlining the agency's approach to preventing, detecting, and responding to such conduct.

- ☐ Yes
☐ No

Verification Documents/Data for Auditor Review

Pre-Audit:

QUESTIONNAIRE:

The agency has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment in facilities it operates directly or under contract. **YES OR NO (FROM 115.11(a)-1)**

The facility has a policy outlining how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. **YES OR NO (FROM 115.11(a)-2)**

The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment. **YES OR NO (FROM 115.11(a)-3)**

The policy includes sanctions for those found to have participated in prohibited behaviors. **YES OR NO (FROM 115.11(a)-4)**

The policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates. **YES OR NO (FROM 115.11(a)-5)**

POLICY:

ZERO TOLERANCE (FROM 115.11(a)-1)

Refer to page/section: **(FROM 115.11(a)-1)**

POLICY OUTLINING IMPLEMENTATION PLAN (FROM 115.11(a)-2)

Refer to page/section: **(FROM 115.11(a)-2)**

AUDITOR NOTES:

Audit:

AUDITOR NOTES:

115.11 (b) The agency shall employ or designate an upper-level, agency-wide PREA coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency employs or designates an upper-level, agency-wide PREA coordinator. <i>YES OR NO (FROM 115.11(b)-1)</i> The PREA coordinator has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities. <i>YES OR NO (FROM 115.11(b)-2)</i> The position of the PREA coordinator in the agency's organizational structure: <i>(FROM 115.11(b)-3)</i> OTHER DOCUMENTATION: <i>AGENCY ORGANIZATIONAL CHART (FROM 115.11(b)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): PREA Coordinator – Q: 1, 2 AUDITOR NOTES:
115.11 (c) Where an agency operates more than one facility, each facility shall designate a PREA compliance manager with sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards. <i>(N/A if agency operates only one facility.)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: The facility has designated a PREA compliance manager. <i>YES OR NO (FROM 115.11(c)-1)</i> The PREA compliance manager has sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards. <i>YES OR NO (FROM 115.11(c)-2)</i> The position of the PREA compliance manager in the agency's organizational structure: <i>(FROM 115.11(c)-3)</i> The person to whom the PREA compliance manager reports: <i>(FROM 115.11(c)-4)</i> OTHER DOCUMENTATION: <i>AGENCY ORGANIZATIONAL CHART (FROM 115.11(b)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): PREA Compliance Manager – Q: 1 AUDITOR NOTES:
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Auditor Comments (including corrective actions needed if does not meet standard):		

§115.12 - Contracting with other entities for the confinement of inmates.

Auditor Findings		Verification Documents/Data for Auditor Review
115.12 (a) A public agency that contracts for the confinement of its inmates with private agencies or other entities, including other government agencies, shall include in any new contract or contract renewal the entity's obligation to adopt and comply with the PREA standards. <i>(N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: The agency has entered into or renewed a contract for the confinement of inmates on or after August 20, 2012, or since the last PREA audit, whichever is later. <i>YES OR NO (FROM 115.12(a)-1)</i> All of the above contracts require contractors to adopt and comply with PREA standards. <i>YES OR NO (FROM 115.12(a)-2)</i> On or after August 20, 2012, or since the last PREA audit, whichever is later: - The number of contracts for the confinement of inmates that the agency entered into or renewed with private entities or other government agencies: <i>(FROM 115.12(a)-3)</i> - The number of above contracts that DID NOT require contractors to adopt and comply with PREA standards: <i>(FROM 115.12(a)-4)</i> OTHER DOCUMENTATION: <i>CONTRACTS FOR THE CONFINEMENT OF INMATES ENTERED INTO (OR RENEWED) AFTER AUGUST 20, 2012, OR SINCE THE LAST PREA AUDIT (FROM 115.12(a)-1)</i> AUDITOR NOTES: _____ Audit: AUDITOR NOTES: _____
115.12 (b) Any new contract or contract renewal shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards. <i>(N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: All of the above contracts require the agency to monitor the contractor's compliance with PREA standards. <i>YES OR NO (FROM 115.12(b)-1)</i> On or after August 20, 2012, or since the last PREA audit, whichever is later, the number of contracts referenced in 115.12 (a)-3 that DO NOT require the agency to monitor contractor's compliance with PREA standards: <i>(FROM 115.12(b)-2)</i> OTHER DOCUMENTATION: <i>CONTRACTS FOR THE CONFINEMENT OF INMATES ENTERED INTO (OR RENEWED) AFTER AUGUST 20, 2012, OR SINCE THE LAST PREA AUDIT (FROM 115.12(a)-1)</i> AUDITOR NOTES: _____ Audit: INTERVIEW GUIDE(S): Agency's Contract Administrator – Q: 1, 2, 3 AUDITOR NOTES: _____

Overall Determination:

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

§115.13 - Supervision and monitoring.

Auditor Findings		Verification Documents/Data for Auditor Review
115.13 (a) The agency shall ensure that each facility it operates shall develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration: (1) Generally accepted detention and correctional practices; (2) Any judicial findings of inadequacy; (3) Any findings of inadequacy from Federal investigative agencies; (4) Any findings of inadequacy from internal or external oversight bodies; (5) All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated); (6) The composition of the inmate population; (7) The number and placement of supervisory staff; (8) Institution programs occurring on a particular shift; (9) Any applicable State or local laws, regulations, or standards; (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and (11) Any other relevant factors.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency requires each facility it operates to develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against abuse. <i>YES OR NO (FROM 115.13(a)-1)</i> Since August 20, 2012, or last PREA audit, whichever is later: - The average daily number of inmates: <i>(FROM 115.13(a)-2)</i> - The average daily number of inmates on which the staffing plan was predicated: <i>(FROM 115.13(a)-3)</i> OTHER DOCUMENTATION: <i>DOCUMENTATION OF STAFFING PLAN DEVELOPMENT PROCESS (FROM 115.13(a)-1)</i> <i>STAFFING PLAN (FROM 115.13(a)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Warden or Designee – Q: 1, 2, 3 PREA Compliance Manager – Q: 4 AUDITOR NOTES:
115.13 (b) In circumstances where the staffing plan is not complied with, the facility documents and justifies all deviations from the plan. <i>(N/A if no deviations from staffing plan.)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: Each time the staffing plan is not complied with, the facility documents and justifies all deviations from the staffing plan. <i>YES, NO, or N/A if no deviations from staffing plan (FROM 115.13(b)-1)</i> If documented, the six most common reasons for deviating from the staffing plan in the past 12 months: <i>(FROM 115.13(b)-2)</i> OTHER DOCUMENTATION: <i>DOCUMENTATION OF DEVIATIONS FROM STAFFING PLAN AND WRITTEN JUSTIFICATIONS FOR ALL SUCH DEVIATIONS (FROM 115.13(b)-1)</i> AUDITOR NOTES:

		Audit: INTERVIEW GUIDE(S): Warden or Designee – Q: 4 AUDITOR NOTES:
115.13 (c) Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA coordinator required by § 115.11, the agency shall assess, determine, and document whether adjustments are needed to: (1) The staffing plan established pursuant to paragraph (a) of this section; (2) The facility's deployment of video monitoring systems and other monitoring technologies; and (3) The resources the facility has available to commit to ensure adherence to the staffing plan.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: At least once every year the facility/agency, in collaboration with the PREA Coordinator, reviews the staffing plan to see whether adjustments are needed to: • The staffing plan; • The deployment of monitoring technology; or • The allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan. <i>YES OR NO (FROM 115.13(c)-1)</i> OTHER DOCUMENTATION: <i>DOCUMENTATION OF ANNUAL REVIEWS (FROM 115.13(c)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): PREA Coordinator – Q: 10 REVIEW: Additional annual reviews. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.13 (d) Each agency operating a facility shall implement a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Such policy and practice shall be implemented for night shifts as well as day shifts. Each agency shall have a policy to prohibit staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The facility requires that intermediate-level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. <i>YES OR NO (FROM 115.13(d)-1)</i> If YES, the facility documents unannounced rounds. <i>YES OR NO (FROM 115.13(d)-2)</i> If YES, over time the unannounced rounds cover all shifts. <i>YES OR NO (FROM 115.13(d)-3)</i> If YES, the facility prohibits staff from alerting other staff of the conduct of such rounds. <i>YES OR NO (FROM 115.13(d)-4)</i> POLICY: <i>UNANNOUNCED ROUNDS (FROM 115.13(d)-1)</i> Refer to page/section: <i>(FROM 115.13(d)-1)</i> OTHER DOCUMENTATION: <i>IF FACILITY DOCUMENTS UNANNOUNCED ROUNDS - EVIDENCE THAT ROUNDS WERE CONDUCTED AND THAT ROUNDS COVERED ALL SHIFTS (FROM 115.13(d)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Intermediate- or Higher-Level Facility Staff – Q: 1, 2, 3 PREA Audit Tour: Make observations and ask questions per the tour instructions. Note observations, etc.

REVIEW:

Video demonstrating unannounced rounds when available (spot-check).

Additional documentation of unannounced rounds and evidence that such rounds cover all shifts. **(UPLOAD IF NECESSARY)**

AUDITOR NOTES:**Overall Determination:**

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

§115.14 – Youthful inmates.

Auditor Findings		Verification Documents/Data for Auditor Review
115.14 (a) A youthful inmate shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters. <i>(N/A if facility does not have youthful inmates (inmates <18 years old).)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: The facility prohibits placing youthful inmates in a housing unit in which a youthful inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters. <i>YES OR NO (FROM 115.14(a)-1)</i> The facility has housing units to which youthful offenders are assigned that provide sight and sound separation between youthful and adult offenders in dayrooms, common areas, showers, and sleeping quarters. <i>YES OR NO (FROM 115.14(a)-2)</i> The facility places youthful inmates in the SAME HOUSING UNIT as adults. <i>YES OR NO (FROM 115.14(a)-3)</i> Youthful inmates who are placed in the SAME HOUSING UNIT as adults have sight, sound, or physical contact with any adult inmate through use of shower area, sleeping quarters, shared dayroom, or other common space. <i>YES OR NO (FROM 115.14(a)-4)</i> In the past 12 months: - The number of youthful inmates housed at this facility: <i>(FROM FACILITY CHARACTERISTICS)</i> - The number of housing units to which youthful offenders are assigned that provide sight and sound separation between youthful and adult offenders in dayrooms, common areas, showers, and sleeping quarters: <i>(FROM 115.14(a)-5)</i> - The number of youthful inmates placed in the SAME HOUSING UNIT as adults in this facility: <i>(FROM 115.14(a)-6)</i> POLICY: <i>YOUTHFUL INMATES (FROM 115.14(a)-1)</i> Refer to page/section: <i>(FROM 115.14(a)-1)</i> OTHER DOCUMENTATION: <i>DAILY POPULATION REPORT FOR THE PAST 12 MONTHS (FROM 115.14(a)-1)</i> AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Line Staff who Supervise Youthful Inmates – Q: 1, 2, 3, 5 Youthful Inmates – Q: 1 PREA Audit Tour: Make observations and ask questions per the tour instructions. Note observations, etc. [REDACTED] REVIEW: Daily population report for day of audit. <i>(UPLOAD IF NECESSARY)</i> Facility housing assignments to determine if youthful inmates are sight- and sound-separated. <i>(UPLOAD IF NECESSARY)</i> If NO to 115.14(a)-4, the effectiveness of barriers to sight, sound, and physical contact. AUDITOR NOTES: [REDACTED]

115.14 (b) In areas outside of housing units, agencies shall either: (1) maintain sight and sound separation between youthful inmates and adult inmates, or (2) provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact. <i>(N/A if facility does not have youthful inmates (inmates <18 years old).)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: The facility maintains sight, sound, and physical separation between youthful inmates and adult inmates in areas OUTSIDE HOUSING UNITS. <i>YES OR NO (FROM 115.14(b)-1)</i> The agency always provides direct staff supervision in areas OUTSIDE HOUSING UNITS where youthful inmates have sight, sound, or physical contact with adult inmates. <i>YES OR NO (FROM 115.14(b)-2)</i> POLICY: <i>YOUTHFUL INMATES (FROM 115.14(a)-1)</i> Refer to page/section: <i>(FROM 115.14(a)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Line Staff who Supervise Youthful Inmates – Q: 4 Education and Program Staff who Work With Youthful Inmates – Q: 2 Youthful Inmates – Q: 2 PREA Audit Tour: Make observations and ask questions per the tour instructions. Note observations, etc. REVIEW: Video demonstrating direct staff supervision when available (spot-check). AUDITOR NOTES:
115.14 (c) Agencies shall make its best efforts to avoid placing youthful inmates in isolation to comply with this provision. Absent exigent circumstances, agencies shall not deny youthful inmates daily large-muscle exercise and any legally required special education services to comply with this provision. Youthful inmates shall also have access to other programs and work opportunities to the extent possible. <i>(N/A if facility does not have youthful inmates (inmates <18 years old).)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: The facility documents the exigent circumstances of each instance in which youthful inmates' access to large-muscle exercise, legally required education services, and other programs and work opportunities was denied. <i>YES OR NO (FROM 115.14(c)-1)</i> In the past 12 months, the number of youthful inmates who have been placed in isolation in order to separate them from adult inmates: <i>(FROM 115.14(c)-2)</i> POLICY: <i>YOUTHFUL INMATES (FROM 115.14(a)-1)</i> Refer to page/section: <i>(FROM 115.14(a)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Line Staff who Supervise Youthful Inmates – Q: 6, 7 Education and Program Staff who Work with Youthful Inmates – Q: 1 Youthful Inmates – Q: 3, 4, 5, 6, 7 REVIEW: Housing assignments of youthful inmates to determine how many are being held in solitary confinement. <i>(UPLOAD IF NECESSARY)</i> Documentation of agency's best efforts to avoid placing youthful inmates in isolation, if available. <i>(UPLOAD IF NECESSARY)</i>

Sample of documentation (logs or other) of service delivery to youthful inmates pursuant to this standard. **(UPLOAD IF NECESSARY)**

Sample of documentation of exigent circumstances of instances where access to exercise, education, other programs, and work opportunities were denied. **(UPLOAD IF NECESSARY)**

AUDITOR NOTES:

Overall Determination:

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

§115.15 – Limits to cross-gender viewing and searches.

Auditor Findings		Verification Documents/Data for Auditor Review
115.15 (a) The facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The facility conducts cross-gender strip or cross-gender visual body cavity searches of inmates. YES OR NO (FROM 115.15(a)-1) In the past 12 months: - The number of cross-gender strip or cross-gender visual body cavity searches of inmates: (FROM 115.15(a)-2) - The number of cross-gender strip or cross-gender visual body cavity searches of inmates that did not involve exigent circumstances or were performed by non-medical staff: (FROM 115.15(a)-3) POLICY: SEARCHES (FROM 115.15(a)-1) Refer to page/section: (FROM 115.15(a)-1) AUDITOR NOTES: _____ Audit: INTERVIEW GUIDE(S): Non-medical staff (involved in cross-gender strip or visual searches) – Q# 1 REVIEW: Logs of cross-gender strip searches and cross-gender visual body cavity searches in the past 12 months. (UPLOAD IF NECESSARY) Logs of cross-gender strip and/or cross-gender body cavity searches conducted in the past 12 months that were not conducted by medical staff or were not conducted during exigent circumstances documented in the log. (UPLOAD IF NECESSARY) Documentation of instances where medical staff conducted such searches. (UPLOAD IF NECESSARY) AUDITOR NOTES: _____
115.15 (b) As of August 20, 2015, or August 20, 2017 for a facility whose rated capacity does not exceed 50 inmates, the facility shall not permit cross-gender pat-down searches of female inmates, absent exigent circumstances. Facilities shall not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision. <i>Note: This standard 115.15 (b) applies in the future—starting 2015 for facilities with 50 or more inmates and 2017 for facilities with less than 50 inmates. Hence, this should be excluded from the initial PREA audits (N/A for initial PREA audits).</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: The facility does not permit cross-gender pat-down searches of female inmates, absent exigent circumstances (facilities have until August 20, 2015, to comply; or August 20, 2017 if their rated capacity does not exceed 50 inmates). YES OR NO (FROM 115.15(b)-1) The facility does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision. YES OR NO (FROM 115.15(b)-2) In the past 12 months: - The number of pat-down searches of female inmates conducted by male staff: (FROM 115.15(b)-3) - The number of pat-down searches of female inmates conducted by male staff that did not involve exigent circumstance(s): (FROM 115.15(b)-4) POLICY: SEARCHES (FROM 115.15(a)-1) Refer to page/section: (FROM 115.15(a)-1)

		AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Random Sample of Staff – Q: 3 Random Sample of Inmates (Female) – Q: 3 REVIEW: Logs of cross-gender pat-down searches of female inmates to identify documentation of exigent circumstances. <i>(UPLOAD IF NECESSARY)</i> Video documenting pat-down searches of female inmates conducted by male staff when available (spot check). AUDITOR NOTES:
115.15 (c) The facility shall document all cross-gender strip searches and cross-gender visual body cavity searches, and shall document all cross-gender pat-down searches of female inmates.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Facility policy requires that all cross-gender strip searches and cross-gender visual body cavity searches be documented. <i>YES OR NO (FROM 115.15(c)-1)</i> Facility policy requires that all cross-gender pat-down searches of female inmates be documented. <i>YES, NO, or N/A if the facility does not house female inmates (FROM 115.15(c)-2)</i> POLICY: <i>SEARCHES (FROM 115.15(a)-1)</i> Refer to page/section: <i>(FROM 115.15(a)-1)</i> AUDITOR NOTES: Audit: REVIEW: Documentation of cross-gender strip searches and cross-gender visual body cavity searches of all inmates, and documentation of all cross-gender pat-down searches of female inmates. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.15 (d) The facility shall implement policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Such policies and procedures shall require staff of the opposite gender to announce their presence when entering an inmate housing unit.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Facility has implemented policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing via video camera). <i>YES OR NO (FROM 115.15(d)-1)</i> Policies and procedures require staff of the opposite gender to announce their presence when entering an inmate housing unit. <i>YES OR NO (FROM 115.15(d)-2)</i> POLICY: <i>CROSS-GENDER VIEWING (FROM 115.15(d)-1)</i> Refer to page/section: <i>(FROM 115.15(d)-1)</i> OTHER DOCUMENTATION: <i>LOGS OF EXIGENT CIRCUMSTANCES THAT MIGHT REQUIRE DEVIANCE FROM THE STANDARD (FROM 115.15(d)-1)</i> AUDITOR NOTES: Audit:

		INTERVIEW GUIDE(S): Random Sample of Inmates – Q: 1, 2 Random Sample of Staff – Q: 14, 15 PREA Audit Tour: Make observations and ask questions per the tour instructions. Note observations, etc. AUDITOR NOTES:
115.15 (e) The facility shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Facility has a policy prohibiting staff from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. <i>YES OR NO (FROM 115.15(e)-1)</i> Such searches (described in 115.15(e)-1) occurred in the past 12 months. <i>YES OR NO (FROM 115.15(e)-1)</i> POLICY: <i>TRANSGENDER OR INTERSEX INMATES (FROM 115.15(e)-1)</i> Refer to page/section: <i>(FROM 115.15(e)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Random Sample of Staff – Q: 4 Transgender/Intersex Inmates – Q: 2 AUDITOR NOTES:
115.15 (f) The agency shall train security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The percent of all security staff who received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs: <i>(FROM 115.15(f)-1) (The percentage given does not necessarily indicate compliance or non-compliance with the standard.)</i> OTHER DOCUMENTATION: <i>TRAINING CURRICULA (FROM 115.15(f)-1)</i> <i>TRAINING LOGS (FROM 115.15(f)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Random Sample of Staff – Q: 2 AUDITOR NOTES:
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Auditor Comments (including corrective actions needed if does not meet standard):		

§115.16 – Inmates with disabilities and inmates who are limited English proficient..

Auditor Findings		Verification Documents/Data for Auditor Review
115.16 (a) The agency shall take appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the agency shall ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skills, or who are blind or have low vision. An agency is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans With Disabilities Act, 28 CFR 35.164.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency has established procedures to provide disabled inmates equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. YES OR NO (FROM 115.16(a)-1) POLICY: EQUAL OPPORTUNITY: DISABLED OR LEP INMATES (FROM 115.16(a)-1) Refer to page/section: (FROM 115.16(a)-1) OTHER DOCUMENTATION: CONTRACTS WITH INTERPRETERS OR OTHER PROFESSIONALS HIRED TO ENSURE EFFECTIVE COMMUNICATION WITH INMATES WHO HAVE DISABILITIES (FROM 115.16(a)-1) WRITTEN MATERIALS USED FOR EFFECTIVE COMMUNICATION ABOUT PREA WITH INMATES WITH DISABILITIES OR LIMITED READING SKILLS (FROM 115.16(a)-1) DOCUMENTATION OF STAFF TRAINING ON PREA-COMPLIANT PRACTICES FOR INMATES WITH DISABILITIES (FROM 115.16(a)-1) AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Agency Head – Q:11 Inmates (with disabilities or who are limited English proficient) – Q: 1, 2, 3 PREA Audit Tour: Make observations and ask questions per the tour instructions. Note observations, etc. [REDACTED] REVIEW: If applicable, documentation that taking actions would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens. (UPLOAD IF NECESSARY) AUDITOR NOTES: [REDACTED]
115.16 (b) The agency shall take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency has established procedures to provide inmates with limited English proficiency equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. YES OR NO (FROM 115.16(b)-1) POLICY: EQUAL OPPORTUNITY: DISABLED OR LEP INMATES (FROM 115.16(a)-1) Refer to page/section: (FROM 115.16(b)-1) OTHER DOCUMENTATION: CONTRACTS WITH INTERPRETERS OR OTHER PROFESSIONALS HIRED TO ENSURE EFFECTIVE COMMUNICATION WITH

vocabulary.	INMATES WHO ARE LIMITED ENGLISH PROFICIENT (FROM 115.16(a)-1) WRITTEN MATERIALS USED FOR EFFECTIVE COMMUNICATION ABOUT PREA WITH INMATES WITH DISABILITIES OR LIMITED READING SKILLS (FROM 115.16(a)-1) DOCUMENTATION OF STAFF TRAINING ON PREA COMPLIANT PRACTICES FOR INMATES WITH DISABILITIES (FROM 115.16(a)-1) AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Inmates (with disabilities or who are limited English proficient) – Q: 1, 2, 3 AUDITOR NOTES:
115.16 (c) The agency shall not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under § 115.64, or the investigation of the inmate's allegations.	☐ Yes ☐ No Pre-Audit: QUESTIONNAIRE: Agency policy prohibits use of inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations. YES OR NO (FROM 115.16(c)-1) If YES, the agency or facility documents the limited circumstances in individual cases where inmate interpreters, readers, or other types of inmate assistants are used. (Absence of such documentation does not result in noncompliance with the standard.) YES OR NO (FROM 115.16(c)-2) In the past 12 months, the number of instances where inmate interpreters, readers, or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the resident's safety, the performance of first-response duties under §115.64, or the investigation of the resident's allegations: (FROM 115.16(c)-3) POLICY: INMATE INTERPRETERS, READERS, OR ASSISTANTS (FROM 115.16(c)-1) Refer to page/section: (FROM 115.16(c)-1) AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Random Sample of Staff – Q: 9 Inmates (with disabilities or who are limited English proficient) – Q: 1, 2, 3 REVIEW: Documentation of circumstances when inmate interpreters, readers, other inmate assistants were used. (UPLOAD IF NECESSARY) AUDITOR NOTES:
Overall Determination:	

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

§115.17 – Hiring and promotion decisions.

Auditor Findings		Verification Documents/Data for Auditor Review
§115.17 (a) The agency shall not hire or promote anyone who may have contact with inmates, and shall not enlist the services of any contractor who may have contact with inmates, who— (1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Agency policy prohibits hiring or promoting anyone who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with inmates who: - Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); - Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or - Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section. YES OR NO (FROM 115.17(a)-1) POLICY: POLICY ON HIRING AND PROMOTIONS (FROM 115.17(a)-1) Refer to page/section: (FROM 115.17(a)-1) AUDITOR NOTES: [REDACTED] Audit: REVIEW: Files of persons hired or promoted in the past 12 months to determine whether proper criminal record background checks have been conducted and questions regarding past conduct were asked and answered. (UPLOAD IF NECESSARY) AUDITOR NOTES: [REDACTED]
§115.17 (b) The agency shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Agency policy requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. YES OR NO (FROM 115.17(b)-1) POLICY: POLICY ON HIRING AND PROMOTIONS (FROM 115.17(a)-1) Refer to page/section: (FROM 115.17(a)-1) AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Administrative (Human Resources) Staff – Q: 2 AUDITOR NOTES: [REDACTED]

§115.17 (c) Before hiring new employees who may have contact with inmates, the agency shall: (1) Perform a criminal background records check; and (2) Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Agency policy requires that before it hires any new employees who may have contact with inmates, it (a) conducts criminal background record checks, and (b) consistent with federal, state, and local law, makes its <i>best efforts</i> to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. YES OR NO (FROM 115.17(c)-1) In the past 12 months: - The number of persons hired who may have contact with inmates who have had criminal background record checks: (FROM 115.17(c)-2) - The percent of persons hired who may have contact with inmates who have had criminal background record checks: (CALCULATED FROM 115.17(c)-2 AND # OF STAFF WHO HAVE CONTACT WITH INMATES FROM FACILITY CHARACTERISTICS) POLICY: POLICY ON HIRING AND PROMOTIONS (FROM 115.17(a)-1) Refer to page/section: (FROM 115.17(a)-1) AUDITOR NOTES: _____ Audit: INTERVIEW GUIDE(S): Administrative (Human Resources) Staff – Q: 1 REVIEW: Files of personnel hired in the past 12 months to determine that the agency has completed checks consistent with §115.17(c). (UPLOAD IF NECESSARY) AUDITOR NOTES: _____
§115.17 (d) The agency shall also perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Agency policy requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with inmates. YES OR NO (FROM 115.17(d)-1) In the past 12 months: - The number of contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates: (FROM 115.17(d)-2) - The percent of contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates: (CALCULATED FROM 115.17(d)-2 AND # OF CONTRACTS FOR SERVICES WITH CONTRACTORS FROM FACILITY CHARACTERISTICS) POLICY: POLICY ON HIRING AND PROMOTIONS (FROM 115.17(a)-1) Refer to page/section: (FROM 115.17(a)-1) AUDITOR NOTES: _____

		Audit: INTERVIEW GUIDE(S): Administrative (Human Resources) Staff – Q: 1 REVIEW: Records of background checks of contractors who might have contact with inmates. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: _____
§115.17 (e) The agency shall either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Agency policy requires that either criminal background record checks be conducted at least every five years for current employees and contractors who may have contact with inmates, or that a system is in place for otherwise capturing such information for current employees. <i>YES OR NO (FROM 115.17(e)-1)</i> POLICY: <i>POLICY ON BACKGROUND CHECKS OF CURRENT EMPLOYEES/CONTRACTORS (FROM 115.17(e)-1)</i> Refer to page/section: <i>(FROM 115.17(e)-1)</i> AUDITOR NOTES: _____ Audit: INTERVIEW GUIDE(S): Administrative (Human Resources) Staff – Q: 3 REVIEW: Documentation of background records checks of current employees and contractors at five-year intervals when applicable. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: _____
§115.17 (f) The agency shall ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose upon employees a continuing affirmative duty to disclose any such misconduct.	☐ Yes ☐ No	Pre-Audit: POLICY: <i>POLICY ON HIRING AND PROMOTIONS (FROM 115.17(a)-1)</i> Refer to page/section: <i>(FROM 115.17(a)-1)</i> <i>POLICY ON BACKGROUND CHECKS OF CURRENT EMPLOYEES/CONTRACTORS (FROM 115.17(e)-1)</i> Refer to page/section: <i>(FROM 115.17(d)-1)</i> AUDITOR NOTES: _____ Audit: INTERVIEW GUIDE(S): Administrative (Human Resources) Staff – Q: 4, 5 AUDITOR NOTES: _____
§115.17 (g) Material omissions regarding such misconduct, or the provision of materially false information, are grounds for termination.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination. <i>YES OR NO (FROM 115.17(g)-1)</i>

		POLICY: <i>POLICY ON HIRING AND PROMOTIONS (FROM 115.17(a)-1)</i> Refer to page/section: <i>(FROM 115.17(a)-1)</i> <i>POLICY ON BACKGROUND CHECKS OF CURRENT EMPLOYEES/CONTRACTORS (FROM 115.17(e)-1)</i> Refer to page/section: <i>(FROM 115.17(d)-1)</i> AUDITOR NOTES: Audit: AUDITOR NOTES:
§115.17 (h) Unless prohibited by law, the agency shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. <i>(N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law. Please provide a copy of the law.)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: POLICY: <i>POLICY ON HIRING AND PROMOTIONS (FROM 115.17(a)-1)</i> Refer to page/section: <i>(FROM 115.17(a)-1)</i> <i>POLICY ON BACKGROUND CHECKS OF CURRENT EMPLOYEES/CONTRACTORS (FROM 115.17(e)-1)</i> Refer to page/section: <i>(FROM 115.17(d)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Administrative (Human Resources) Staff – Q: 6 AUDITOR NOTES:
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Auditor Comments (including corrective actions needed if does not meet standard):		

§115.18 – Upgrades to facilities and technology.

Auditor Findings		Verification Documents/Data for Auditor Review
§115.18 (a) When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse. <i>(N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: The agency/facility has acquired a new facility or made a substantial expansion or modification to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later. YES OR NO (FROM 115.18(a)-1) AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Agency Head – Q: 1 Warden or Designee – Q: 5 PREA AUDIT TOUR: Tour areas of the facility that were renovated, modified, or expanded. REVIEW: Documentation on facility design, renovation, modification, or expansion. AUDITOR NOTES: [REDACTED]
§115.18 (b) When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect inmates from sexual abuse. <i>(N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: The agency/facility has installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later. YES OR NO (FROM 115.18(b)-1) AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Agency Head – Q: 2 Warden or Designee – Q: 6 PREA AUDIT TOUR: Check video monitoring system, electronic surveillance system, or other monitoring technology installed or updated since August 20, 2012 or since the last PREA audit, whichever is later. REVIEW: Minutes from meetings referencing installing or updating monitoring technology. (UPLOAD IF NECESSARY) AUDITOR NOTES: [REDACTED]
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Auditor Comments (including corrective actions needed if does not meet standard):		

RESPONSIVE PLANNING

§115.21 – Evidence protocol and forensic medical examinations.

Auditor Findings		Verification Documents/Data for Auditor Review
§115.21 (a) To the extent the agency is responsible for investigating allegations of sexual abuse, the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. <i>(N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)</i> Note. Review uniform evidence protocol for evidence that there is sufficient technical detail to aid responders in obtaining usable physical evidence.	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: The agency/facility is responsible for conducting administrative or criminal sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct). YES, Administrative ONLY; YES, Criminal ONLY; YES, BOTH; OR NO, NEITHER (FROM 115.21(a)-1) If another agency has responsibility for conducting either administrative or criminal investigations, the name of the agency that has responsibility: (FROM 115.21(a)-2) When conducting a sexual abuse investigation, the agency investigators follow a uniform evidence protocol. YES OR NO (FROM 115.21(a)-3) OTHER DOCUMENTATION: UNIFORM EVIDENCE PROTOCOL (FROM 115.21(a)-3) AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Random Sample of Staff – Q: 10, 12 AUDITOR NOTES:
§115.21 (b) The protocol shall be developmentally appropriate for youth where applicable, and, as appropriate, shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,” or similarly comprehensive and authoritative protocols developed after 2011. <i>(N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)</i> Note. Review uniform evidence protocol for evidence that it is developmentally appropriate for youth where applicable and as appropriate adapted from or otherwise based on the DOJ’s publication.	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: The protocol is developmentally appropriate for youth. YES, NO, OR N/A (FROM 115.21(b)-1) The protocol was adapted from or otherwise based on the most recent edition of the DOJ’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,” or similarly comprehensive and authoritative protocols developed after 2011. YES OR NO (FROM 115.21(b)-2) If NO, the source that was used to develop the protocol: (FROM 115.21(b)-2) OTHER DOCUMENTATION: UNIFORM EVIDENCE PROTOCOL (FROM 115.21(a)-3) ALTERNATIVE SOURCE USED TO DEVELOP PROTOCOL (IF APPLICABLE) TO DETERMINE APPROPRIATENESS (FROM 115.21(b)-1) AUDITOR NOTES: Audit: AUDITOR NOTES:

§115.21 (c) The agency shall offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency shall document its efforts to provide SAFEs or SANEs.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The facility offers all inmates who experience sexual abuse access to forensic medical examinations. YES, ONSITE; YES, OUTSIDE FACILITY; OR NO (FROM 115.21(c)-1) Forensic medical examinations are offered without financial cost to the victim. YES OR NO (FROM 115.21(c)-2) Where possible, examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). YES, NO, OR SOMETIMES (FROM 115.21(c)-3) - If sometimes, the description provided: (FROM 115.21(c)-3) When SANEs or SAFEs are not available, a qualified medical practitioner performs forensic medical examinations. YES OR NO (FROM 115.21(c)-4) The facility documents efforts to provide SANEs or SAFEs. YES OR NO (FROM 115.21(c)-5) In the past 12 months: - The number of forensic medical exams conducted: (FROM 115.21(c)-6) - The number of exams performed by SANEs/SAFEs: (FROM 115.21(c)-7) - The number of exams performed by a qualified medical practitioner: (FROM 115.21(c)-8) OTHER DOCUMENTATION: DOCUMENTATION OF EFFORTS TO PROVIDE SANEs/SAFEs (FROM 115.21(c)-5) DOCUMENTATION THAT FORENSIC MEDICAL EXAMS ARE OFFERED FOR FREE (FROM 115.21(c)-2) AUDITOR NOTES: _____ Audit: INTERVIEW GUIDE(S): SAFEs/SANEs Staff – Q: 1, 2 REVIEW: Documentation to corroborate that all inmate victims of sexual abuse have access to forensic medical examinations. (UPLOAD IF NECESSARY) Any available documentation that delineates responsibilities of outside medical and mental health practitioners. (UPLOAD IF NECESSARY) AUDITOR NOTES: _____
§115.21 (d) The agency shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the agency makes available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member. Agencies shall document efforts to secure services	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The facility attempts to make a victim advocate from a rape crisis center available to the victim, either in person or by other means. YES OR NO (FROM 115.21(d)-1) These efforts are documented. YES OR NO (FROM 115.21(d)-2) If and when a rape crisis center is not available to provide victim advocate services, the facility provides a qualified staff member from a community-based organization or a qualified agency staff member. YES OR NO (FROM 115.21(d)-3)

from rape crisis centers. For the purpose of this standard, a rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in 42 U.S.C. 14043g(b)(2)(C), to victims of sexual assault of all ages. The agency may utilize a rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services.	OTHER DOCUMENTATION: <i>DOCUMENTATION OF AGREEMENT(S) WITH RAPE CRISIS CENTER FOR SERVICES OR DOCUMENTATION OF EFFORTS (FROM 115.21(d)-2)</i> <i>DOCUMENTATION OF STAFF MEMBER'S QUALIFICATIONS IF AGENCY STAFF MEMBER USED (FROM 115.21(d)-3)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): PREA Compliance Manager – Q: 10, 11 Inmates who Reported a Sexual Abuse – Q: 9 AUDITOR NOTES:
§115.21 (e) As requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.	☐ Yes ☐ No Pre-Audit: QUESTIONNAIRE: If requested by the victim, a victim advocate, qualified agency staff member, or qualified community-based organization staff member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals. <i>YES OR NO (FROM 115.21(e)-1)</i> OTHER DOCUMENTATION: <i>RELEVANT DOCUMENTATION (FROM 115.21(e)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): PREA Compliance Manager – Q: 12 Inmates who Reported a Sexual Abuse – Q: 9 AUDITOR NOTES:
§115.21 (f) To the extent the agency itself is not responsible for investigating allegations of sexual abuse, the agency shall request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section. <i>(N/A if the agency/facility is responsible for administrative and criminal investigations.)</i>	☐ Yes ☐ No ☐ N/A Pre-Audit: QUESTIONNAIRE: If the agency is not responsible for investigating administrative or criminal allegations of sexual abuse and relies on another agency to conduct these investigations, the agency has requested that the responsible agency follow the requirements of paragraphs §115.21(a) through (e) of the standards. <i>YES, NO OR N/A if the agency/facility is responsible for investigating all allegations of sexual abuse (FROM 115.21(f)-1)</i> OTHER DOCUMENTATION: <i>AGREEMENTS/MOUS (FROM 115.21(f)-1)</i> AUDITOR NOTES: Audit: REVIEW: Documentation of the request regarding the requirements of §115.21(a) through (e) with outside investigating agency. <i>(UPLOAD IF NECESSARY)</i>

		AUDITOR NOTES:
115.21 (g)	The requirements of paragraphs (a) through (f) of this section shall also apply to: (1) Any State entity outside of the agency that is responsible for investigating allegations of sexual abuse in prisons or jails; and (2) Any Department of Justice component that is responsible for investigating allegations of sexual abuse in prisons or jails.	N/A
115.21 (h)	For the purposes of this section, a qualified agency staff member or a qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general.	N/A
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Auditor Comments (including corrective actions needed if does not meet standard):		

§115.22 – Policies to ensure referrals of allegations for investigations.

Auditor Findings	Verification Documents/Data for Auditor Review
§115.22 (a) The agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. ☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. <i>YES OR NO (FROM 115.22(a)-1)</i> In the past 12 months: - The number of allegations of sexual abuse and sexual harassment that were received: <i>(FROM 115.22(a)-2)</i> - The number of allegations resulting in an administrative investigation: <i>(FROM 115.22(a)-3)</i> - The number of allegations referred for criminal investigation: <i>(FROM 115.22(a)-4)</i> Referring to allegations received in the past 12 months, all administrative and/or criminal investigations were completed. <i>YES OR NO (FROM 115.22(a)-5)</i> If NO, the explanation provided: <i>(FROM 115.22(a)-5)</i> <i>POLICIES AND/OR PROCEDURES GOVERNING INVESTIGATIONS OF ALLEGATIONS OF SEXUAL ABUSE AND SEXUAL HARASSMENT (FROM 115.22(a)-1)</i> Refer to page/section: <i>(FROM 115.22(a)-1)</i> AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Agency Head – Q: 3, 4 REVIEW: Documentation of reports of sexual abuse and harassment and documentation of investigations, including full investigative reports with findings. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: [REDACTED]
§115.22 (b) The agency shall have in place a policy to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The agency publishes such policy on its website or, if it does not have one, makes the policy available through other means. The agency documents all such referrals. ☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency has a policy that requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior. <i>YES OR NO (FROM 115.22(b)-1)</i> Agency policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation is published on the agency website or made publicly available via other means. <i>YES OR NO (FROM 115.22(b)-2)</i> The agency documents all referrals of allegations of sexual abuse or sexual harassment for criminal investigation. <i>YES OR NO (FROM 115.22(b)-3)</i> POLICY: <i>INVESTIGATIVE POLICY (FROM 115.22(b)-1)</i> Refer to page/section: <i>(FROM 115.22(b)-1)</i>

		AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Investigative Staff – Q: 4 REVIEW: Verify that policy is on website or other means made publicly available. <i>(UPLOAD IF NECESSARY)</i> Documentation of referrals of allegations of sexual abuse/harassment. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
§115.22 (c) If a separate entity is responsible for conducting criminal investigations, such publication shall describe the responsibilities of both the agency and the investigating entity. <i>(N/A if the agency/facility is responsible for criminal investigations. See 115.21(a))</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: AUDITOR NOTES: Audit: REVIEW: Publication (website or paper) that describes investigative responsibilities of both the agency and the separate entity that conducts criminal investigations for the agency, if applicable. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
§115.22 (d) Any State entity responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails shall have in place a policy governing the conduct of such investigations.	N/A	
§115.22 (e) Any Department of Justice component responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in prisons or jails shall have in place a policy governing the conduct of such investigations.	N/A	
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Auditor Comments (including corrective actions needed if does not meet standard):		

TRAINING AND EDUCATION

§115.31 – Employee training.

Auditor Findings		Verification Documents/Data for Auditor Review
§115.31 (a) The agency shall train all employees who may have contact with inmates on: (1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates' rights to be free from sexual abuse and sexual harassment; (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in confinement; (6) The common reactions of sexual abuse and sexual harassment victims; (7) How to detect and respond to signs of threatened and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency trains all employees who may have contact with inmates on the following matters: LIST OF ALL CHECKED ELEMENTS (FROM 115.31(a)-1) The agency <i>DOES NOT</i> train all employees who may have contact with inmates on the following matters: LIST OF ALL UNCHECKED ELEMENTS (FROM 115.31(a)-1) POLICY: TRAINING POLICY AND/OR PROCEDURES (FROM 115.31(a)-1) Refer to page/section: (FROM 115.31(a)-1) OTHER DOCUMENTATION: TRAINING CURRICULUM (FROM 115.31(a)-1) Refer to pages/sections: (LIST OF REFERENCES FROM 115.31(a)-1) AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Random Sample of Staff – Q: 1 REVIEW: Sample of training records. (UPLOAD IF NECESSARY) AUDITOR NOTES:
§115.31 (b) Such training shall be tailored to the gender of the inmates at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only female inmates, or vice versa.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Training is tailored to the gender of the inmates at the facility. YES OR NO (FROM 115.31(b)-1) Employees who are reassigned from facilities housing the opposite gender are given additional training. YES OR NO (FROM 115.31(b)-2) POLICY: TRAINING POLICY AND/OR PROCEDURES (FROM 115.31(a)-1) Refer to page/section: (FROM 115.31(a)-1) OTHER DOCUMENTATION: TRAINING CURRICULUM (FROM 115.31(a)-1) AUDITOR NOTES:

	Audit: REVIEW: Sample of training records. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
§115.31 (c) All current employees who have not received such training shall be trained within one year of the effective date of the PREA standards, and the agency shall provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures. In years in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies.	☐ Yes ☐ No Pre-Audit: QUESTIONNAIRE: In the past 12 months: - The number of staff employed by the facility, who may have contact with inmates, who were trained in PREA requirements: <i>(FROM 115.31(c)-1)</i> - The percent of staff employed by the facility, who may have contact with inmates, who were trained in PREA requirements: <i>(CALCULATED FROM 115.31(c)-1 AND # OF STAFF EMPLOYED FROM FACILITY CHARACTERISTICS)</i> Since the last audit: - The number of staff employed by the facility, who may have contact with inmates, who were trained or retrained on the PREA requirements: <i>(FROM 115.31(c)-2)</i> - The percent of staff employed by the facility, who may have contact with inmates, who were trained or retrained in PREA requirements: <i>(CALCULATED FROM 115.31(c)-2 AND # OF STAFF EMPLOYED FROM FACILITY CHARACTERISTICS)</i> Between trainings, the agency provides employees who may have contact with inmates with refresher information about current policies regarding sexual abuse and sexual harassment. <i>(YES OR NO (FROM 115.31(c)-3))</i> - If YES, the description provided. <i>(FROM 115.31(c)-3)</i> The frequency with which employees who may have contact with inmates receive refresher training on PREA requirements: <i>(FROM 115.31(c)-4)</i> OTHER DOCUMENTATION: <i>TRAINING CURRICULUM (FROM 115.31(a)-1)</i> AUDITOR NOTES: Audit: REVIEW: Sample of training records. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.31 (d) The agency shall document, through employee signature or electronic verification, that employees understand the training they have received.	☐ Yes ☐ No Pre-Audit: QUESTIONNAIRE: The agency documents that employees who may have contact with inmates understand the training they have received through employee signature or electronic verification. <i>(YES OR NO (FROM 115.31(d)-1))</i> AUDITOR NOTES: Audit: REVIEW: Documentation of employee signatures or electronic verification signifying comprehension of the training. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:

Overall Determination:

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

§115.32 – Volunteer and contractor training.

Auditor Findings		Verification Documents/Data for Auditor Review
§115.32 (a) The agency shall ensure that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: All volunteers and contractors <i>who have contact with inmates</i> have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse/harassment prevention, detection, and response. YES OR NO (FROM 115.32(a)-1) In the past 12 months: - The number of volunteers and individual contractors who have been trained in agency's policies and procedures regarding sexual abuse/harassment prevention, detection, and response: (FROM 115.32(a)-2) - The percent of volunteers and individual contractors who have been trained in agency's policies and procedures regarding sexual abuse/harassment prevention, detection, and response: (CALCULATED FROM 115.32(a)-2 AND # OF VOLUNTEERS/CONTRACTORS FROM AGENCY CHARACTERISTICS) OTHER DOCUMENTATION: TRAINING CURRICULUM (FROM 115.32(a)-1) Refer to pages/sections: (FROM 115.32(a)-1) AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Volunteer(s) or Contractor(s) who have Contact with Inmates – Q: 1 REVIEW: Sample of training records of volunteers and contractors who have contact with inmates. (UPLOAD IF NECESSARY) AUDITOR NOTES: [REDACTED]
§115.32 (b) The level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates, but all volunteers and contractors who have contact with inmates shall be notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates. YES OR NO (FROM 115.32(b)-1) All volunteers and contractors <i>who have contact with inmates</i> have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. YES OR NO (FROM 115.32(b)-1) OTHER DOCUMENTATION: TRAINING CURRICULUM (FROM 115.32(a)-1) Refer to pages/sections: (FROM 115.32(a)-1) AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Volunteer(s) or Contractor(s) who have Contact with Inmates – Q: 2, 3 REVIEW: Sample of training records of volunteers and contractors. (see UPLOADED DOCUMENTS 115.32 (a) above)

		AUDITOR NOTES:
115.32 (c) The agency shall maintain documentation confirming that volunteers and contractors understand the training they have received.	☐ Yes ☐ No	Pre-Audit:
		QUESTIONNAIRE: The agency maintains documentation confirming that volunteers/contractors understand the training they have received. <i>YES OR NO (FROM 115.32(c)-1)</i>
		AUDITOR NOTES:
		Audit:
		REVIEW: Relevant documentation (e.g., signed acknowledgement of understanding by volunteers/contractors). <i>(UPLOAD IF NECESSARY)</i>
		AUDITOR NOTES:
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action)		
Auditor Comments (including corrective actions needed if does not meet standard): 		

§115.33 – Inmate education.

Auditor Findings		Verification Documents/Data for Auditor Review
§115.33 (a) During the intake process, inmates shall receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. ☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Inmates receive information at time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or harassment. <i>(YES OR NO (FROM 115.33(a)-1))</i> Of inmates admitted during the past 12 months: - The number who were given this information at intake: <i>(FROM 115.33(a)-2)</i> - The percent who were given this information at intake: <i>(CALCULATED FROM 115.33(a)-2 AND # OF INMATES ADMITTED FROM FACILITY CHARACTERISTICS)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Intake Staff – Q: 1, 2 Random Sample of Inmates – Q: 4 REVIEW: Intake records of inmates entering the facility in the past 12 months (spot check). <i>(UPLOAD IF NECESSARY)</i> Log or other record corroborating that those inmates received information at intake (e.g., inmate signatures). <i>(UPLOAD IF NECESSARY)</i> Any relevant education materials (e.g. inmate handbook) to ensure that relevant information is covered. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:	
	§115.33 (b) Within 30 days of intake, the agency shall provide comprehensive education to inmates either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents. ☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Of inmates admitted during the past 12 months whose length of stay in the facility was for 30 days or more: - The number who received such education within 30 days of intake: <i>(FROM 115.33(b)-1)</i> - The percent who received such education within 30 days of intake: <i>(CALCULATED FROM 115.33(b)-1 AND # OF INMATES ADMITTED FROM FACILITY CHARACTERISTICS)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Intake Staff – Q: 3, 4 Random Sample of Inmates – Q: 5 REVIEW: Intake records of inmates entering the facility in the past 12 months (spot check). <i>(UPLOAD IF NECESSARY)</i> Log or other record corroborating that those inmates received comprehensive PREA education within 30 days of intake (e.g., inmate signatures). <i>(UPLOAD IF NECESSARY)</i> Any relevant education materials (e.g. inmate handbook) to ensure that relevant information is covered. <i>(UPLOAD IF NECESSARY)</i>

		AUDITOR NOTES:
§115.33 (c) Current inmates who have not received such education shall be educated within one year of the effective date of the PREA standards, and shall receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Of the inmates on date of audit who did not receive comprehensive education within 30 days of intake as required in 115.33(b): - The number who have been so educated (as stated in 115.33 (b)-1) as of the date of audit: <i>(FROM 115.33(c)-1)</i> - The percent who have been so educated (as stated in 115.33 (b)-1) by as of the date of audit: <i>(CALCULATED FROM 115.33(c)-1 AND # OF INMATES ADMITTED PRIOR TO AUGUST 20, 2013, FROM FACILITY CHARACTERISTICS)</i> Of those who were NOT educated (as stated in 115.33 (b)-1) during this period, all inmates have been educated subsequently. <i>YES OR NO (FROM 115.33(c)-2)</i> - If YES, the date they were subsequently educated by: <i>(FROM 115.33(c)-2)</i> - If NO, the number who were not educated: <i>(FROM 115.33(c)-2)</i> Agency policy requires that inmates who are transferred from one facility to another be educated regarding their rights to be free from both sexual abuse/harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents to the extent that the policies and procedures of the new facility differ from those of the previous facility. <i>YES OR NO (FROM 115.33(c)-3)</i> POLICY: <i>AGENCY POLICY GOVERNING PREA EDUCATION OF INMATES (FROM 115.33(c)-3)</i> Refer to page/section: <i>(FROM 115.33(c)-3)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Intake Staff – Q: 2 REVIEW: Log or other record corroborating that current inmates received comprehensive PREA education within one year of the effective date of the PREA standards (e.g., inmate signatures). <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
§115.33 (d) The agency shall provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, otherwise disabled, as well as to inmates who have limited reading skills.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Inmate PREA education is available in accessible formats for all inmates including those who are: <i>LIST OF ALL CHECKED ELEMENTS (FROM 115.33(d)-1)</i> Inmate PREA education is <i>NOT</i> available in accessible formats for all inmates including those who are: <i>LIST OF ALL UNCHECKED ELEMENTS (FROM 115.33(d)-1)</i> POLICY: <i>AGENCY POLICY GOVERNING PREA EDUCATION OF INMATES (FROM 115.33(c)-3)</i> Refer to page/section: <i>(FROM 115.33(c)-3)</i> AUDITOR NOTES: Audit:

		REVIEW: Inmate education materials. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
§115.33 (e) The agency shall maintain documentation of inmate participation in these education sessions.	☐ Yes ☐ No	Pre-Audit:
		QUESTIONNAIRE: The agency maintains documentation of inmate participation in PREA education sessions. <i>YES OR NO (FROM 115.33(e)-1)</i>
		AUDITOR NOTES:
		Audit: REVIEW: Sample of documentation of inmate participation in education sessions. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
§115.33 (f) In addition to providing such education, the agency shall ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats.	☐ Yes ☐ No	Pre-Audit:
		QUESTIONNAIRE: The agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, inmate handbooks, or other written formats. <i>YES OR NO (FROM 115.33(f)-1)</i>
		AUDITOR NOTES:
		Audit: REVIEW: Education and informational materials (posters, inmate handbook, etc.) in compliance with the standard. <i>(UPLOAD IF NECESSARY)</i> PREA Audit Tour: Make observations and ask questions per the tour instructions. Note observations, etc.: AUDITOR NOTES:
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action)		
Auditor Comments (including corrective actions needed if does not meet standard):		

§115.34 – Specialized training: Investigations.

Auditor Findings		Verification Documents/Data for Auditor Review
§115.34 (a) In addition to the general training provided to all employees pursuant to § 115.31, the agency shall ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings. <i>(N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: Agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings. <i>YES, NO, OR N/A if agency does not conduct administrative or criminal sexual abuse investigations (FROM 115.34(a)-1)</i> POLICY: <i>AGENCY TRAINING POLICY (FROM 115.34(a)-1)</i> Refer to page/section: <i>(FROM 115.34(a)-1)</i> OTHER DOCUMENTATION: <i>TRAINING CURRICULUM (FROM 115.34(a)-2)</i> AUDITOR NOTES: _____ Audit: INTERVIEW GUIDE(S): Investigative Staff – Q: 1, 2 REVIEW: Training records/logs of investigative staff. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: _____
§115.34 (b) Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. <i>(N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: POLICY: <i>AGENCY TRAINING POLICY (FROM 115.34(a)-1)</i> Refer to page/section: <i>(FROM 115.34(a)-1)</i> OTHER DOCUMENTATION: <i>TRAINING CURRICULUM (FROM 115.34(a)-2)</i> AUDITOR NOTES: _____ Audit: INTERVIEW GUIDE(S): Investigative Staff – Q: 3 REVIEW: Training records/logs of investigative staff. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: _____
§115.34 (c) The agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations. <i>(N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a))</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: The agency maintains documentation showing that investigators have completed the required training. <i>YES OR NO (FROM 115.34(c)-1)</i> The number of investigators the agency currently employs: <i>(FROM # OF INVESTIGATORS FROM AGENCY INFORMATION)</i> The number of investigators currently employed who have completed the required training: <i>(FROM 115.34(c)-2)</i>

		OTHER DOCUMENTATION: <i>DOCUMENTATION THAT INVESTIGATORS HAVE COMPLETED TRAINING (FROM 115.34(b)-1)</i>
		AUDITOR NOTES:
		Audit: AUDITOR NOTES:
§115.34 (d) Any State entity or Department of Justice component that investigates sexual abuse in confinement settings shall provide such training to its agents and investigators who conduct such investigations. <i>Note to auditors: Agents and investigators must be trained in conducting investigations in confinement settings as per 115.34(b) above.</i>	N/A	
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action)		
Auditor Comments (including corrective actions needed if does not meet standard): 		

§115.35 – Specialized training: Medical and mental health care.

Auditor Findings		Verification Documents/Data for Auditor Review
§115.35 (a) The agency ensures that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: (1) How to detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment. <i>Note. Examine policy and verify that all required elements are addressed. Indicate reasons for variance from policy, if any.</i>	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities. YES OR NO (FROM 115.35(a)-1) The number of all medical and mental health care practitioners who work regularly at this facility who received the training: (FROM 115.35(a)-2) The percent of all medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy: (FROM 115.35(a)-2) POLICY: POLICY (FROM 115.35(a)-1) Refer to page/section: (FROM 115.35(a)-1) AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Medical and Mental Health Staff – Q: 2 REVIEW: Training records and personnel records to verify that regular practitioners have been trained. ("Regular" does not include practitioners who are engaged infrequently.) (UPLOAD IF NECESSARY) AUDITOR NOTES: [REDACTED]
§115.35 (b) If medical staff employed by the agency conduct forensic examinations, such medical staff shall receive the appropriate training to conduct such examinations. <i>(N/A if agency medical staff at the facility do not conduct forensic exams.)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: Agency medical staff at this facility conduct forensic exams: YES OR NO (FROM 115.35(b)-1) AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Medical and Mental Health Staff – Q: 1 REVIEW: Exam logs (spot-check). (UPLOAD IF NECESSARY) List of all medical staff at facility and a sample of training logs and forensic exam training curriculum: (UPLOAD IF NECESSARY) If contract medical staff are used, determine if trained: (UPLOAD IF NECESSARY) AUDITOR NOTES: [REDACTED]

§115.35 (c) The agency shall maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency maintains documentation showing that medical and mental health practitioners have completed the required training. <i>YES or NO (FROM 115.35(c)-1)</i> OTHER DOCUMENTATION: <i>DOCUMENTATION OF TRAINING (FROM 115.35(c)-1)</i> AUDITOR NOTES: _____ Audit: AUDITOR NOTES: _____
§115.35 (d) Medical and mental health care practitioners shall also receive the training mandated for employees under § 115.31 or for contractors and volunteers under § 115.32, depending upon the practitioner's status at the agency.	☐ Yes ☐ No	Pre-Audit: AUDITOR NOTES: _____ Audit: REVIEW: Training logs of medical and mental health care practitioners to ensure they received the training for employees AND contractors/volunteers (depending on their status) in the referenced standards. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: _____

Overall Determination:

☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

§115.41 – Screening for risk of victimization and abusiveness.

Auditor Findings		Verification Documents/Data for Auditor Review
115.41 (a) All inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency has a policy that requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abusiveness toward other inmates. <i>YES OR NO (FROM 115.41(a)-1)</i> POLICY: <i>SCREENING POLICY (FROM 115.41(a)-1)</i> Refer to page/section: <i>(FROM 115.41(a)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Staff Responsible for Risk Screening – Q: 1 Random Sample of Inmates – Q: 7 PREA Audit Tour: Make observations and ask questions per the tour instructions. Note observations, etc. AUDITOR NOTES:
115.41 (b) Intake screening shall ordinarily take place within 72 hours of arrival at the facility.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The policy requires that inmates be screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their intake. <i>YES OR NO (FROM 115.41(b)-1)</i> In the past 12 months: - The number of inmates entering the facility (either through intake or transfer) whose length of stay in the facility was for 72 hours or more who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility: <i>(FROM 115.41(b)-2)</i> - The percent of inmates entering the facility (either through intake or transfer) whose length of stay in the facility was for 72 hours or more who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility: <i>(CALCULATED FROM 115.41(b)-2 AND # OF INMATES ADMITTED FROM FACILITY CHARACTERISTICS)</i> POLICY: <i>SCREENING POLICY (FROM 115.41(a)-1)</i> Refer to page/section: <i>(FROM 115.41(a)-1)</i> AUDITOR NOTES: Audit: REVIEW: Records for inmates admitted to the facility within the past 12 months for evidence of appropriate screening within 72 hours. <i>(UPLOAD IF NECESSARY)</i>

		INTERVIEW GUIDE(S): Staff Responsible for Risk Screening – Q: 2 Random Sample of Inmates – Q: 7 AUDITOR NOTES:
115.41 (c) Such assessments shall be conducted using an objective screening instrument.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Risk assessment is conducted using an objective screening instrument. <i>YES OR NO (FROM 115.41(c)-1)</i> OTHER DOCUMENTATION: <i>SCREENING INSTRUMENT (FROM 115.41(c)-1)</i> AUDITOR NOTES: Audit: AUDITOR NOTES:
115.41 (d) The intake screening shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability; (2) The age of the inmate; (3) The physical build of the inmate; (4) Whether the inmate has previously been incarcerated; (5) Whether the inmate's criminal history is exclusively nonviolent; (6) Whether the inmate has prior convictions for sex offenses against an adult or child; (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) Whether the inmate has previously experienced sexual victimization; (9) The inmate's own perception of vulnerability; and (10) Whether the inmate is detained solely for civil immigration purposes. <i>Note each item prescribed by the PREA standard that is missing from the facility's risk screening instrument; note each item not prescribed in the PREA standards that is included in the facility's instrument. (In order to meet the requirements of the standard, the screening should use all criteria (1–10), at a minimum, to assess risk.)</i>	☐ Yes ☐ No	Pre-Audit: OTHER DOCUMENTATION: <i>SCREENING INSTRUMENT (FROM 115.41(c)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Staff Responsible for Risk Screening – Q: 3, 4 AUDITOR NOTES:

115.41 (e) The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive. <i>Note: Each item prescribed by the PREA standards that is missing from the facility's risk screening instrument; note each item not prescribed in the PREA standards that is included in the facility's instrument. (In order to meet the requirements of the standard, the screening should use all criteria (1–3) to assess risk.)</i>	☐ Yes ☐ No	Pre-Audit: OTHER DOCUMENTATION: <u>SCREENING INSTRUMENT (FROM 115.41(c)-1)</u> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Staff Responsible for Risk Screening – Q: 3, 4 AUDITOR NOTES:
115.41 (f) Within a set time period, not to exceed 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The policy requires that the facility reassess each inmate's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the inmate's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening. <u>YES OR NO (FROM 115.41(f)-1)</u> In the past 12 months: - The number of inmates entering the facility (either through intake or transfer) who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake: <u>(FROM 115.41(f)-2)</u> - The percent of inmates entering the facility (either through intake or transfer) who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake: <u>(CALCULATED FROM 115.41(f)-2 AND # OF INMATES ADMITTED FROM FACILITY CHARACTERISTICS)</u> POLICY: <u>SCREENING POLICY (FROM 115.41(a)-1)</u> Refer to page/section: <u>(FROM 115.41(f)-1)</u> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Staff Responsible for Risk Screening – Q: 6 Random Sample of Inmates – Q: 8 REVIEW: Records of initial assessment and reassessment for risk of sexual victimization or abusiveness. <u>(UPLOAD IF NECESSARY)</u> AUDITOR NOTES:
115.41 (g) An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The policy requires that an inmate's risk level be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. <u>YES OR NO (FROM 115.41(g)-1)</u>

risk of sexual victimization or abusiveness.	POLICY: <i>SCREENING POLICY (FROM 115.41(a)-1)</i> Refer to page/section: <i>(FROM 115.41(g)-1)</i> AUDITOR NOTES:  Audit: INTERVIEW GUIDE(S): Staff Responsible for Risk Screening – Q: 5 Random Sample of Inmates – Q: 8 REVIEW: Records of inmates who were reassessed for risk of sexual victimization or abusiveness. <i>(UPLOAD IF NECESSARY)</i> Sample of records of inmates who have been victims or perpetrators of sexual abuse for confirmation of reassessment. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: 
115.41 (h) Inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section.	☐ Yes ☐ No Pre-Audit: QUESTIONNAIRE: The policy prohibits disciplining inmates for refusing to answer (or for not disclosing complete information related to) questions regarding: <i>YES OR NO (FROM 115.41(h)-1)</i> • Whether or not the inmate has a mental, physical, or developmental disability; • Whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; • Whether or not the inmate has previously experienced sexual victimization; and • The inmate's own perception of vulnerability. POLICY: <i>SCREENING POLICY (FROM 115.41(a)-1)</i> Refer to page/section: <i>(FROM 115.41(h)-1)</i> AUDITOR NOTES:  Audit: INTERVIEW GUIDE(S): Staff Responsible for Risk Screening – Q: 7 AUDITOR NOTES: 
115.41 (i) The agency shall implement appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.	☐ Yes (describe in notes) ☐ No Pre-Audit: AUDITOR NOTES:  POLICY: <i>SCREENING POLICY (FROM 115.41(a)-1)</i> Refer to page/section: <i>(FROM 115.41(i)-1)</i> Audit: INTERVIEW GUIDE(S): PREA Coordinator – Q: 4 PREA Compliance Manager – Q: 6 Staff Responsible for Risk Screening – Q: 8

	AUDITOR NOTES:

Overall Determination:

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

§115.42 – Use of screening information.

Auditor Findings		Verification Documents/Data for Auditor Review
115.42 (a) The agency shall use information from the risk screening required by § 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency/facility uses information from the risk screening required by § 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. YES OR NO (FROM 115.42(a)-1) OTHER DOCUMENTATION: DOCUMENTATION OF USE OF SCREENING INFORMATION FOR THESE PURPOSES (FROM 115.42(a)-1) DOCUMENTATION OF HOW DECISIONS ARE MADE (FROM 115.42(a)-1) AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): PREA Compliance Manager – Q: 5 Staff Responsible for Risk Screening – Q: 9 REVIEW: Documentation of risk-based housing decisions. (UPLOAD IF NECESSARY) AUDITOR NOTES: [REDACTED]
115.42 (b) The agency shall make individualized determinations about how to ensure the safety of each inmate.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency/facility makes individualized determinations about how to ensure the safety of each inmate. YES OR NO (FROM 115.42(b)-1) POLICY: RELEVANT POLICY (FROM 115.42(b)-1) Refer to page/section: (FROM 115.42(b)-1) AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Staff Responsible for Risk Screening – Q: 9 AUDITOR NOTES: [REDACTED]
115.42 (c) In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency/facility makes housing and program assignments for transgender or intersex inmates in the facility on a case-by-case basis. YES OR NO (FROM 115.42(c)-1) POLICY: RELEVANT POLICY (FROM 115.42(c)-1) Refer to page/section: (FROM 115.42(c)-1)

whether the placement would present management or security problems.		AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): PREA Compliance Manager – Q: 14 Transgender/Intersex Inmates – Q: 1, 2 AUDITOR NOTES:
115.42 (d) Placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate.	☐ Yes ☐ No	Pre-Audit: POLICY: <i>RELEVANT POLICY (FROM 115.42(c)-1)</i> Refer to page/section: <i>(FROM 115.42(c)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): PREA Compliance Manager – Q: 15 Staff Responsible for Risk Screening – Q: 10 REVIEW: Documentation of reassessment of programming assignments for each transgender or intersex inmate in compliance with the standard. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.42 (e) A transgender or intersex inmate's own views with respect to his or her own safety shall be given serious consideration.	☐ Yes ☐ No	Pre-Audit: POLICY: <i>RELEVANT POLICY (FROM 115.42(c)-1)</i> Refer to page/section: <i>(FROM 115.42(c)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): PREA Compliance Manager – Q: 16 Staff Responsible for Risk Screening – Q: 11 Transgender and Intersex Inmates – Q: 1 AUDITOR NOTES:
115.42 (f) Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.	☐ Yes ☐ No	Pre-Audit: POLICY: <i>RELEVANT POLICY (FROM 115.42(c)-1)</i> Refer to page/section: <i>(FROM 115.42(c)-1)</i>

		AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): PREA Compliance Manager – Q: 17 Staff Responsible for Risk Screening – Q: 12 Transgender/Intersex Inmates – Q: 3 PREA AUDIT TOUR: Tour living units and accommodations made for transgender and intersex inmates to shower separately from other inmates. AUDITOR NOTES:
115.42 (g) The agency shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates.	☐ Yes ☐ No	Pre-Audit: POLICY: <i>RELEVANT POLICY (FROM 115.42(c)-1)</i> Refer to page/section: <i>(FROM 115.42(c)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): PREA Coordinator – Q: 5 PREA Compliance Manager – Q: 13 Transgender/Intersex/Gay/Lesbian Inmates – Q: 2, 4 REVIEW: The title, status, and findings of any consent decree, legal settlement, or legal judgment requiring a facility to establish a dedicated facility, unit, or wing for lesbian, gay, bisexual, transgender, or intersex inmates. <i>(UPLOAD IF NECESSARY)</i> Documentation of housing assignments of inmates identified to be lesbian, gay, bisexual, transgender, or intersex for compliance with the standard. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Auditor Comments (including corrective actions needed if does not meet standard):		

§115.43 – Protective custody.

Auditor Findings		Verification Documents/Data for Auditor Review
115.43 (a) Inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency has a policy prohibiting the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. YES OR NO (FROM 115.43(a)-1) The number of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment: (FROM 115.43(a)-2) POLICY: AGENCY POLICY (FROM 115.43(a)-1) Refer to page/section: (FROM 115.43(a)-1) AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Warden or Designee – Q: 8 REVIEW: Records and documentation of housing assignments of inmates at high risk of sexual victimization. (UPLOAD IF NECESSARY) AUDITOR NOTES: [REDACTED]
115.43 (b) Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document: (1) The opportunities that have been limited; (2) The duration of the limitation; and (3) The reasons for such limitations.	☐ Yes ☐ No	Pre-Audit: POLICY: AGENCY POLICY (FROM 115.43(a)-1) Refer to page/section: (FROM 115.43(a)-1) AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Staff who Supervise Inmates in Segregated Housing – Q: 1, 2 Inmates in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse) – Q: 2 PREA Audit Tour: Make observations and ask questions per the tour instructions. Note observations, etc. [REDACTED] REVIEW: Documentation of in-cell AND out-of-cell programs, privileges, education, and work opportunities for inmates in segregated housing for this purpose. (UPLOAD IF NECESSARY) If the facility restricts access to programs, privileges, education, or work opportunities, documentation of: (UPLOAD IF NECESSARY) • The opportunities that have been limited; • The duration of the limitations; and • The reasons for such limitations.

		AUDITOR NOTES:
115.43 (c) The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: In the past 12 months, the number of inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement: <i>(FROM 115.43(c)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Warden or Designee – Q: 9, 10 Staff who Supervise Inmates in Segregated Housing – Q: 3, 4 Inmates in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse) – Q: 3 REVIEW: Records for length of placement in segregated housing for those at risk of sexual victimization to verify that: - Inmates are placed in involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged; and - Inmates are placed in involuntary segregated housing for a period that does not ordinarily exceed 30 days. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.43 (d) If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall clearly document: (1) The basis for the facility's concern for the inmate's safety; and (2) The reason why no alternative means of separation can be arranged.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: From a review of case files of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH: - A statement of the basis for facility's concern for the inmate's safety; and - The reason or reasons why alternative means of separation could not be arranged: <i>(FROM 115.43(d)-1)</i> AUDITOR NOTES: Audit: REVIEW: Case files of inmates at risk of sexual victimization held in involuntary segregated housing in the past 12 months. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.43 (e) Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: If an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population. <i>YES OR NO (FROM 115.43(e)-1)</i> POLICY: <i>AGENCY POLICY (FROM 115.43(a)-1)</i> Refer to page/section: <i>(FROM 115.43(a)-1)</i>

OTHER DOCUMENTATION:

DOCUMENTATION OF 30 DAY REVIEWS (FROM 115.43(e)-1)

AUDITOR NOTES:

Audit:

INTERVIEW GUIDE(S):

Staff who Supervise Inmates in Segregated Housing – Q: 5

Inmates in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse) – Q: 4

AUDITOR NOTES:

Overall Determination:

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

REPORTING

§115.51 – Inmate reporting.

Auditor Findings		Verification Documents/Data for Auditor Review
115.51 (a) The agency shall provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency has established procedures allowing for multiple internal ways for inmates to report privately to agency officials about: - Sexual abuse or sexual harassment; - Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment; AND - Staff neglect or violation of responsibilities that may have contributed to such incidents. YES OR NO (FROM 115.51(a)-1) POLICY: INMATE REPORTING POLICY (FROM 115.51(a)-1) Refer to page/section: (FROM 115.51(a)-1) OTHER DOCUMENTATION: OTHER RELEVANT DOCUMENTATION ON INMATE REPORTING (E.G., INMATE HANDBOOKS) (FROM 115.51(a)-1) AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Random Sample of Staff – Q: 7 Random Sample of Inmates – Q: 9 PREA Audit Tour: Make observations and ask questions per the tour instructions. Note observations, etc.: AUDITOR NOTES:
115.51 (b) The agency shall also provide at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Inmates detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency. YES OR NO (FROM 115.51(b)-1) The agency has a policy requiring inmates detained solely for civil immigration purposes be provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security. YES OR NO (FROM 115.51(b)-2) POLICY: INMATE REPORTING POLICY (FROM 115.51(a)-1) Refer to page/section: (FROM 115.51(a)-1) OTHER DOCUMENTATION: DOCUMENTATION OF AGREEMENT WITH OUTSIDE PUBLIC OR PRIVATE ENTITY RESPONSIBLE FOR TAKING REPORTS (FROM 115.51(b)-1) AUDITOR NOTES:

		Audit: INTERVIEW GUIDE(S): PREA Compliance Manager – Q: 7, 8 Random Sample of Inmates – Q: 9, 10 PREA Audit Tour: Make observations and ask questions per the tour instructions. Note observations, etc. REVIEW Information provided to inmates detained solely for civil immigration purposes. (UPLOAD IF NECESSARY) AUDITOR NOTES:
115.51 (c) Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. YES OR NO (FROM 115.51(c)-1) Staff are required to document verbal reports. YES OR NO (FROM 115.51(c)-2) • If YES, the timeframe within which staff are required to document verbal reports: (FROM 115.51(c)-2) • If NO, the explanation provided: (FROM 115.51(c)-2) POLICY: INMATE REPORTING POLICY (FROM 115.51(a)-1) Refer to page/section: (FROM 115.51(a)-1) OTHER DOCUMENTATION: OTHER RELEVANT DOCUMENTATION ON INMATE REPORTING (E.G., INMATE HANDBOOKS) (FROM 115.51(a)-1) DOCUMENTATION MADE OF VERBAL REPORTS (FROM 115.51(c)-2) AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Random Sample of Staff – Q: 8 Random Sample of Inmates – Q: 11 AUDITOR NOTES:
115.51 (d) The agency shall provide a method for staff to privately report sexual abuse and sexual harassment of inmates.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency has established procedures for staff to privately report sexual abuse and sexual harassment of inmates. YES OR NO (FROM 115.51(d)-1) • If YES, the description provided: (FROM 115.51(d)-1) • If NO, the explanation provided: (FROM 115.51(d)-1) Staff are informed of these procedures in the following ways: (FROM 115.51(d)-2) POLICY: STAFF REPORTING POLICY OR PROCEDURES (FROM 115.51(d)-1) Refer to page/section: (FROM 115.51(d)-1)

OTHER DOCUMENTATION:

OTHER DOCUMENTATION, SUCH AS STAFF HANDBOOKS (FROM 115.51(d)-2)

AUDITOR NOTES:

Audit:

INTERVIEW GUIDE(S):

Random Sample of Staff – Q: 6

AUDITOR NOTES:

Overall Determination:

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

§115.52 – Exhaustion of administrative remedies.

Auditor Findings		Verification Documents/Data for Auditor Review
115.52 (a) An agency shall be exempt from this standard if it does not have administrative procedures to address inmate grievances regarding sexual abuse. <i>Note: If no, standard 115.52 does not apply to the agency and does not mean non-compliance.</i>	☐ Exempt ☐ Not Exempt	Pre-Audit: QUESTIONNAIRE: The agency has an administrative procedure for dealing with inmate grievances regarding sexual abuse. YES OR NO (FROM 115.52(a)-1) POLICY: RELEVANT POLICY/PROCEDURE REGARDING INMATE GRIEVANCES OF SEXUAL ABUSE (FROM 115.52(a)-1) Refer to page/section: (FROM 115.52(a)-1) AUDITOR NOTES: [REDACTED] Audit: AUDITOR NOTES: [REDACTED]
115.52 (b) (1) The agency shall not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. (2) The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse. (3) The agency shall not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. (4) Nothing in this section shall restrict the agency's ability to defend against an inmate lawsuit on the ground that the applicable statute of limitations has expired. <i>(N/A if agency is exempt from this standard.)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: Agency policy or procedure allows an inmate to submit a grievance regarding an allegation of sexual abuse at any time regardless of when the incident is alleged to have occurred. YES OR NO (FROM 115.52(b)-1) If NO, time limit for an inmate to submit a grievance regarding an allegation of sexual abuse: (FROM 115.52(b)-1) Agency policy requires an inmate to use an <i>informal</i> grievance process, or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse. YES OR NO (FROM 115.52(b)-1) POLICY: RELEVANT POLICY/PROCEDURE REGARDING INMATE GRIEVANCES OF SEXUAL ABUSE (FROM 115.52(a)-1) Refer to page/section: (FROM 115.52(a)-1) AUDITOR NOTES: [REDACTED] Audit: REVIEW: Inmate handbook to determine that relevant information is provided. (UPLOAD IF NECESSARY) AUDITOR NOTES: [REDACTED]
115.52 (c) The agency shall ensure that— (1) An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and (2) Such grievance is not referred to a staff member who is the subject of the complaint. <i>(N/A if agency is exempt from this standard.)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: Agency policy and procedure allows an inmate to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. YES OR NO (FROM 115.52(c)-1) Agency policy and procedure requires that an inmate grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint. YES OR NO (FROM 115.52(c)-2) POLICY: RELEVANT POLICY/PROCEDURE REGARDING INMATE GRIEVANCES OF SEXUAL ABUSE (FROM 115.52(a)-1) Refer to page/section: (FROM 115.52(c)-1 and 2)

		AUDITOR NOTES: Audit: REVIEW: Inmate handbook to determine that relevant information is provided. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.52 (d) (1) The agency issues a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. (2) Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal. (3) The agency may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The agency shall notify the inmate in writing of any such extension and provide a date by which a decision will be made. (4) At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level. <i>(N/A if agency is exempt from this standard.)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: Agency policy and procedure requires that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance. <i>YES OR NO (FROM 115.52(d)-1)</i> In the past 12 months: - The number of grievances filed that alleged sexual abuse: <i>(FROM 115.52(d)-2)</i> - The number of grievances alleging sexual abuse that reached final decision within 90 days after being filed: <i>(FROM 115.52(d)-3)</i> - The number of grievances alleging sexual abuse that involved extensions because final decision was not reached within 90 days: <i>(FROM 115.52(d)-4)</i> In cases where the agency requested an extension of the 90-day period to respond to a grievance and had reached final decisions by the time of the PREA audit, some grievances took longer than a 70-day extension period to resolve. <i>YES OR NO (FROM 115.52(d)-5)</i> If YES, the number of grievances that took longer than a 70-day extension period to resolve: <i>(FROM 115.52(d)-5)</i> The agency always notifies the inmate in writing when the agency files for an extension, including notice of the date by which a decision will be made. <i>YES OR NO (FROM 115.52(d)-6)</i> POLICY: <i>RELEVANT POLICY/PROCEDURE REGARDING INMATE GRIEVANCES OF SEXUAL ABUSE (FROM 115.52(a)-1)</i> Refer to page/section: <i>(FROM 115.52(d)-1)</i> OTHER DOCUMENTATION: <i>SUPPORTING LOGS/RECORDS THAT INVOLVED AN EXTENSION (FROM 115.52(d)-4)</i> <i>DOCUMENTATION OF WRITTEN NOTIFICATIONS OF EXTENSIONS (FROM 115.52(d)-6)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Inmates who Reported a Sexual Abuse – Q: 15, 16, 17, 18 REVIEW: Any grievance that alleged sexual abuse and their final decision. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.52 (e) (1) Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: Agency policy and procedure permits third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of inmates. <i>YES OR NO (FROM 115.52(e)-1)</i>

allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates. (2) If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process. (3) If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate's decision. <i>(N/A if agency is exempt from this standard.)</i>	Agency policy and procedure requires that if the inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline. <i>YES OR NO (FROM 115.52(e)-2)</i> The number of grievances alleging sexual abuse filed by inmates in the past 12 months in which the inmate declined third-party assistance, containing documentation of the inmate's decision to decline: <i>(FROM 115.52(e)-3)</i> POLICY: <i>RELEVANT POLICY/PROCEDURE REGARDING INMATE GRIEVANCES OF SEXUAL ABUSE (FROM 115.52(a)-1)</i> Refer to page/section: <i>(FROM 115.52(e)-1 and 2)</i> AUDITOR NOTES: <i>Audit:</i> REVIEW: Documentation of third-party reports and declination of third-party assistance. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.52 (f) (1) The agency shall establish procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. (2) After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken, shall provide an initial response within 48 hours, and shall issue a final agency decision within 5 calendar days. The initial response and final agency decision documents the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. <i>(N/A if agency is exempt from this standard.)</i>	☐ Yes ☐ No ☐ N/A Pre-Audit: QUESTIONNAIRE: The agency has a policy and established procedures for filing an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. <i>YES OR NO (FROM 115.52(f)-1)</i> Agency policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires an initial response within 48 hours. <i>YES OR NO (FROM 115.52(f)-2)</i> - The number of emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months: <i>(FROM 115.52(f)-3)</i> - The number of those grievances in 115.52 (e) – 3 that had an initial response within 48 hours: <i>(FROM 115.52(f)-4)</i> Agency policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires that a final agency decision be issued within five days. <i>YES OR NO (FROM 115.52(f)-5)</i> The number of the grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months that reached final decisions within five days: <i>(FROM 115.52(f)-6)</i> POLICY: <i>POLICY/PROCEDURE FOR EMERGENCY GRIEVANCES (FROM 115.52(f)-1)</i> Refer to page/section: <i>(FROM 115.52(f)-1, 2 and 5))</i> AUDITOR NOTES: <i>Audit:</i> REVIEW: Documentation of emergency grievances filed pursuant to this standard. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.52 (g) The agency may discipline an inmate FINAL April 18, 2014	☐ Yes Pre-Audit:

for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith.

(N/A if agency is exempt from this standard.)

- ☐ No
☐ N/A

QUESTIONNAIRE:

The agency has a written policy that limits its ability to discipline an inmate for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the inmate filed the grievance in bad faith. ***YES OR NO (FROM 115.52(g)-1)***

In the past 12 months, the number of inmate grievances alleging sexual abuse that resulted in disciplinary action by the agency against the inmate for having filed the grievance in bad faith: ***(FROM 115.52(g)-2)***

POLICY:

POLICY (FROM 115.52(g)-1)

Refer to page/section: ***(FROM 115.52(g)-1)***

AUDITOR NOTES:

Audit:

REVIEW:

Documentation of any such disciplinary actions. ***(UPLOAD IF NECESSARY)***

AUDITOR NOTES:

Overall Determination:

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

§115.53 – Inmate access to outside confidential support services.

Auditor Findings		Verification Documents/Data for Auditor Review
115.53 (a) The facility shall provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations, and, for persons detained solely for civil immigration purposes, immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies in as confidential a manner as possible.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse by: - Giving inmates mailing addresses and telephone numbers (including toll-free hotline numbers where available) for local, state, or national victim advocacy or rape crisis organizations. YES OR NO (FROM 115.53(a)-1) - Giving inmates mailing addresses and telephone numbers (including toll-free hotline numbers where available) for immigrant services agencies for persons detained solely for civil immigration purposes. YES OR NO (FROM 115.53(a)-1) - Enabling reasonable communication between inmates and these organizations in as confidential a manner as possible. YES OR NO (FROM 115.53(a)-1) POLICY: POLICY/PROCEDURE (FROM 115.53(a)-1) Refer to page/section: (FROM 115.53(a)-1) OTHER DOCUMENTATION: HANDBOOKS OR WRITTEN MATERIALS PREPARED FOR INMATES PERTINENT TO REPORTING SEXUAL ABUSE AND ACCESS TO SUPPORT SERVICES (FROM 115.53(a)-1) AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Random Sample of Inmates – Q: 13, 14, 15, 16 Inmates who Reported a Sexual Abuse – Q: 10, 11 PREA Audit Tour: Make observations and ask questions per the tour instructions. Note observations, etc. [REDACTED] AUDITOR NOTES: [REDACTED]
115.53 (b) The facility shall inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The facility informs inmates, prior to giving them access to outside support services, the extent to which such communications will be monitored. YES OR NO (FROM 115.53(b)-1) The facility informs inmates, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant federal, state, or local law. YES OR NO (FROM 115.53(b)-2) POLICY: POLICY/PROCEDURE (FROM 115.53(a)-1) Refer to page/section: (FROM 115.53(a)-1) AUDITOR NOTES: [REDACTED] Audit:

		INTERVIEW GUIDE(S): Random Sample of Inmates – Q: 17 Inmates who Reported a Sexual Abuse – Q: 12 AUDITOR NOTES:
115.53 (c) The agency shall maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse. The agency shall maintain copies of agreements or documentation showing attempts to enter into such agreements.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency or facility maintains memoranda of understanding (MOUs) or other agreements with community service providers that are able to provide inmates with emotional support services related to sexual abuse. YES OR NO (FROM 115.53(c)-1) • If YES to 115.53 (c) - 1, the agency or facility maintains copies of those agreements. YES OR NO (FROM 115.53(c)-2) • If NO to 115.53 (c) - 1, the agency or facility has attempted to enter into MOUs or other agreements with community service providers that are able to provide such services. YES OR NO (FROM 115.53(c)-3) • If YES, an explanation of why these attempts have not been successful: (FROM 115.53(c)-3) • If YES, the agency maintains documentation of the attempts to enter into such agreements. YES OR NO (FROM 115.53(c)-4) OTHER DOCUMENTATION: AGREEMENTS OR MOUS (FROM 115.53(c)-2) DOCUMENTATION OF ATTEMPTS TO ENTER INTO AGREEMENTS (FROM 115.53(c)-4) AUDITOR NOTES: Audit: AUDITOR NOTES:

Overall Determination:

☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

§115.54 – Third-party reporting.

Auditor Findings		Verification Documents/Data for Auditor Review
115.54 (a) The agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate.	☐ Yes ☐ No	Pre-Audit:
		QUESTIONNAIRE: The agency or facility provides a method to receive third-party reports of inmate sexual abuse or sexual harassment. <i>YES OR NO (FROM 115.54(a)-1)</i>
		If YES, a description of the method: <i>(FROM 115.54(a)-1)</i>
		The agency or facility publicly distributes information on how to report inmate sexual abuse or sexual harassment on behalf of inmates. <i>YES OR NO (FROM 115.54(a)-2)</i>
		If YES, the description provided: <i>(FROM 115.54(a)-2)</i>
		OTHER DOCUMENTATION: <i>PUBLICLY DISTRIBUTED INFORMATION (FROM 115.54(a)-2)</i>
		AUDITOR NOTES:
		Audit:
		AUDITOR NOTES:
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action)		
Auditor Comments (including corrective actions needed if does not meet standard): 		

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

§115.61 – Staff and agency reporting duties.

Auditor Findings		Verification Documents/Data for Auditor Review
115.61 (a) The agency shall require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency requires all staff to report immediately and according to agency policy: - Any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. YES OR NO (FROM 115.61(a)-1) - Any retaliation against inmates or staff who reported such an incident. YES OR NO (FROM 115.61(a)-2) - Any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. YES OR NO (FROM 115.61(a)-3) POLICY: AGENCY POLICY (FROM 115.61(a)-1) Refer to page/section: (FROM 115.61(a)-1) AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Random Sample of Staff – Q: 5 AUDITOR NOTES:
115.61 (b) Apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Apart from reporting to designated supervisors or officials and designated state or local service agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions. YES OR NO (FROM 115.61(b)-1) POLICY: AGENCY POLICY (FROM 115.61(a)-1) Refer to page/section: (FROM 115.61(a)-1) AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Random Sample of Staff – Q: 5 AUDITOR NOTES:
115.61 (c) Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse pursuant to paragraph (a) of this section and to inform inmates of the practitioner's duty to report, and the limitations of	☐ Yes ☐ No	Pre-Audit: POLICY: AGENCY POLICY (FROM 115.61(a)-1) Refer to page/section: (FROM 115.61(a)-1) AUDITOR NOTES:

confidentiality, at the initiation of services.		Audit: INTERVIEW GUIDE(S): Medical and Mental Health Staff – Q: 3, 4, 5 REVIEW: Documentation of any such reports. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: [REDACTED]
115.61 (d) If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.	☐ Yes ☐ No	Pre-Audit: POLICY: <i>AGENCY POLICY (FROM 115.61(a)-1)</i> Refer to page/section: <i>(FROM 115.61(a)-1)</i> AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Warden or Designee – Q: 15 PREA Coordinator – Q: 11 REVIEW: Documentation of any such reports. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: [REDACTED]
115.61 (e) The facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators.	☐ Yes ☐ No	Pre-Audit: POLICY: <i>AGENCY POLICY (FROM 115.61(a)-1)</i> Refer to page/section: <i>(FROM 115.61(a)-1)</i> AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Warden or Designee – Q: 12 REVIEW: Sample of reports to investigators. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: [REDACTED]
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Auditor Comments (including corrective actions needed if does not meet standard):		

§115.62 – Agency protection duties.

Auditor Findings		Verification Documents/Data for Auditor Review
115.62 (a) When an agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: When the agency or facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate (i.e., it takes some action to assess and implement appropriate protective measures without unreasonable delay). <i>YES OR NO (FROM 115.62(a)-1)</i> In the past 12 months, the number of times the agency or facility determined that an inmate was subject to substantial risk of imminent sexual abuse: <i>(FROM 115.62(a)-2)</i> If the agency or facility made such determinations in the past 12 months, the average amount of time that passed before taking action: <i>(FROM 115.62(a)-3)</i> The longest amount of time elapsed before taking action: <i>(FROM 115.62(a)-4)</i> If not "immediate" (i.e., without unreasonable delay), the explanation provided: <i>(FROM 115.62(a)-4)</i> POLICY: <i>POLICY (FROM 115.62(a)-1)</i> Refer to page/section: <i>(FROM 115.62(a)-1)</i> OTHER DOCUMENTATION: <i>RELEVANT DOCUMENTATION (FROM 115.62(a)-2-4)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Agency Head – Q: 12 Warden or Designee – Q: 7 Random Sample of Staff – Q: 13 AUDITOR NOTES:
	Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action)	
	Auditor Comments (including corrective actions needed if does not meet standard): 	

§115.63 – Reporting to other confinement facilities.

Auditor Findings		Verification Documents/Data for Auditor Review
115.63 (a) Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency has a policy requiring that, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. YES OR NO (FROM 115.63(a)-1) In the past 12 months, the number of allegations the facility received that an inmate was abused while confined at another facility: (FROM 115.63(a)-2) The facility's description of its response to allegations: (FROM 115.63(a)-2) POLICY: POLICY (FROM 115.63(a)-1) Refer to page/section: (FROM 115.63(a)-1) AUDITOR NOTES: [REDACTED] Audit: REVIEW: Documentation of allegations that an inmate was abused while confined at another facility. (UPLOAD IF NECESSARY) AUDITOR NOTES: [REDACTED]
115.63 (b) Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Agency policy requires the facility head provides such notification as soon as possible, but no later than 72 hours after receiving the allegation. YES OR NO (FROM 115.63(b)-1) POLICY: POLICY (FROM 115.63(a)-1) Refer to page/section: (FROM 115.63(a)-1) AUDITOR NOTES: [REDACTED] Audit: AUDITOR NOTES: [REDACTED]
115.63 (c) The agency shall document that it has provided such notification.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency or facility documents that it has provided such notification within 72 hours of receiving the allegation. YES OR NO (FROM 115.63(c)-1) OTHER DOCUMENTATION: DOCUMENTATION OF NOTIFICATIONS (FROM 115.63(c)-1)

		AUDITOR NOTES: Audit: REVIEW: Additional documentation of notifications, to verify they occurred within 72 hours of receiving allegation. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.63 (d) The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency or facility policy requires that allegations received from other facilities/agencies are investigated in accordance with the PREA standards. <i>YES OR NO (FROM 115.63(d)-1)</i> In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities: <i>(FROM 115.63(d)-2)</i> POLICY: <i>POLICY (FROM 115.63(d)-1)</i> Refer to page/section: <i>(FROM 115.63(d)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Agency head – Q: 5 Warden or designee – Q: 16, 17 REVIEW: Documentation of allegations from other facilities and documentation of responses (i.e., evidence that allegation has been investigated in accordance with the standard). <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Auditor Comments (including corrective actions needed if does not meet standard):		

§115.64 – Staff first responder duties.

Auditor Findings		Verification Documents/Data for Auditor Review
115.64 (a) Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to: (1) Separate the alleged victim and abuser; (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency has a first responder policy for allegations of sexual abuse. <i>YES OR NO (FROM 115.64(a)-1)</i> If YES, the agency policy requires that, upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to: <i>LIST OF ALL CHECKED ELEMENTS (FROM 115.64(a)-1)</i> In the past 12 months, the number of allegations that an inmate was sexually abused: <i>(FROM 115.64(a)-2)</i> Of these allegations, the number of times the first security staff member to respond to the report separated the alleged victim and abuser: <i>(FROM 115.64(a)-3)</i> In the past 12 months, the number of allegations where staff were notified within a time period that still allowed for the collection of physical evidence: <i>(FROM 115.64(a)-4)</i> Of these allegations, where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report: - Preserved and protected any crime scene until appropriate steps could be taken to collect any evidence: <i>(FROM 115.64(a)-5)</i> - Requested that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating: <i>(FROM 115.64(a)-5)</i> - Ensured that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating: <i>(FROM 115.64(a)-5)</i> POLICY: <i>POLICY ON FIRST RESPONDER DUITES (FROM 115.64(a)-1)</i> Refer to page/section: <i>(FROM 115.64(a)-1)</i> AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Security Staff and Non-Security Staff First Responders – Q: 1 Inmates who Reported a Sexual Abuse – Q: 1,2,3 REVIEW: Documentation of responses to allegations. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: [REDACTED]
115.64 (b) If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Agency policy requires that if the first staff responder is not a security staff member, that responder shall be required to: <i>LIST OF ALL CHECKED ELEMENTS (FROM 115.64(b)-1)</i>

then notify security staff.

Of the allegations that an inmate was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder: *(FROM 115.64(b)-2)*

Of those allegations responded to first by a non-security staff member, the number of times that the staff member:

- Requested that the alleged victim not take any actions that could destroy physical evidence: *(FROM 115.64(b)-3)*
- Notified security staff: *(FROM 115.64(b)-3)*

POLICY:

POLICY ON FIRST RESPONDER DUTIES (FROM 115.64(a)-1)

Refer to page/section: *(FROM 115.64(a)-1)*

AUDITOR NOTES:

Audit:

INTERVIEW GUIDE(S):

Security Staff and Non-Security Staff First Responders – Q: 1

Random Sample of Staff – Q: 11

REVIEW:

Documentation of responses to allegations. *(UPLOAD IF NECESSARY)*

AUDITOR NOTES:

Overall Determination:

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

§115.65 – Coordinated response.

Auditor Findings

115.65 (a) The facility shall develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.

Note to auditors: In order to be compliant, there must be an institutional plan for each facility (not merely agency-wide plan).

- ☐ Yes
☐ No

Verification Documents/Data for Auditor Review

Pre-Audit:

QUESTIONNAIRE:

The facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership. **YES**
OR NO (FROM 115.65(a)-1)

OTHER DOCUMENTATION:

FACILITY'S INSTITUTIONAL PLAN (FROM 115.65(a)-1)

AUDITOR NOTES:

Audit:

INTERVIEW GUIDE(S):

Warden or Designee – Q: 18

AUDITOR NOTES:

Overall Determination:

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

§115.66 – Preservation of ability to protect inmates from contact with abusers.

Auditor Findings		Verification Documents/Data for Auditor Review
115.66 (a) Neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.	☐ Yes ☐ No	Pre-Audit:
		QUESTIONNAIRE: The agency, facility, or any other governmental entity responsible for collective bargaining on the agency's behalf has entered into or renewed any collective bargaining agreement or other agreement since August 20, 2012, or since the last PREA audit, whichever is later. <i>YES OR NO (FROM 115.66(a)-1)</i>
		OTHER DOCUMENTATION: <i>ALL AGREEMENTS ENTERED INTO SINCE AUGUST 20, 2012/LAST PREA AUDIT (FROM 115.66(A)-1) (Verify that all agreements permit the agency to remove alleged staff sexual abusers from contact with any inmates pending an investigation or a determination of whether and to what extent discipline is warranted.)</i>
		AUDITOR NOTES:
		Audit: INTERVIEW GUIDE(S): Agency Head – Q: 6 AUDITOR NOTES:
115.66 (b) Nothing in this standard shall restrict the entering into or renewal of agreements that govern: (1) The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions of §§ 115.72 and 115.76; or (2) Whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the staff member's personnel file following a determination that the allegation of sexual abuse is not substantiated.	N/A	

Overall Determination:

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

§115.67 – Agency protection against retaliation.

Auditor Findings		Verification Documents/Data for Auditor Review
115.67 (a) The agency shall establish a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff, and shall designate which staff members or departments are charged with monitoring retaliation.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency has a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff. YES OR NO (FROM 115.67(a)-1) The agency designates staff member(s) or charges department(s) with monitoring for possible retaliation. YES OR NO (FROM 115.67(a)-2) • If YES, the name(s) of the staff member(s): (FROM 115.67(a)-2) • If YES, the title(s) of the staff member(s): (FROM 115.67(a)-2) • If YES, the department(s) of the staff member(s): (FROM 115.67(a)-2) POLICY: POLICY PROTECTING INMATES AGAINST RETALIATION (FROM 115.67(a)-1) Refer to page/section: (FROM 115.67(a)-1) AUDITOR NOTES: Audit: AUDITOR NOTES:
115.67 (b) The agency shall employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.	☐ Yes ☐ No	Pre-Audit: POLICY: POLICY PROTECTING INMATES AGAINST RETALIATION (FROM 115.67(a)-1) Refer to page/section: (FROM 115.67(a)-1) AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Agency Head – Q: 7 Warden or Designee – Q: 19 Designated Staff Member Charged with Monitoring Retaliation (or Warden if none available) – Q: 1, 2, 3 Inmates in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse) – Q: 1 Inmates who Reported a Sexual Abuse – Q: 25 REVIEW: Documentation of any protective measures taken. (UPLOAD IF NECESSARY) AUDITOR NOTES:
115.67 (c) For at least 90 days following a report of sexual abuse, the agency shall monitor the conduct and treatment of inmates or staff who reported the	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency/facility monitors the conduct and treatment of inmates or staff who reported sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation

sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation. Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

by inmates or staff. *YES OR NO (FROM 115.67(c)-1)*

If YES, length of time that the agency/facility monitors the conduct or treatment: *(FROM 115.67(c)-2)*

The agency/facility acts promptly to remedy any such retaliation. *YES OR NO (FROM 115.67(c)-3)*

The agency/facility continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need. *YES OR NO (FROM 115.67(c)-4)*

The number of times an incident of retaliation occurred in the past 12 months: *(FROM 115.67(c)-2)*

POLICY:

POLICY PROTECTING INMATES AGAINST RETALIATION (FROM 115.67(a)-1)

Refer to page/section: *(FROM 115.67(a)-1)*

AUDITOR NOTES:

Audit:

INTERVIEW GUIDE(S):

Warden or Designee – Q: 20

Designated Staff Member Charged with Monitoring Retaliation (or Warden if none available) – Q: 4, 5, 6

REVIEW:

Documentation of monitoring efforts. *(UPLOAD IF NECESSARY)*

Documentation of reports of retaliation and agency response. *(UPLOAD IF NECESSARY)*

AUDITOR NOTES:

Pre-Audit:

POLICY:

POLICY PROTECTING INMATES AGAINST RETALIATION (FROM 115.67(a)-1)

Refer to page/section: *(FROM 115.67(a)-1)*

AUDITOR NOTES:

Audit:

INTERVIEW GUIDE(S):

Designated Staff Member Charged with Monitoring Retaliation (or Warden if none available) – Q: 4

REVIEW:

Documentation of monitoring of inmates. *(UPLOAD IF NECESSARY)*

AUDITOR NOTES:

Pre-Audit:

POLICY:

POLICY PROTECTING INMATES AGAINST RETALIATION (FROM 115.67(a)-1)

Refer to page/section: *(FROM 115.67(a)-1)*

AUDITOR NOTES:

Audit:

115.67 (d) In the case of inmates, such monitoring shall also include periodic status checks.

☐ Yes
☐ No

115.67 (e) If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.

☐ Yes
☐ No

		INTERVIEW GUIDE(S): Agency Head – Q: 8 Warden or Designee – Q: 19, 20 REVIEW: Documentation of any such protective measures taken. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.67 (f) An agency's obligation to monitor shall terminate if the agency determines that the allegation is unfounded.	N/A	
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Auditor Comments (including corrective actions needed if does not meet standard):		

§115.68 – Post-allegation protective custody.

Auditor Findings		Verification Documents/Data for Auditor Review
115.68 (a) Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse is subject to the requirements of § 115.43.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency has a policy prohibiting the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. YES OR NO (FROM 115.68(a)-1) The number of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment: (FROM 115.68(a)-2) In the past 12 months, the number of inmates who allege to have suffered sexual abuse who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement: (FROM 115.68(a)-3) From a review of case files of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH: - A statement of the basis for facility's concern for the inmate's safety; and - The reason or reasons why alternative means of separation could not be arranged: (FROM 115.68(a)-4) If an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population. YES OR NO (FROM 115.68(a)-5) POLICY: AGENCY POLICY (FROM 115.68(a)-1) Refer to page/section: (FROM 115.68(a)-1) OTHER DOCUMENTATION: DOCUMENTATION OF INSTANCES WHEN SEGREGATED HOUSING WAS USED TO PROTECT AN INMATE WHO IS ALLEGED TO HAVE SUFFERED SEXUAL ABUSE (FROM 115.68(a)-1) DOCUMENTATION OF 30 DAY REVIEWS (FROM 115.68(a)-1) AUDITOR NOTES:  Audit: INTERVIEW GUIDE(S): Warden or Designee – Q: 8, 9, 10, 11 Staff who Supervise Inmates in Segregated Housing – Q: 1, 2, 3, 4, 5 Inmates in Segregated Housing (for risk of sexual victimization/who allege to have suffered sexual abuse) – Q: 2, 3, 4 PREA Audit Tour: Make observations and ask questions per the tour instructions. Note observations, etc. REVIEW: Records and documentation of housing assignments of inmates who alleged to have suffered sexual abuse. (UPLOAD IF NECESSARY) Documentation of in-cell AND out-of-cell programs, privileges, education, and work opportunities for inmates in segregated housing for this purpose. (UPLOAD IF NECESSARY)

If the facility restricts access to programs, privileges, education, or work opportunities, documentation of: **(UPLOAD IF NECESSARY)**

- The opportunities that have been limited;
- The duration of the limitations; and
- The reasons for such limitations.

Records for length of placement in segregated housing for those who alleged to have suffered sexual abuse to verify that: **(UPLOAD IF NECESSARY)**

- Inmates are placed in involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged; and
- Inmates are placed in involuntary segregated housing for a period that does not ordinarily exceed 30 days.

Case files of inmates who alleged to have suffered sexual abuse held in involuntary segregated housing in the past 12 months. **(UPLOAD IF NECESSARY)**

AUDITOR NOTES:

Overall Determination:

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

INVESTIGATIONS

§115.71 – Criminal and administrative agency investigations.

Auditor Findings		Verification Documents/Data for Auditor Review
115.71 (a) When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. <i>(N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: The agency/facility has a policy related to criminal and administrative agency investigations. YES OR NO (FROM 115.71(a)-1) POLICY: POLICY RELATED TO CRIMINAL AND ADMINSTRATIVE AGENCY INVESTIGATIONS (FROM 115.71(a)-1) Refer to page/section: (FROM 115.71(a)-1) AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Investigative Staff – Q: 5, 8 REVIEW: Sample of investigative records/reports for allegations of sexual abuse or sexual harassment. (UPLOAD IF NECESSARY) AUDITOR NOTES:
115.71 (b) Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to § 115.34.	☐ Yes ☐ No	Pre-Audit: OTHER DOCUMENTATION: TRAINING RECORDS (FROM 115.34(d)-1) AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Investigative Staff – Q: 1, 2 AUDITOR NOTES:
115.71 (c) Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.	☐ Yes ☐ No	Pre-Audit: POLICY: POLICY RELATED TO CRIMINAL AND ADMINSTRATIVE AGENCY INVESTIGATIONS (FROM 115.71(a)-1) Refer to page/section: (FROM 115.71(a)-1) AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Investigative Staff – Q: 6, 7, 9 REVIEW: Investigative reports, record retention schedule, and copies of case records detailing allegations of abuse. (UPLOAD IF NECESSARY) AUDITOR NOTES:
115.71 (d) When the quality of evidence appears to	☐ Yes	Pre-Audit:

support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.	☐ No	POLICY: POLICY RELATED TO CRIMINAL AND ADMINSTRATIVE AGENCY INVESTIGATIONS (FROM 115.71(a)-1) Refer to page/section: (FROM 115.71(a)-1) AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Investigative Staff – Q: 10 REVIEW: Sample of investigation reports. (UPLOAD IF NECESSARY) AUDITOR NOTES:
115.71 (e) The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person’s status as inmate or staff. No agency shall require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.	☐ Yes ☐ No	Pre-Audit: POLICY: POLICY RELATED TO CRIMINAL AND ADMINSTRATIVE AGENCY INVESTIGATIONS (FROM 115.71(a)-1) Refer to page/section: (FROM 115.71(a)-1) AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Investigative Staff – Q: 11, 12 Inmates who Reported a Sexual Abuse – Q: 13 AUDITOR NOTES:
115.71 (f) Administrative investigations: (1) Shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and (2) Shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.	☐ Yes ☐ No	Pre-Audit: POLICY: POLICY RELATED TO CRIMINAL AND ADMINSTRATIVE AGENCY INVESTIGATIONS (FROM 115.71(a)-1) Refer to page/section: (FROM 115.71(a)-1) AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Investigative Staff – Q: 16, 17 REVIEW: Sample of administrative investigation reports. (UPLOAD IF NECESSARY) Sample of cases involving substantiated allegations to ensure that they were referred for prosecution. (UPLOAD IF NECESSARY) AUDITOR NOTES:
115.71 (g) Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all	☐ Yes ☐ No	Pre-Audit: AUDITOR NOTES: Audit:

documentary evidence where feasible.		INTERVIEW GUIDE(S): Investigative Staff – Q: 18 REVIEW: Sample of criminal investigation reports. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: [REDACTED]
115.71 (h) Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Substantiated allegations of conduct that appear to be criminal are referred for prosecution. <i>YES OR NO (FROM 115.71(h)-1)</i> The number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution since August 20, 2012, or since the last PREA audit, whichever is later: <i>(FROM 115.71(h)-2)</i> AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Investigative Staff – Q: 13 REVIEW: Sample of cases referred for prosecution. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: [REDACTED]
115.71 (i) The agency shall retain all written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency retains all written reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. <i>YES OR NO (FROM 115.71(i)-1)</i> POLICY: <i>POLICY RELATED TO CRIMINAL AND ADMINSTRATIVE AGENCY INVESTIGATIONS (FROM 115.71(a)-1)</i> Refer to page/section: <i>(FROM 115.71(a)-1)</i> AUDITOR NOTES: [REDACTED] Audit: REVIEW: Sample of investigation reports (including older reports, if applicable). <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: [REDACTED]
115.71 (j) The departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation.	☐ Yes ☐ No	Pre-Audit: POLICY: <i>POLICY RELATED TO CRIMINAL AND ADMINSTRATIVE AGENCY INVESTIGATIONS (FROM 115.71(a)-1)</i> Refer to page/section: <i>(FROM 115.71(a)-1)</i> AUDITOR NOTES: [REDACTED] Audit:

		INTERVIEW GUIDE(S): Investigative Staff – Q: 14 AUDITOR NOTES:
115.71 (k)	Any State entity or Department of Justice component that conducts such investigations shall do so pursuant to the above requirements.	N/A
115.71 (l)	When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation. <i>(N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)</i>	☐ Yes ☐ No ☐ N/A
		Pre-Audit: AUDITOR NOTES:
		Audit: INTERVIEW GUIDE(S): Warden or Designee – Q: 13 PREA Coordinator – Q: 9 PREA Compliance Manager – Q: 9 Investigative Staff – Q: 15 AUDITOR NOTES:
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action)		
Auditor Comments (including corrective actions needed if does not meet standard): 		

§115.72 – Evidentiary standards for administrative investigations.

Auditor Findings		Verification Documents/Data for Auditor Review
115.72 (a) The agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.	☐ Yes	Pre-Audit:
	☐ No	QUESTIONNAIRE: The agency imposes a standard of a preponderance of the evidence or a lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated. <i>YES OR NO (FROM 115.72(a)-1)</i>
		POLICY: <i>POLICY (FROM 115.72(a)-1)</i> Refer to page/section: <i>(FROM 115.72(a)-1)</i>
		AUDITOR NOTES: [REDACTED]
		Audit:
		INTERVIEW GUIDE(S): Investigative Staff – Q: 19
		REVIEW: Documentation of administrative findings for proper standard of proof. <i>(UPLOAD IF NECESSARY)</i>
		AUDITOR NOTES: [REDACTED]

Overall Determination:

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

§115.73 – Reporting to inmates.

Auditor Findings		Verification Documents/Data for Auditor Review
115.73 (a) Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency has a policy requiring that any inmate who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. <i>YES OR NO (FROM 115.73(a)-1)</i> In the past 12 months: - The number of criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility: <i>(FROM 115.73(a)-2)</i> - Of the alleged sexual abuse investigations that were completed, the number of inmates who were notified, verbally or in writing, of the results of the investigation: <i>(FROM 115.73(a)-3)</i> POLICY: <i>POLICY REQUIRING NOTIFICATION (FROM 115.73(a)-1)</i> Refer to page/section: <i>(FROM 115.73(a)-1)</i> OTHER DOCUMENTATION: <i>SAMPLE OF ALLEGED SEXUAL ABUSE INVESTIGATIONS COMPLETED BY AGENCY (FROM 115.73(a)-1)</i> AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Warden or Designee – Q: 14 Investigative Staff – Q: 20 Inmates who Reported a Sexual Abuse – Q: 14 REVIEW: Additional sample of alleged sexual abuse investigations completed by agency. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: [REDACTED]
115.73 (b) If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the inmate. <i>(N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: If an outside entity conducts such investigations, the agency requests the relevant information from the investigative entity in order to inform the inmate of the outcome of the investigation. <i>YES, NO, N/A if the agency/facility is responsible for conducting administrative and criminal investigations (FROM 115.73(b)-1)</i> In the past 12 months: - The number of investigations of alleged inmate sexual abuse in the facility that were completed by an outside agency: <i>(FROM 115.73(b)-2)</i> - The number of inmates alleging sexual abuse in the facility who were notified verbally or in writing of the results of the investigation: <i>(FROM 115.73(b)-3)</i> OTHER DOCUMENTATION: <i>SAMPLE OF ALLEGED SEXUAL ABUSE INVESTIGATIONS COMPLETED BY OTHER AGENCY (FROM 115.73(b)-1)</i> Audit: REVIEW: Additional sample of alleged sexual abuse investigations completed by outside agency. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: [REDACTED]

115.73 (c) Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever: (1) The staff member is no longer posted within the inmate's unit; (2) The staff member is no longer employed at the facility; (3) The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or (4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency/facility subsequently informs the inmate (unless the agency has determined that the allegation is unfounded) whenever: • The staff member is no longer posted within the inmate's unit; • The staff member is no longer employed at the facility; • The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or • The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. YES OR NO (FROM 115.73(c)-1) There has been a substantiated or unsubstantiated complaint (i.e., not unfounded) of sexual abuse committed by a staff member against an inmate in an agency facility in the past 12 months. YES OR NO (FROM 115.73(c)-2) If YES, in each case the agency subsequently informed the inmate whenever: • The staff member was no longer posted within the inmate's unit; • The staff member was no longer employed at the facility; • The agency learned that the staff member was indicted on a charge related to sexual abuse within the facility; or • The agency learned that the staff member was convicted on a charge related to sexual abuse within the facility. YES OR NO (FROM 115.73(c)-3) POLICY: POLICY REQUIRING NOTIFICATION (FROM 115.73(a)-1) Refer to page/section: (FROM 115.73(a)-1) OTHER DOCUMENTATION: SAMPLE DOCUMENTATION OF FOUNDED COMPLAINTS (FROM 115.73(c)-1) SAMPLE DOCUMENTATION OF NOTIFICATIONS (FROM 115.73(c)-2) AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Inmates who Reported a Sexual Abuse – Q: 20 REVIEW: Additional sample documentation of founded complaints. (UPLOAD IF NECESSARY) Additional sample documentation of notifications. (UPLOAD IF NECESSARY) AUDITOR NOTES:
115.73 (d) Following an inmate's allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever: 1) The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Following an inmate's allegation that he or she has been sexually abused by another inmate in an agency facility, the agency subsequently informs the alleged victim whenever: • The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or • The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. YES OR NO (FROM 115.73(d)-1)

within the facility; or 2) The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.		POLICY: <i>POLICY REQUIRING NOTIFICATION (FROM 115.73(a)-1)</i> Refer to page/section: <i>(FROM 115.73(a)-1)</i> OTHER DOCUMENTATION: <i>SAMPLE DOCUMENTATION OF NOTIFICATIONS (FROM 115.73(d)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Inmates who Reported a Sexual Abuse – Q: 21 REVIEW: Additional sample documentation of notifications. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.73 (e) All such notifications or attempted notifications are documented.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency has a policy that all notifications to inmates described under this standard are documented. <i>YES OR NO (FROM 115.73(e)-1)</i> In the past 12 months: - The number of notifications to inmates that were provided pursuant to this standard: <i>(FROM 115.73(e)-2)</i> - The number of those notifications that were documented: <i>(FROM 115.73(e)-3)</i> POLICY: <i>POLICY REQUIRING DOCUMENTATION OF NOTIFICATIONS (FROM 115.73(e)-1)</i> Refer to page/section: <i>(FROM 115.73(e)-1)</i> OTHER DOCUMENTATION: <i>SAMPLE DOCUMENTATION OF NOTIFICATIONS (FROM 115.73(e)-1)</i> AUDITOR NOTES: Audit: REVIEW: Logs or other documentation of notifications to confirm number provided. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.73 (f) An agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody.	N/A	

Overall Determination:

- ☐ Exceeds Standard (substantially exceeds requirement of standard)
- ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

DISCIPLINE

§115.76 – Disciplinary sanctions for staff.

Auditor Findings		Verification Documents/Data for Auditor Review
115.76 (a) Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. <i>YES OR NO (FROM 115.76(a)-1)</i> POLICY: <i>STAFF DISCIPLINARY SANCTIONS (FROM 115.76(a)-1)</i> Refer to page/section: <i>(FROM 115.76(a)-1)</i> AUDITOR NOTES: Audit: AUDITOR NOTES:
115.76 (b) Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: In the past 12 months: - The number of staff from the facility who have violated agency sexual abuse or sexual harassment policies: <i>(FROM 115.76(b)-1)</i> - The number of those staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies: <i>(FROM 115.76(b)-2)</i> POLICY: <i>STAFF DISCIPLINARY SANCTIONS (FROM 115.76(a)-1)</i> Refer to page/section: <i>(FROM 115.76(a)-1)</i> OTHER: <i>SAMPLE RECORDS OF TERMINATIONS, RESIGNATIONS, OR OTHER SANCTIONS FOR VIOLATION OF SEXUAL ABUSE OR HARASSMENT POLICY (FROM 115.76(b)-1)</i> Audit: REVIEW: Additional sample records of terminations, resignations, or other sanctions for violation of sexual abuse or harassment policies. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.76 (c) Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. <i>YES OR NO (FROM 115.76(c)-1)</i> In the past 12 months, the number of staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies: <i>(FROM 115.76(c)-2)</i>

		POLICY: <i>STAFF DISCIPLINARY SANCTIONS (FROM 115.76(a)-1)</i> Refer to page/section: <i>(FROM 115.76(a)-1)</i> Audit: REVIEW: Records of disciplinary sanctions taken against staff for violations of the agency sexual abuse or sexual harassment policies in the past 12 months. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.76 (d) All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. <i>YES OR NO (FROM 115.76(d)-1)</i> In the past 12 months, the number of staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies: <i>(FROM 115.76(d)-2)</i> POLICY: <i>STAFF DISCIPLINARY SANCTIONS (FROM 115.76(a)-1)</i> Refer to page/section: <i>(FROM 115.76(a)-1)</i> Audit: REVIEW: Reports to law enforcement for violations of agency sexual abuse or sexual harassment policies. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:

Overall Determination:

☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

§115.77 – Corrective action for contractors and volunteers.

Auditor Findings		Verification Documents/Data for Auditor Review
115.77 (a) Any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. <i>YES OR NO (FROM 115.77(a)-1)</i> Agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with inmates. <i>YES OR NO (FROM 115.77(a)-2)</i> In the past 12 months, contractors or volunteers have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates. <i>YES OR NO (FROM 115.77(a)-3)</i> If YES, the number of contractors/volunteers reported to law enforcement for engaging in sexual abuse of inmates: <i>(FROM 115.77(a)-4)</i> POLICY: <i>POLICY REQUIRING NOTIFICATION (FROM 115.77(a))</i> Refer to page/section: <i>(FROM 115.77(a))</i> OTHER DOCUMENTATION: <i>REPORTS OF SEXUAL ABUSE OF INMATES BY CONTRACTORS OR VOLUNTEERS (FROM 115.77(a)-3)</i> AUDITOR NOTES: _____ Audit: REVIEW: Documentation of referrals to law enforcement and/or relevant licensing bodies. <i>(UPLOAD IF NECESSARY)</i> Investigative reports if relevant. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: _____
115.77 (b) The facility takes appropriate remedial measures, and considers whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The facility takes appropriate remedial measures and considers whether to prohibit further contact with inmates in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. <i>YES OR NO (FROM 115.77(b)-1)</i> OTHER DOCUMENTATION: <i>DOCUMENTATION OF REMEDIAL MEASURES THAT HAVE BEEN ENFORCED (FROM 115.77(b)-2)</i> Audit: INTERVIEW GUIDE(S): Warden – Q: 21 AUDITOR NOTES: _____
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Auditor Comments (including corrective actions needed if does not meet standard):		

§115.78 – Disciplinary sanctions for inmates.

Auditor Findings		Verification Documents/Data for Auditor Review
115.78 (a) Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse. <i>YES OR NO (FROM 115.78(a)-1)</i> Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for inmate-on-inmate sexual abuse. <i>YES OR NO (FROM 115.78(a)-2)</i> In the past 12 months: - The number of administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility: <i>(FROM 115.78(a)-3)</i> - The number of criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility: <i>(FROM 115.78(a)-4)</i> POLICY: <i>INMATE DISCIPLINARY SANCTIONS (FROM 115.78(a))</i> Refer to page/section: <i>(FROM 115.78(a)-1)</i> AUDITOR NOTES: Audit: AUDITOR NOTES:
115.78 (b) Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.	☐ Yes ☐ No	Pre-Audit: POLICY: <i>INMATE DISCIPLINARY SANCTIONS (FROM 115.78(a))</i> Refer to page/section: <i>(FROM 115.78(a)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Warden – Q: 22 REVIEW: Investigative reports and documentation of sanctions imposed. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.78 (c) The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.	☐ Yes ☐ No	Pre-Audit: POLICY: <i>INMATE DISCIPLINARY SANCTIONS (FROM 115.78(a))</i> Refer to page/section: <i>(FROM 115.78(a)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Warden – Q: 22 REVIEW:

		Investigative reports and documentation of sanctions imposed. <i>(UPLOAD IF NECESSARY)</i>
		AUDITOR NOTES:
115.78 (d) If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse. <i>YES OR NO (FROM 115.78(d)-1)</i> If the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse, the facility considers whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits. <i>YES OR NO (FROM 115.78(d)-2)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Medical and Mental Health Staff – Q: 6, 7 AUDITOR NOTES:
115.78 (e) The agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact. <i>YES OR NO (FROM 115.78(e)-1)</i> POLICY: <i>INMATE DISCIPLINARY SANCTIONS (FROM 115.78(a))</i> Refer to page/section: <i>(FROM 115.78(a)-1)</i> OTHER DOCUMENTATION: <i>SAMPLE OF RECORDS OF DISCIPLINARY ACTIONS AGAINST INMATES FOR SEXUAL CONDUCT WITH STAFF (FROM 115.78(e)-1)</i> AUDITOR NOTES: Audit: REVIEW: Additional records of disciplinary actions against inmates for sexual conduct with staff. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.78 (f) For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation. <i>YES OR NO (FROM 115.78(f)-1)</i> POLICY: <i>INMATE DISCIPLINARY SANCTIONS (FROM 115.78(a))</i> Refer to page/section: <i>(FROM 115.78(a)-1)</i> AUDITOR NOTES: Audit: AUDITOR NOTES:

115.78 (g) An agency may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced. <i>(N/A if the agency does not prohibit all sexual activity between inmates.)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: The agency prohibits all sexual activity between inmates. <i>YES OR NO (FROM 115.78(g)-1)</i> If the agency prohibits all sexual activity between inmates and disciplines inmates for such activity, the agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced. <i>YES, NO, or N/A if the agency does not prohibit all sexual activity between inmates (FROM 115.78(g)-2)</i> POLICY: <i>INMATE DISCIPLINARY SANCTIONS (FROM 115.78(a))</i> Refer to page/section: <i>(FROM 115.78(a)-1)</i> AUDITOR NOTES: Audit: AUDITOR NOTES:
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Auditor Comments (including corrective actions needed if does not meet standard):		

MEDICAL AND MENTAL HEALTH CARE

§115.81 - Medical and mental health screenings; history of sexual abuse.

Auditor Findings		Verification Documents/Data for Auditor Review
115.81(a) and (c) If the screening pursuant to § 115.41 indicates that a prison/jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: All inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.41 are offered a follow-up meeting with a medical or mental health practitioner. YES OR NO (FROM 115.81(a))/(c)-1) If YES, the follow-up meeting was offered within 14 days of the intake screening. YES OR NO (FROM 115.81(a))/(c)-2) In the past 12 months, the percent of inmates who disclosed prior victimization during screening who were offered a follow up meeting with a medical or mental health practitioner: (FROM 115.81(a))/(c)-3) Medical and mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services. YES OR NO (FROM 115.81(a))/(c)-4) POLICY: MEDICAL/MENTAL HEALTH TREATMENT (FROM 115.81(a))/(c)-1) Refer to page/section: (FROM 115.81(a))/(c)-1) OTHER DOCUMENTATION: SAMPLE MEDICAL/MENTAL HEALTH SECONDARY MATERIALS (FROM 115.81 (a))/(c)-4) , if applicable. AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Inmates who Disclose Sexual Victimization at Risk Screening – Q: 1 Staff Responsible for Risk Screening – Q: 13 REVIEW: Additional medical/mental health secondary materials. (UPLOAD IF NECESSARY) AUDITOR NOTES:
115.81 (b) If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening. <i>(N/A if the facility is not a prison.)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: If the facility is a prison, all prison inmates who have previously perpetrated sexual abuse, as indicated during the screening pursuant to §115.41, are offered a follow-up meeting with a mental health practitioner. YES, NO, OR N/A if facility is not a prison (FROM 115.81(b)-1) If YES, the follow-up meeting was offered within 14 days of the intake screening. YES OR NO (FROM 115.81(b)-2) In the past 12 months, the percent of inmates who have previously perpetrated sexual abuse, as indicated during the screening, who were offered a follow up meeting with a mental health practitioner: (FROM 115.81(b)-3) Mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services. YES OR NO (FROM 115.81(b)-4) POLICY: MEDICAL/MENTAL HEALTH TREATMENT (FROM 115.81(a))/(c)-1) Refer to page/section: (FROM 115.81(a))/(c)-1) OTHER DOCUMENTATION: SAMPLE MENTAL HEALTH SECONDARY MATERIALS (FROM 115.81 (b)-4) , if applicable.

		AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Staff Responsible for Risk Screening – Q: 14 REVIEW: Additional medical/mental health secondary materials (the term secondary materials refers to materials maintained by health staff in a secure area but separate from the inmate's medical record that document compliance with the provisions of this standard). <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.81(d) Any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners. <i>YES OR NO (FROM 115.81(d)-1)</i> If NO, the information shared with other staff is strictly limited to informing security and management decisions, including treatment plans, housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local law. <i>YES OR NO (FROM 115.81(d)-2)</i> POLICY: <i>MEDICAL/MENTAL HEALTH TREATMENT (FROM 115.81(a)/(c)-1)</i> Refer to page/section: <i>(FROM 115.81(a)/(c)-1)</i> OTHER DOCUMENTATION: <i>SAMPLE OF INMATE CONFINEMENT RECORDS/OTHER RECORDS AVAILABLE TO CUSTODY STAFF OR NON-HEALTH PERSONNEL (FROM 115.81(d)-1)</i> AUDITOR NOTES: Audit: PREA Audit Tour: Make observations and ask questions per the tour instructions. Note observations, etc. REVIEW: Additional sample of inmate confinement records/other records available to custody staff or non-health personnel. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.81(e) Medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18. <i>YES OR NO (FROM 115.81(e)-1)</i> POLICY: <i>MEDICAL/MENTAL HEALTH TREATMENT (FROM 115.81(a)/(c)-1)</i> Refer to page/section: <i>(FROM 115.81(a)/(c)-1)</i> OTHER DOCUMENTATION: <i>CONSENT DOCUMENTATION/LOG (FROM 115.81(e)-1)</i> AUDITOR NOTES:

	Audit:
	INTERVIEW GUIDE(S): Medical and Mental Health Staff – Q: 8, 9
	AUDITOR NOTES:
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action)	
Auditor Comments (including corrective actions needed if does not meet standard): 	

§115.82 - Access to emergency medical and mental health services.

Auditor Findings		Verification Documents/Data for Auditor Review
115.82 (a) Inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. YES OR NO (FROM 115.82(a)-1) The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment. YES OR NO (FROM 115.82(a)-2) Medical and mental health staff maintain secondary materials (e.g., form, log) documenting the timeliness of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis. <i>(Such documentation is not required by the Standard, but may be helpful to review during the audit.)</i> YES OR NO (FROM 115.82(a)-3) OTHER DOCUMENTATION: SAMPLE MEDICAL/MENTAL HEALTH SECONDARY FORMS/LOGS RE: ACCESS TO SERVICES (FROM 115.82(a)-1) AUDITOR NOTES: _____ Audit: INTERVIEW GUIDE(S): Medical and Mental Health Staff – Q: 10, 11, 12 Inmates who Reported a Sexual Abuse – Q: 4 PREA Audit Tour: Make observations and ask questions per the tour instructions. Note observations, etc. _____ REVIEW: Additional medical/mental health secondary materials describing access to services. (UPLOAD IF NECESSARY) AUDITOR NOTES: _____
115.82 (b) If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners.	☐ Yes ☐ No	Pre-Audit: AUDITOR NOTES: _____ Audit: INTERVIEW GUIDE(S): Security Staff and Non-Security Staff First Responders – Q: 1 REVIEW Documentation demonstrating immediate notification of the appropriate medical and mental health practitioners. (UPLOAD IF NECESSARY) AUDITOR NOTES: _____
115.82 (c) Inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Inmate victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. YES OR NO (FROM 115.82 (c)-1) Medical and mental health staff maintain secondary materials (e.g., form, log) documenting the timeliness of emergency

medically appropriate.		medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis. (<i>Such documentation is not required by the Standard, but may be helpful to review during the audit.</i>) YES OR NO (FROM 115.82(a)-3) OTHER DOCUMENTATION: <i>SAMPLE MEDICAL/MENTAL HEALTH SECONDARY FORMS/LOGS RE: ACCESS TO SERVICES (FROM 115.82(a)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Medical and Mental Health Staff – Q: 13 Inmates who Reported a Sexual Abuse – Q: 6 REVIEW: Additional medical/mental health secondary materials describing access to services. (UPLOAD IF NECESSARY) AUDITOR NOTES:
115.82 (d) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. YES OR NO (FROM 115.82(d)-1) POLICY: <i>MEDICAL/MENTAL HEALTH TREATMENT: SEXUAL ABUSE (FROM 115.82(d)-1)</i> Refer to page/section: (FROM 115.82(d)-1) AUDITOR NOTES: Audit: AUDITOR NOTES:

Overall Determination:

☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

§115.83 - Ongoing medical and mental health care for sexual abuse victims and abusers.

Auditor Findings		Verification Documents/Data for Auditor Review
115.83 (a) The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The facility offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. <i>YES OR NO (FROM 115.83(a)-1)</i> POLICY: <i>ONGOING MEDICAL/MENTAL HEALTH TREATMENT FOR VICTIMS AND ABUSERS (FROM 115.83(a)-1)</i> Refer to page/section: <i>(FROM 115.83(a)-1)</i> AUDITOR NOTES: [REDACTED] Audit: PREA Audit Tour: Make observations and ask questions per the tour instructions. Note observations, etc. [REDACTED] AUDITOR NOTES: [REDACTED]
115.83 (b) The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.	☐ Yes ☐ No	Pre-Audit: AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Medical and Mental Health Staff – Q: 14 Inmates who Reported a Sexual Abuse – Q: 5 REVIEW: Medical records or secondary documentation that demonstrate victims receive follow-up services and appropriate treatment plans and, when necessary, referrals for continued care following their transfer to or placement in other facilities, or their release from custody. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: [REDACTED]
115.83 (c) The facility shall provide such victims with medical and mental health services consistent with the community level of care.	☐ Yes ☐ No	Pre-Audit: AUDITOR NOTES: [REDACTED] Audit: INTERVIEW GUIDE(S): Medical and Mental Health Staff – Q: 15 REVIEW: Medical records or secondary documentation that demonstrate victims received medical and mental health services consistent with community level of care. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: [REDACTED]
115.83 (d) Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. <i>(N/A if all-male facility.)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: Female victims of sexually abusive vaginal penetration while incarcerated are offered pregnancy tests. <i>YES, NO, OR N/A for all-male facilities (FROM 115.83(d)-1)</i>

		POLICY: <i>ONGOING MEDICAL/MENTAL HEALTH TREATMENT FOR VICTIMS AND ABUSERS (FROM 115.83(a)-1)</i> Refer to page/section: <i>(FROM 115.83(a)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Inmates who Reported a Sexual Abuse– Q: 22 REVIEW: Medical records or secondary documentation that demonstrates that female victims were offered pregnancy tests. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.83 (e) If pregnancy results from the conduct described in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services. <i>(N/A if all-male facility.)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: If pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services. <i>YES, NO, OR N/A for all-male facilities (FROM 115.83(e)-1)</i> POLICY: <i>ONGOING MEDICAL/MENTAL HEALTH TREATMENT FOR VICTIMS AND ABUSERS (FROM 115.83(a)-1)</i> Refer to page/section: <i>(FROM 115.83(a)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Medical and Mental Health Staff – Q: 16, 17 Inmates who Reported a Sexual Abuse – Q: 23 AUDITOR NOTES:
115.83 (f) Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. <i>YES OR NO (FROM 115.83(f)-1)</i> POLICY: <i>ONGOING MEDICAL/MENTAL HEALTH TREATMENT FOR VICTIMS AND ABUSERS (FROM 115.83(a)-1)</i> Refer to page/section: <i>(FROM 115.83(a)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Inmates who Reported a Sexual Abuse – Q: 7 REVIEW: Medical records or secondary documentation that demonstrate victims were offered tests for sexually transmitted infections as medically appropriate. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:

115.83 (g) Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. <i>YES OR NO (FROM 115.82(d)-1)</i> POLICY: <i>ONGOING MEDICAL/MENTAL HEALTH TREATMENT FOR VICTIMS AND ABUSERS (FROM 115.83(a)-1)</i> Refer to page/section: <i>(FROM 115.83(a)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Inmates who Reported a Sexual Abuse – Q: 8 AUDITOR NOTES:
115.83 (h) All prisons attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners. <i>(N/A if the facility is a jail)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: If the facility is a prison, it attempts to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history, and offers treatment when deemed appropriate by mental health practitioners. <i>YES, NO or N/A if the facility is a jail. (FROM 115.83(h)-1)</i> POLICY: <i>ONGOING MEDICAL/MENTAL HEALTH TREATMENT FOR VICTIMS AND ABUSERS (FROM 115.83(a)-1)</i> Refer to page/section: <i>(FROM 115.83(a)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Medical and Mental Health Staff – Q: 18 REVIEW: Mental health records or secondary documentation that demonstrate evaluations of inmate-on-inmate abusers. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Auditor Comments (including corrective actions needed if does not meet standard):		

DATA COLLECTION AND REVIEW

§115.86 – Sexual abuse incident reviews.

Auditor Findings		Verification Documents/Data for Auditor Review
115.86 (a) The facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded.	☐ Yes ☐ No	Pre-Audit:
		QUESTIONNAIRE: The facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded. <i>YES OR NO (FROM 115.86(a)-1)</i>
		In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only “unfounded” incidents: <i>(FROM 115.86(a)-2)</i>
		POLICY: <i>SEXUAL ABUSE INCIDENT REVIEWS (FROM 115.86(a)-1)</i>
		Refer to page/section: <i>(FROM 115.86(a)-1)</i>
		OTHER DOCUMENTATION: <i>DOCUMENTATION OF INCIDENT REVIEWS (FROM 115.86(a)-1) , if applicable.</i>
		<i>SAMPLE DOCUMENTATION OF COMPLETED CRIMINAL OR ADMINISTRATIVE INVESTIGATIONS OF SEXUAL ABUSE (FROM 115.86(a)-1), if incident review documents contained therein.</i>
		AUDITOR NOTES:
		Audit:
		REVIEW: Additional documentation of completed criminal or administrative investigations of sexual abuse. <i>(UPLOAD IF NECESSARY)</i>
AUDITOR NOTES: 		
115.86 (b) Such review shall ordinarily occur within 30 days of the conclusion of the investigation.	☐ Yes ☐ No	Pre-Audit:
		QUESTIONNAIRE: The facility ordinarily conducts a sexual abuse incident review within 30 days of the conclusion of the criminal or administrative sexual abuse investigation. <i>YES OR NO (FROM 115.86(b)-1)</i>
		In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only “unfounded” incidents: <i>(FROM 115.86(b)-2)</i>
		OTHER DOCUMENTATION: <i>DOCUMENTATION OF INCIDENT REVIEWS (FROM 115.86(a)-1) , if applicable.</i>
		<i>SAMPLE DOCUMENTATION OF COMPLETED CRIMINAL OR ADMINISTRATIVE INVESTIGATIONS OF SEXUAL ABUSE (FROM 115.86(a)-1), if incident reviews contained therein.</i>
		AUDITOR NOTES:
		Audit:
		REVIEW: Additional documentation of completed criminal or administrative investigations of sexual abuse. <i>(UPLOAD IF NECESSARY)</i>
		AUDITOR NOTES:

115.86 (c) The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners. <i>YES OR NO (FROM 115.86(c)-1)</i> POLICY: <i>SEXUAL ABUSE INCIDENT REVIEWS (FROM 115.86(a)-1)</i> Refer to page/section: <i>(FROM 115.86(a)-1)</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Warden – Q: 23 REVIEW Documentation of review team minutes or reports. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.86 (d) The review team shall: (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; (3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; (4) Assess the adequacy of staffing levels in that area during different shifts; (5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and (6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The facility prepares a report of its findings from sexual abuse incident reviews, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section and any recommendations for improvement, and submits such report to the facility head and PREA Compliance Manager. <i>YES OR NO (FROM 115.86(d)-3)</i> OTHER DOCUMENTATION: <i>DOCUMENTATION OF INCIDENT REVIEWS (FROM 115.86(a)-1) , if applicable.</i> <i>REPORTS OF FINDINGS FROM SEXUAL ABUSE INCIDENT REVIEWS (FROM 115.86(d)-3) , if applicable.</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Warden – Q: 24, 25 PREA Compliance Manager – Q: 19, 20, 21 Incident Review Team – Q: 1, 2, 3, 4 REVIEW: Additional reports of findings from sexual abuse incident reviews. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:

115.86 (e) The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The facility implements the recommendations for improvement or documents its reasons for not doing so. YES OR NO <i>(FROM 115.86(e)-1)</i> OTHER DOCUMENTATION: <i>DOCUMENTATION SUPPORTING IMPLEMENTATION OF RECOMMENDATIONS (FROM 115.86(e)-1) OR</i> <i>DOCUMENTATION OF REASONS FOR NOT IMPLEMENTING RECOMMENDATIONS (FROM 115.86(e)-1)</i> AUDITOR NOTES: Audit: AUDITOR NOTES:
Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action) Auditor Comments (including corrective actions needed if does not meet standard):		

§115.87 – Data collection.

Auditor Findings		Verification Documents/Data for Auditor Review
115.87 (a)/(c) The agency shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. <i>YES OR NO (FROM 115.87(a)/(c)-1)</i> The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. <i>YES OR NO (FROM 115.87 (a)/(c)-2)</i> POLICY: <i>SEXUAL ABUSE DATA COLLECTION (FROM 115.87(a)/(c)-1)</i> Refer to page/section: <i>(FROM 115.87(a)/(c)-1)</i> OTHER DOCUMENTATION: <i>SET OF DEFINITIONS (FROM 115.87(a)/(c)-1) , if applicable.</i> <i>DATA COLLECTION INSTRUMENT (FROM 115.87(a)/(c)-2) , if applicable.</i> AUDITOR NOTES: Audit: AUDITOR NOTES:
115.87 (b) The agency shall aggregate the incident-based sexual abuse data at least annually.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency aggregates the incident-based sexual abuse data at least annually. <i>YES OR NO (FROM 115.87(b)-1)</i> AUDITOR NOTES: Audit: REVIEW: Sample of aggregated data. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
115.87 (d) The agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. <i>YES OR NO (FROM 115.87(d)-1)</i> POLICY: <i>SEXUAL ABUSE DATA COLLECTION (FROM 115.87(a)/(c)-1)</i> Refer to page/section: <i>(FROM 115.87(a)/(c)-1)</i> AUDITOR NOTES: Audit: AUDITOR NOTES:
115.87 (e) The agency also shall obtain incident-	☐ Yes	Pre-Audit:

based and aggregated data from every private facility with which it contracts for the confinement of its inmates. <i>(N/A if agency does not contract for the confinement of its inmates)</i>	☐ No ☐ N/A	QUESTIONNAIRE: The agency obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates. <i>YES, NO, or N/A if agency does not contract for the confinement of its inmates (FROM 115.87(e)-1)</i> The data from private facilities complies with SSV reporting regarding content. <i>YES OR NO (FROM 115.87(e)-1)</i> POLICY: <i>SEXUAL ABUSE DATA COLLECTION (FROM 115.87(a)/(c)-1)</i> Refer to page/section: <i>(FROM 115.87(a)/(c)-1)</i> AUDITOR NOTES: _____ Audit: REVIEW: Sample of incident-based and aggregated data from private facility, if applicable. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES: _____
115.87 (f) Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30. <i>(N/A if DOJ has not requested agency data.)</i>	☐ Yes ☐ No ☐ N/A	Pre-Audit: QUESTIONNAIRE: The agency provided the Department of Justice with data from the previous calendar year upon request. <i>YES, NO, or N/A if DOJ has not requested agency data (FROM 115.87(f)-1)</i> AUDITOR NOTES: _____ Audit: AUDITOR NOTES: _____

Overall Determination:

☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

§115.88 – Data review for corrective action.

Auditor Findings		Verification Documents/Data for Auditor Review
115.88 (a) The agency shall review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: (1) Identifying problem areas; (2) Taking corrective action on an ongoing basis; and (3) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency reviews data collected and aggregated pursuant to §115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, and training, including: - Identifying problem areas; - Taking corrective action on an ongoing basis; and - Preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole. YES OR NO (FROM 115.88(a)-1) OTHER DOCUMENTATION: DOCUMENTATION OF CORRECTIVE ACTION PLANS (FROM 115.88(a)-1), if applicable. ANNUAL REPORT OF FINDINGS FROM DATA REVIEWS/CORRECTIVE ACTIONS (FROM 115.88(a)-1), if applicable. AUDITOR NOTES: _____ Audit: INTERVIEW GUIDE(S): Agency Head – Q: 9 PREA Coordinator – Q: 6, 7 PREA Compliance Manager – Q: 18 REVIEW: Additional documentation of corrective action plans. (UPLOAD IF NECESSARY) AUDITOR NOTES: _____
115.88 (b) Such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The annual report includes a comparison of the current year's data and corrective actions with those from prior years. YES OR NO (FROM 115.88(b)-1) The annual report provides an assessment of the agency's progress in addressing sexual abuse. YES OR NO (FROM 115.88(b)-2) OTHER DOCUMENTATION: ANNUAL REPORT OF FINDINGS FROM DATA REVIEWS/CORRECTIVE ACTIONS (FROM 115.88(a)-1), if applicable. AUDITOR NOTES: _____ Audit: AUDITOR NOTES: _____
115.88 (c) The agency's report shall be approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency makes its annual report readily available to the public at least annually through its website. YES OR NO (FROM 115.88(c)-1) If NO, the agency makes it available through other means. YES OR NO (FROM 115.88(c)-2)

		The annual reports are approved by the agency head. <i>YES OR NO (FROM 115.88(c)-3)</i> OTHER DOCUMENTATION: <i>WEBSITE WHERE ANNUAL REPORT IS AVAILABLE (FROM 115.88(c)-1), if applicable.</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): Agency Head – Q: 10 AUDITOR NOTES:
115.88 (d) The agency may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: When the agency redacts material from an annual report for publication the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility. <i>YES OR NO (FROM 115.88(d)-1)</i> The agency indicates the nature of material redacted. <i>YES OR NO (FROM 115.88(d)-2)</i> OTHER DOCUMENTATION: <i>ANNUAL REPORT OF FINDINGS FROM DATA REVIEWS/CORRECTIVE ACTIONS (FROM 115.88(a)-1), if applicable.</i> AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): PREA Coordinator – Q: 8 AUDITOR NOTES:

Overall Determination:

☐ Exceeds Standard (substantially exceeds requirement of standard)
☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (requires corrective action)

Auditor Comments (including corrective actions needed if does not meet standard):

§115.89 – Data storage, publication, and destruction

Auditor Findings		Verification Documents/Data for Auditor Review
115.89 (a) The agency shall ensure that data collected pursuant to § 115.87 are securely retained.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency ensures that incident-based and aggregate data are securely retained. YES OR NO (FROM 115.89(a)-1) POLICY: DATA STORAGE (FROM 115.89(a)-1) Refer to page/section: (FROM 115.89(a)-1) AUDITOR NOTES: Audit: INTERVIEW GUIDE(S): PREA Coordinator – Q: 6 AUDITOR NOTES:
115.89 (b) The agency shall make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public, at least annually, through its website. YES OR NO (FROM 115.89(b)-1) If NO, the agency makes it available through other means. YES OR NO (FROM 115.88(b)-2) POLICY: DATA AVAILABILITY (FROM 115.89(b)-1) Refer to page/section: (FROM 115.89(a)-1) AUDITOR NOTES: Audit: REVIEW: Website or other means for publicly available aggregated sexual abuse data. (UPLOAD IF NECESSARY) AUDITOR NOTES:
115.89 (c) Before making aggregated sexual abuse data publicly available, the agency shall remove all personal identifiers.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. YES OR NO (FROM 115.89(c)-1) AUDITOR NOTES: Audit: REVIEW: Sample of publicly available sexual abuse data to check that personal identifiers have been removed. (UPLOAD IF NECESSARY) AUDITOR NOTES:

115.89 (d) The agency shall maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection unless federal, state, or local law requires otherwise.	☐ Yes ☐ No	Pre-Audit: QUESTIONNAIRE: The agency maintains sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise. <i>YES OR NO (FROM 115.89(d)-1)</i> OTHER DOCUMENTATION: If federal, state, or local law requires otherwise, please provide a copy of the law. <i>APPLICABLE LAW (FROM 115.89(d)-1)</i> AUDITOR NOTES:
		Audit: REVIEW: Historical data since August 20, 2012. <i>(UPLOAD IF NECESSARY)</i> AUDITOR NOTES:
	Overall Determination: ☐ Exceeds Standard (substantially exceeds requirement of standard) ☐ Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) ☐ Does Not Meet Standard (requires corrective action)	
	Auditor Comments (including corrective actions needed if does not meet standard): 	

AUDIT FINDINGS

NARRATIVE:

[The auditor should provide a summary of the audit process that includes the date of audit, who was in attendance, a description of sampling procedures and staff and inmates interviewed, areas of facility toured as part of the audit, etc.]

DESCRIPTION OF FACILITY CHARACTERISTICS:

[The auditor should include a summary describing the facility.]

SUMMARY OF AUDIT FINDINGS:

[The auditor should include a summary statement of the overall audit findings. *E.g.: On March 1, 2013 X number of site visits were completed at facility XYZ in X County, Maryland. The results indicate.....Facility X exceeded X standards; met X standards; X standards were not met.*]

AUDITOR CERTIFICATION:

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.

Auditor Signature

Date