

PREA AUDIT: AUDITOR COMPLIANCE TOOL

Facility: Lockups

Completed by:

Date of Final
Submission

AGENCY INFORMATION

Name of agency:

Date of last agency PREA audit(if
applicable):

Telephone:

Governing authority or parent agency (if
applicable):

Physical Address:

Mailing Address:

The Agency is:

- ☐ Federal: Bureau of Prisons ☐ Federal: Military ☐ State ☐ U.S.
Territory
☐ County or Multi-County ☐ Regional Authority ☐ City or Municipal
☐ Judicial District
☐ Private ☐ Other

Agency Mission (attach additional
document if necessary):

Upload Attachment (optional):

Agency Chief Executive Officer Information:

Name:

Title:

Email address:

Telephone number:

Agency-Wide PREA Coordinator Information:

Name:

Email:

PREA coordinator reports to:

Number of compliance managers who

report to PREA coordinator:	
Agency website with PREA information:	
Is the agency accredited by any other organization?	☐ Yes ☐ No

FACILITY INFORMATION	
Facility name:	
Facility physical address:	
Facility mailing address:	
Facility website with PREA Information:	☐ N/A
Has the facility been accredited within the past 3 years?	☐ Yes ☐ No
If the facility has been accredited within the past 3 years, select the accrediting organization(s): Select all that apply (N/A if the facility has not been accredited within the past 3 years):	☐ ACA ☐ NCCHC ☐ CALEA ☐ Other(please name or describe): ☐ N/A
If your facility has completed any internal or external audits other than those that resulted in accreditation, please describe:	☐ N/A
Upload any relevant accreditation, internal, or external audit reports (referenced above):	☐ N/A

Primary Contact	
Name:	
Email Address:	
Telephone Number:	

Sheriff/Chief/Director

Name:	
Email Address:	
Telephone Number:	

Facility PREA Compliance Manager

Name:	
Email Address:	
Telephone Number:	

Facility Characteristics

Designed facility capacity:	
Current population of facility:	
Average daily population for the past 12 months:	
Has the facility been over capacity at any point in the past 12 months?	☐ Yes ☐ No
What is the facility's population designation?	
In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of "intersex" and "transgender," please see https://www.prearesourcecenter.org/standard/115-5)	☐ Male ☐ Female ☐ Intersex ☐ Transgender ☐ Nonbinary
Age range of population:	
Average length of stay or time under supervision:	

Facility security levels/detainee custody levels:	
Are detainees held overnight?	☐ Yes ☐ No
Number of detainees who were held overnight at the facility during the past 12 months:	
Does the facility hold juveniles or youthful detainees?	☐ Yes ☐ No
Number of juveniles and youthful detainees held in the facility during the last 12 months: (N/A if the facility never holds juvenile or youthful detainees)	☐ N/A
Does the audited facility hold detainees for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)?	☐ Yes ☐ No
Select all other agencies for which the audited facility holds detainees: Select all that apply (N/A if the audited facility does not hold detainees for any other agency or agencies):	☐ Federal Bureau of Prisons ☐ US Marshals Service ☐ U.S. Immigration and Customs Enforcement ☐ Bureau of Indian Affairs ☐ U.S. Military branch ☐ State or Territorial correctional agency ☐ County correctional or detention agency ☐ Judicial district correctional or detention facility ☐ City or municipal correctional or detention facility (e.g. police lockup or city jail) ☐ Private corrections or detention provider ☐ Other(please name or describe): ☐ N/A
Number of staff currently employed at the facility who may have contact with detainees:	
Number of staff hired by the facility during the past 12 months who may have contact with detainees:	
Number of contracts in the past 12 months for services with contractors who may have	

contact with detainees:	
Number of individual contractors who have contact with detainees, currently authorized to enter the facility:	
Number of volunteers who have contact with detainees, currently authorized to enter the facility:	
Physical Plant	
Number of buildings: Auditors should count all buildings that are part of the facility, whether residents are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house detainees, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.	
Number of housing units or holding areas: DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers),	

and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows residents to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.	
Number of single detainee cells, rooms, holding areas, or other enclosures:	
Number of multiple occupancy cells, rooms, holding areas, or other enclosures:	
Are juveniles or youthful detainees held separately from the adult population? (N/A if the facility never holds juvenile or youthful detainees)	☐ Yes ☐ No ☐ N/A
Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?	☐ Yes ☐ No
Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?	☐ Yes ☐ No
Medical and Mental Health Services and Forensic Medical Exams	
Are medical services provided on-site?	☐ Yes ☐ No
Are mental health services provided on-	☐ Yes

site?	☐ No
Where are sexual assault forensic medical exams provided? Select all that apply	☐ On-site ☐ Local hospital/clinic ☐ Rape Crisis Center ☐ Other(please name or describe):
Investigations	
Number of investigators employed by the agency and/or facility who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment:	
When the facility receives allegations of sexual abuse or sexual harassment (whether staff-on-detainee or detainee-on-detainee), CRIMINAL INVESTIGATIONS are conducted by: Select all that apply	☐ Facility investigators ☐ Agency investigators ☐ An external investigative entity
Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)	☐ Local police department ☐ Local sheriff's department ☐ State police ☐ A U.S. Department of Justice component ☐ Other(please name or describe): ☐ N/A
Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment:	
When the facility receives allegations of sexual abuse or sexual harassment (whether staff-on-detainee or detainee-on-detainee), ADMINISTRATIVE INVESTIGATIONS are conducted by: Select all that apply	☐ Facility investigators ☐ Agency investigators ☐ An external investigative entity
Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)	☐ Local police department ☐ Local sheriff's department ☐ State police ☐ A U.S. Department of Justice component ☐ Other(please name or describe): ☐ N/A

Facility Lists	
Upload staff rosters and lists of contractors and volunteers	☐ N/A
Upload rosters of persons confined in the facility	☐ N/A
Upload lists of sexual abuse and sexual harassment allegations (including how they were investigated)	☐ N/A
Upload other list(s) (e.g., lists of grievances and/or incident reports related to sexual abuse and sexual harassment)	☐ N/A

Prevention Planning

115.111: Zero tolerance of sexual abuse and sexual harassment

115.111 (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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.111 (a)-1	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. • Upload/select zero tolerance policy	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.111 (a)-2	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. • Upload/select policy outlining implementation plan	Yes/No ☐ Yes ☐ No Enter Comment	
115.111 (a)-3	The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment.	Yes/No ☐ Yes ☐ No Enter Comment	
115.111 (a)-4	The policy includes sanctions for those found to have participated in prohibited behaviors.	Yes/No ☐ Yes ☐ No Enter Comment	
115.111 (a)-5	The policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of detainees.	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?*

Provision Findings

- ☐ Yes
☐ No

Does the written policy outline the agency’s approach to preventing, detecting, and responding to sexual abuse and sexual harassment?*

Provision Findings

- ☐ Yes
☐ No

115.111 (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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.111 (b)-1	The agency employs or designates an upper-level, agency-wide PREA coordinator. If "No", skip to 115.112. Upload/select agency organizational chart	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.111 (b)-2	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.	Yes/No ☐ Yes ☐ No Enter Comment	
115.111 (b)-3	The position of the PREA coordinator in the agency’s organizational structure:	Enter Comment	

Audit

Interview Guides

- PREA Coordinator – Q: 1, 2, 3

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Has the agency employed or designated an agency-wide PREA Coordinator?*

Provision Findings

- ☐ Yes
☐ No

Is the PREA Coordinator position in the upper-level of the agency hierarchy?*

Provision Findings

- ☐ Yes
☐ No

Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its lockups?*

Provision Findings

- ☐ Yes
☐ No

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Prevention Planning

115.112: Contracting with other entities for the confinement of detainees

115.112 (a): A law enforcement agency that contracts for the confinement of its detainees 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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.112 (a)-1	The law enforcement agency has entered into or renewed a contract for the confinement of detainees on or after August 20, 2012, or since the last PREA audit, whichever is later. If "No", skip to 115.113. • Upload/select contracts for the confinement of detainees entered into (or renewed) after August 20, 2012, or since the last PREA audit	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.112 (a)-2	All of the above contracts require contractors to adopt and comply with PREA standards.	Yes/No ☐ Yes ☐ No Enter Comment	
115.112 (a)-3	The number of contracts for the confinement of detainees that the agency entered into or renewed with private entities or other government agencies on or after August 20, 2012, or since the last PREA audit, whichever is later:	(Number only) Enter Comment	
115.112 (a)-4	The number of above contracts that DID NOT require contractors to adopt and comply with PREA standards:	(Number only) Enter Comment	

Audit

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

If this agency is law enforcement and it contracts for the confinement of its lockup detainees in lockups operated by private agencies or other entities, including other government

agencies, has the agency included the entity’s obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the law enforcement agency does not contract with private agencies or other entities for the confinement of detainees.)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

115.112 (b): Any new contract or contract renewal shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.112 (b)-1	All of the above contracts require the agency to monitor the contractor’s compliance with PREA Standards. If applicable, select contracts and indicate relevant page/ section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.112 (b)-2	The number of contracts referenced in 115.112(a)-3 that DO NOT require the agency to monitor contractor’s compliance with PREA standards:	(Number only) Enter Comment	

Audit

Interview Guides

- Agency Contract Administrator – Q: 1, 2, 3

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the law enforcement agency does not contract with private agencies or other entities for the confinement of detainees OR the response to 115.112(a)-1 is "NO".)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

Supporting Documentation

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Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in

your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Prevention Planning

115.113: Supervision and monitoring			
115.113 (a): For each lockup, the agency shall develop and document a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect detainees against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, agencies shall take into consideration: (1) The physical layout of each lockup; (2) The composition of the detainee population; (3) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and (4) Any other relevant factors.			
Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.113 (a)-1	For each lockup, the agency develops and documents a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring to protect detainees against abuse. • Upload/select: ◦ documentation of staffing plan development process ◦ staffing plan	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.113 (a)-2	Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of detainees:	(Number only) Enter Comment	
115.113 (a)-3	Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of detainees on which the staffing plan was predicated:	(Number only) Enter Comment	

Audit

Interview Guides

- Sheriff, Chief, or Director – Q: 1, 2, 3
- PREA Coordinator – Q: 4, 5

PREA Audit Site Review

SUPERVISION PRACTICES

During the site review the auditor must compare the written staffing plan against the following observations to determine whether the staffing plan adequately assesses the staffing and/or electronic monitoring needs of the facility with sexual safety in mind, and, whether the facility is staffed according to the plan, as it is written, to later determine whether deviations from the plan have been documented:

- Observe the number of staff, contractors, and volunteers present (including law enforcement and non-law enforcement staff) and staffing patterns during every shift, including:
 - In the areas where people are confined

- In common spaces
- In areas where sexual abuse is known to be more likely to occur according to the staffing plan.
- Observe staff line of sight and assess whether there are blind spots.
- Observe cells where people identified to be vulnerable during risk screening are held to ensure they are either in a single cell, under constant direct sight and sound supervision, or in a cell under constant video surveillance by staff who are close enough to intervene.
- Observe areas where persons confined in the facility are not allowed to determine whether movement in and out of that space is monitored (e.g., by cameras or other forms of surveillance), to ensure that persons confined in the facility never enter those areas.
- Observe the level of supervision and frequency of cell checks in areas where persons confined in the facility are in cells or other secure enclosures with more than one person (if applicable).
- Observe indirect supervision practices, including camera placement.
 - In addition to observation of camera placement, inquire about and observe the monitoring room, including staffing rotation (i.e., how often is camera feed monitored and by whom).
- Note any staffing concerns, including understaffing, overcrowding, poor line of sight, etc.

Additionally, the auditor should:

- Have informal conversations with staff regarding supervision practices (e.g., staffing norms, understaffing, shortages, overcrowding).
- Have informal conversations with persons confined in the facility and “inmate workers” regarding the impact of supervision practices and staffing presence (e.g., safety, overcrowding).

In lockups that hold persons under the age of 18 (including those facilities that may house but do not have any persons under the age of 18 at the time of the site review), the auditor must:

- Observe where the persons under the age of 18 are or would be held and ensure they are not ever placed in the same cell as any person confined in the facility who is 18 years or older.

Additionally, the auditor should:

- Have informal conversations with staff regarding placement of persons under the age of 18 in the facility.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency ensure that it has developed for each lockup a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect detainees against sexual abuse?*

Provision Findings

- ☐ Yes
☐ No

Does the agency ensure that it has documented for each lockup a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect detainees against sexual abuse?*

Provision Findings

- ☐ Yes
☐ No

Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The physical layout of each lockup?*

Provision Findings

- ☐ Yes
☐ No

Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The composition of the detainee population?*

Provision Findings

- ☐ Yes
☐ No

Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?*

Provision Findings

- ☐ Yes
☐ No

Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors?*

Provision Findings

- ☐ Yes
☐ No

115.113 (b): In circumstances where the staffing plan is not complied with, the lockup shall document and justify all deviations from the plan.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.113 (b)-1	Each time the staffing plan is not complied with, the facility documents and justifies all deviations from the staffing plan. Check N/A if no deviations from plan. Upload/select documentation of deviations from staffing plans and written justifications for all such deviations	Yes/No ☐ Yes ☐ No ☐ N/A Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.113 (b)-2	If documented, the six most common reasons for deviating from the staffing plan in the last 12 months:	Enter Comment	

Audit

Interview Guides

- Sheriff, Chief, or Director – Q: 4

Auditor Personal Notes

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Provision Findings

In circumstances where the staffing plan is not complied with, does the lockup document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

115.113 (c): Whenever necessary, but no less frequently than once each year, the lockup shall assess, determine, and document whether adjustments are needed to: (1) The staffing plan established pursuant to paragraph (a) of this section; (2) Prevailing staffing patterns; (3) The lockup’s deployment of video monitoring systems and other monitoring technologies; and (4) The resources the lockup has available to commit to ensure adequate staffing levels.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.113 (c)-1	At least once every year the facility reviews the staffing plan to see whether adjustments are needed in (a) the staffing plan, (b) the prevailing staffing patterns, (c) the deployment of monitoring technology, or (d) the allocation of the lockup’s resources to commit to the staffing plan to ensure compliance with the staffing plan. • Upload/select documentation of annual reviews	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
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Audit

Interview Guides

- PREA Coordinator – Q: 6

Documentation Review

- Additional annual reviews.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: 1. The staffing plan established pursuant to paragraph (a) of this section?*

Provision Findings

- ☐ Yes
☐ No

In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: Prevailing staffing patterns?*

Provision Findings

- ☐ Yes
☐ No

In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: The lockup's deployment of video monitoring systems and other monitoring technologies?*

Provision Findings

- ☐ Yes
☐ No

In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: The resources the lockup has available to commit to ensure adequate staffing levels?*

Provision Findings

- ☐ Yes
☐ No

115.113 (d): If vulnerable detainees are identified pursuant to the screening required by § 115.141, security staff shall provide such detainees with heightened protection, to include continuous direct sight and sound supervision, single-cell housing, or placement in a cell actively monitored on video by a staff member sufficiently proximate to intervene, unless no such option is determined to be feasible.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.113 (d)-1	The facility utilizes a screening process required by § 115.141 to identify vulnerable detainees.	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.113 (d)-2	Vulnerable detainees are provided with heightened protection. • Upload/select policy or other documentation of requirement	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

Interview Guides

- Security Staff – Q: 1

PREA Audit Site Review

- Review site review instructions outlined in provision (a).

Documentation Review

- Additional documentation of supervision procedures.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

If vulnerable detainees are identified pursuant to the screening required by § 115.141, does security staff provide such detainees with heightened protection, to include: Continuous direct sight and sound supervision?*

Provision Findings

- ☐ Yes
☐ No

If vulnerable detainees are identified pursuant to the screening required by § 115.141, does security staff provide such detainees with heightened protection, to include: Single-cell housing or placement in a cell actively monitored on video by a staff member sufficiently proximate to intervene, unless no such option is determined to be feasible?*

Provision Findings

- ☐ Yes
☐ No

Supporting Documentation

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Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

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Prevention Planning

115.114: Juveniles and youthful detainees

115.114 (a): Juveniles and youthful detainees shall be held separately from adult detainees.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.114 (a)-1	The facility holds juveniles and youthful detainees separately from adult detainees. Upload/select policy on holding juveniles and youthful detainees	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.114 (a)-2	In the past 12 months, the number of juveniles/youthful detainees held in the facility:	(Number only) Enter Comment	
115.114 (a)-3	In the past 12 months, the number of juveniles/youthful detainees held in the same cell as adults in this facility: Upload/select daily population reports for the last 12 months	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

Interview Guides

- Sheriff, Chief, or Director – Q: 8 Random Sample of Staff – Q: 14
- Juveniles/Youthful Detainees – Q: 1

PREA Audit Site Review

In **lockups that hold persons under the age of 18** (including those facilities that may house but do not have any persons under the age of 18 at the time of the site review), the auditor must:

- Observe where the persons under the age of 18 are or would be held and ensure they are not ever placed in the same cell as any person confined in the facility who is 18 years or older.

Additionally, the auditor should:

- Have informal conversations with staff regarding placement of persons under the age of 18 in the facility.

Documentation Review

- Daily population report for day of audit.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Are juveniles and youthful detainees held separately from adult detainees? (N/A if the facility does not hold juveniles or youthful detainees (detainees <18 years old).)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Prevention Planning

115.115: Limits to cross-gender viewing and searches

115.115 (a): The lockup 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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.115 (a)-1	The lockup conducts cross-gender strip or cross-gender visual body cavity searches of detainees. • Upload/select policy on searches	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.115 (a)-2	In the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of detainees:	(Number only) Enter Comment	

Audit

Interview Guides

- Non-medical staff (involved in cross-gender strip or visual searches) – Q: 1

PREA Audit Site Review

CROSS-GENDER SEARCHES

Note: the Standards use the term “cross-gender,” but for the purposes of clarity in this document we use both “cross-gender” and “opposite-gender” when referring to viewing or searches of persons confined in the facility by staff of the opposite gender.

During the site review, the auditor must:

- Observe areas used to conduct strip searches and visual body cavity searches and assess whether opposite-gender staff (i.e., non-medical personnel) can watch the conduct of a strip search or visual body cavity search (absent exigent circumstances).
 - **If opposite-gender supervisors are required to supervise or observe strip searches**, observe the area used to conduct searches and note if a

privacy screen or other similar device is used to obstruct cross-gender viewing.

- **If opposite-gender staff or personnel can be in the vicinity of the strip search area**, observe the area used to conduct searches and note if a privacy screen or other similar device is used to obstruct cross-gender viewing or if the staff or personnel are kept at a sufficient distance where the contours of the breasts, genitalia, or buttocks are not readily distinguishable.

Additionally, the auditor should:

- Have informal conversations with staff and persons confined in the facility regarding search procedures (e.g., limits to cross-gender viewing, supervision of searches).

Documentation Review

- Logs of cross-gender strip searches and cross-gender visual body cavity searches in the past 12 months.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the lockup always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?*

Provision Findings

- ☐ Yes
☐ No

115.115 (b): The lockup shall document all cross-gender strip searches and cross-gender visual body cavity searches.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.115 (b)-1	Facility policy requires that all cross-gender strip searches and cross-gender visual body cavity searches be documented. If applicable, select policy on searches and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
Audit			
Documentation Review			
Documentation of cross-gender strip searches and cross-gender visual body cavity searches of all detainees.			
Auditor Personal Notes			
Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.			

Provision Findings

Does the lockup document all cross-gender strip searches and cross-gender visual body cavity searches?*

Provision Findings

- ☐ Yes
☐ No

115.115 (c): The lockup shall implement policies and procedures that enable detainees to shower, perform bodily functions, and change clothing without nonmedical 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 area where detainees are likely to be showering, performing bodily functions, or changing clothing.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.115 (c)-1	The facility has implemented policies and procedures that enable detainees 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). - Upload/select: - policy on cross-gender viewing - logs of exigent circumstances that may require deviance from the standard	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.115 (c)-2	Policies and procedures require staff of the opposite gender to announce their presence when entering an area	Yes/No ☐ Yes ☐ No Enter Comment	

	where detainees are likely to be showering, performing bodily functions, or changing clothing.		
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Audit

Interview Guides

- Detainee Interview Questionnaire – Q: 1, 2
- Random Sample of Staff – Q: 13

PREA Audit Site Review

CROSS-GENDER VIEWING

Note: the Standards use the term “cross-gender,” but for the purposes of clarity in this document we use both “cross-gender” and “opposite-gender” when referring to viewing or searches of persons confined in the facility by staff of the opposite gender.

During the site review, the auditor must:

- Observe all areas where persons confined in the facility may be in a state of undress, such as showering, using the toilet, and/or changing their clothes.
 - All areas including:
 - Inside cells, cell blocks, or secure enclosures.
 - Shared bathrooms/shower areas.

- Outside of the secure enclosures (e.g., intake cells/areas, transport holding areas).
- Observe if any nonmedical staff of the opposite gender are able to view persons confined in the facility in a state of undress, including from different angles and via mirror placement.
- Observe spaces from multiple perspectives and vantage points, as applicable.
 - If mirrors are present, observe the placement and angle of mirrors.
- Observe electronic surveillance monitoring areas such as control rooms or other spaces where staff monitor live or recorded video feeds of persons confined in the facility (e.g., via camera feed) and determine if:
 - Opposite-gender staff are assigned to monitor video surveillance (recorded or live) (e.g., male staff viewing female persons confined in the facility or vice versa).
 - The video monitoring technology allows for point, tilt, zoom (PTZ) capabilities which could allow staff to see persons confined in the facility in a state of undress.
 - The facility uses any type of software (e.g., pixilation or blurring) or other mechanisms (e.g., post-its, tape) to obscure cross-gender viewing of persons confined in the facility in a state of undress.

Additionally, the auditor should:

- Have informal conversations with staff regarding cross-gender viewing, including staff responsible for monitoring camera feed/electronic monitoring (e.g., procedures to prevent cross-gender viewing via electronic monitoring, staff assigned to monitor camera feed, whether live or recorded, frequency of monitoring).
- Have informal conversations with persons confined in the facility regarding changing clothes, using the toilet, and showering without staff of the opposite gender being able to view.

Inside housing units, the auditor must also:

- Observe the method(s) used to alert individuals confined in the facility that an opposite-gender staff person has entered an area where people who are confined in the facility are likely to be changing clothes, showering, or using the toilet (i.e., cross-gender announcement).
 - Alert methods might include a verbal announcement, distinct buzzer, bell, or other noise-making device.
- Assess whether the alert method(s) is sufficient to alert the people confined in the facility that an opposite-gender staff person will be entering the area where they are changing clothes, showering, or using the toilet and allow them to cover-up and determine whether:
 - The alert is loud enough for all of the persons confined in the cells, cell block, or secure enclosure to hear.
 - The time between the alert and the staff person's arrival provides enough time for persons confined in that area to cover up before the staff enter.

- The alert is provided in such a manner that persons confined in the facility who have disabilities (e.g., persons who are Deaf or hard of hearing, Blind or have low vision, or those who are cognitively or functionally disabled (including intellectual, psychiatric, or speech disabilities)) are also properly alerted to staff of the opposite-gender in the area where they are changing clothes, showering, or using the toilet.

Additionally, the auditor should:

- Have informal conversations with staff in housing units regarding opposite- gender announcement procedures (e.g., verify opposite-gender announcement procedures, frequency opposite-gender announcements).
- Have informal conversations with persons confined in the facility regarding opposite-gender announcement procedures.
- **Important note:** It may not always be possible to observe a cross-gender announcement if, for example, there are no persons confined in the facility using the shower areas or bathrooms, or otherwise in areas where they'd change clothes, or no staff of the opposite-gender of those confined in the facility at the time of the audit. In these circumstances, the auditor should rely upon other types of evidence (i.e., documentation, interviews of staff and persons confined in the facility).

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the lockup implement policies and procedures that enable detainees to shower, perform bodily functions, and change clothing without nonmedical 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?*

Provision Findings

- ☐ Yes
☐ No

Does the lockup require staff of the opposite gender to announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or

changing clothing?*

Provision Findings

- ☐ Yes
☐ No

115.115 (d): The lockup shall not search or physically examine a transgender or intersex detainee for the sole purpose of determining the detainee’s genital status. If the detainee’s genital status is unknown, it may be determined during conversations with the detainee, 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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.115 (d)-1	The facility has a policy prohibiting staff from searching or physically examining a transgender or intersex detainee for the sole purpose of determining the detainee’s genital status. • Upload/select policy on transgender or intersex inmates	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.115 (d)-2	Such searches (described in 115.115(d)-1) occurred in the past 12 months.	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

Interview Guides

- Random Sample of Staff – Q: 3
- Transgender/Intersex Detainees – Q: 1

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the lockup always refrain from searching or physically examining transgender or intersex detainees for the sole purpose of determining the detainee's genital status?*

Provision Findings

- ☐ Yes
- ☐ No

If a detainee's genital status is unknown, does the lockup determine genital status during conversations with the detainee, 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?*

Provision Findings

- ☐ Yes
- ☐ No

115.115 (e): The agency shall train law enforcement staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex detainees, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.115 (e)-1	The percent of all law enforcement staff who received training on conducting cross-gender pat-down searches and searches of transgender and intersex detainees in a professional and respectful manner, consistent with security needs. (The percentage given does not necessarily indicate compliance or non-compliance with the standard): • Upload/select: ◦ training curricula ◦ training logs	(Number only) Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
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Audit

Interview Guides

- Random Sample of Staff – Q: 2

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency train law enforcement staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?*

Provision Findings

- ☐ Yes
☐ No

Does the agency train law enforcement staff in how to conduct searches of transgender and intersex detainees in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?*

Provision Findings

- ☐ Yes
☐ No

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Prevention Planning

115.116: Detainees with disabilities and detainees who are limited English proficient

115.116 (a): The agency shall take appropriate steps to ensure that detainees with disabilities (including, for example, detainees 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 detainees 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 detainees with disabilities, including detainees 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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.116 (a)-1	The agency has established procedures to provide disabled detainees 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. • Upload/select: ◦ policy/documentation of procedures ◦ contracts with interpreters or other professionals hired to ensure effective communication with detainees who have disabilities ◦ written materials used for effective communication about PREA with detainees	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

- with disabilities
 - documentation of staff training on PREA-compliant practices for detainees with disabilities

Audit

Interview Guides

- Agency Head – Q:11
- Detainees (with disabilities or who are limited English proficient) – Q: 1, 2, 3

PREA Audit Site Review

INTERPRETATION SERVICES

As part of the formal interview process, the auditor must interview persons confined in the facility who are LEP, deaf, or hard of hearing. As such, those interviews are an excellent opportunity to test the facility's access to interpretation services. The auditor should not notify or set-up interpreting or language line access in advance of the audit. Instead, the auditor must test the facility's process for securing an interpreter in real-time. Note, the auditor must access the interpretation services in whatever manner is available to the persons confined in the facility.

During the site review, the auditor must:

- Test the facility's process for securing interpretation services on-demand.

- If services are provided via a language line, the auditor must test access to services via the language line to assess whether the phones for accessing the language line work properly (e.g., the auditor should pick up the phone to confirm there is a dial tone).
- Determine if persons confined in the facility must self-identify (e.g., enter pin, provide name/ID number) to access interpretation services. This is important to understand related to anonymous reporting or confidential access to emotional support services.
- Assess the availability of interpretation services (e.g., ability to access immediate interpretation services).
- Assess the accessibility of interpretation services (i.e., available to all persons confined in the facility who need an interpreter, including persons confined in restricted housing).
- Observe the location of interpretation services (e.g., are services provided in a location that provides some privacy for the persons confined in the facility?).

Additionally, the auditor should:

- Have informal conversations with staff and persons confined in the facility regarding accessibility of interpretation services when needed (e.g., experiences with interpretation services in the past).

Documentation 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.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency take appropriate steps to ensure that detainees with 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, including: Detainees who are deaf or hard of hearing?*

Provision Findings

- ☐ Yes
☐ No

Does the agency take appropriate steps to ensure that detainees with 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, including: Detainees who are blind or have low vision?*

Provision Findings

- ☐ Yes
☐ No

Does the agency take appropriate steps to ensure that detainees with 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, including: Detainees who have intellectual disabilities?*

Provision Findings

- ☐ Yes
☐ No

Does the agency take appropriate steps to ensure that detainees with 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, including: Detainees who have psychiatric disabilities?*

Provision Findings

- ☐ Yes
☐ No

Does the agency take appropriate steps to ensure that detainees with 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, including: Detainees who have speech disabilities?*

Provision Findings

- ☐ Yes
☐ No

Does the agency take appropriate steps to ensure that detainees with 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, including: Other? (if "other," please explain in the overall determination notes.)*

Provision Findings

- ☐ Yes
☐ No

Do such steps include, when necessary, ensuring effective communication with detainees who are deaf or hard of hearing?*

Provision Findings

- ☐ Yes
☐ No

Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?*

Provision Findings

- ☐ Yes
☐ No

Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities including detainees who: Have intellectual disabilities?*

Provision Findings

- ☐ Yes
☐ No

Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities including detainees who: Have limited reading skills?*

Provision Findings

- ☐ Yes
☐ No

Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities including detainees who: are blind or have low vision?*

Provision Findings

- ☐ Yes
☐ No

115.116 (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 detainees 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 vocabulary.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.116 (b)-1	The agency has established procedures to provide detainees 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. • Upload/select: ◦ policy/documentation of procedures ◦ contracts with interpreters or other professionals hired to ensure effective communication with detainees with Limited English Proficiency ◦ written materials used for effective communication about PREA with detainees with Limited English Proficiency ◦ documentation of staff training on PREA-compliant practices for detainees with Limited English Proficiency	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Interview Guides

- Detainees (with disabilities or who are limited English proficient) – Q: 1, 2, 3

PREA Audit Site Review

- Review site review instructions outlined in provision (a).

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency 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 detainees who are limited English proficient?*

Provision Findings

- ☐ Yes
☐ No

Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?*

Provision Findings

- ☐ Yes
☐ No

115.116 (c): The agency shall not rely on detainee interpreters, detainee readers, or other types of detainee assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety, the performance of first-response duties under § 115.164, or the investigation of the detainee's allegations.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.116 (c)-1	Agency policy prohibits use of detainee interpreters, detainee readers, or other types of detainee assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety, the performance of first-response duties under § 115.164, or the investigation of the detainee's allegations. • Upload/select policy on detainee interpreters, readers, or assistants	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.116 (c)-2	If YES, the agency or facility documents the limited circumstances in individual cases where detainee interpreters, readers, or other types of detainee assistants are used. (Absence of such documentation does not result in noncompliance with the standard.)	Yes/No ☐ Yes ☐ No Enter Comment	
115.116 (c)-3	In the past 12 months, the number of instances where detainee interpreters, readers, or other types of detainee assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the detainee's safety, the performance of first-response duties under § 115.164, or the investigation of the detainee's allegations:	(Number only) Enter Comment	

Audit

Interview Guides

- Random Sample of Staff – Q: 8
- Detainees (with disabilities or who are limited English proficient) – Q: 1, 2, 3

Documentation Review

- Documentation of circumstances when detainee interpreters, readers, other detainee assistants were used.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency always refrain from relying on detainee interpreters, detainee readers, or other types of detainee assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety, the performance of first-response duties under §115.164, or the investigation of the detainee's allegations?*

Provision Findings

- ☐ Yes
☐ No

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Prevention Planning

115.117: Hiring and promotion decisions

115.117 (a): The agency shall not hire or promote anyone who may have contact with detainees, and shall not enlist the services of any contractor who may have contact with detainees, 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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.117 (a)-1	Agency policy prohibits hiring or promoting anyone who may have contact with detainees and prohibits enlisting the services of any contractor who may have contact with detainees 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 • Upload/select policy for hiring and promoting	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
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Audit

Documentation 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.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees 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)?*

Provision Findings

- ☐ Yes
☐ No

Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees who: 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?*

Provision Findings

- ☐ Yes
☐ No

Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?*

Provision Findings

- ☐ Yes
☐ No

Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: o 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)?*

Provision Findings

- ☐ Yes
☐ No

Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: 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?*

Provision Findings

- ☐ Yes
☐ No

Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?*

Provision Findings

- ☐ Yes
☐ No

115.117 (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 detainees.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.117 (b)-1	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 detainees. If applicable, select policy on hiring and promotions and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Interview Guides

- Administrative (Human Resources) Staff – Q: 2

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency 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 detainees?*

Provision Findings

- ☐ Yes
- ☐ No

115.117 (c): Before hiring new employees who may have contact with detainees, 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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.117 (c)-1	Agency policy requires that before it hires any new employees who may have contact with detainees, it (a) conducts criminal background record checks, and (b) consistent with federal, state, and local law, makes 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. If applicable, select policy on hiring and promotions and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.117 (c)-2	In the past 12 months, the number of persons hired who may have contact with detainees who have had criminal background record checks:	(Number only) Enter Comment	

Audit

Interview Guides

- Administrative (Human Resources) Staff – Q: 1

Documentation Review

- Files of personnel hired in the past 12 months to determine that agency has completed checks consistent with 115.117(c).

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Before hiring new employees who may have contact with detainees, does the agency:
Perform a criminal background records check?*

Provision Findings

- ☐ Yes
☐ No

Before hiring new employees who may have contact with detainees, does the agency:
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?*

Provision Findings

- ☐ Yes
☐ No

115.117 (d): The agency shall also perform a criminal background records check before
enlisting the services of any contractor who may have contact with detainees.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.117 (d)-1	Agency policy requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with detainees. If applicable, select policy on hiring and promotions and indicate relevant page/section	Yes/No ☐ Yes ☐ No	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.117 (d)-2	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 detainees:	(Number only)	

Audit

Interview Guides

- Administrative (Human Resources) Staff – Q: 1

Documentation Review

- Records of background checks of contractors who might have contact with detainees.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with detainees?*

Provision Findings

- ☐ Yes
☐ No

115.117 (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 detainees or have in place a system for otherwise capturing such information for current employees.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.117 (e)-1	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 detainees or that a system is in place for otherwise capturing such information for current employees. • Upload/select policy on background checks of current employees/contractors	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Interview Guides

- Administrative (Human Resources) Staff – Q: 3

Documentation Review

- Documentation of background records checks of current employees and contractors at five- year intervals when applicable.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with detainees or have in place a system for otherwise capturing such information for current employees?*

Provision Findings

- ☐ Yes
☐ No

115.117 (f): The agency shall ask all applicants and employees who may have contact with detainees 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.

Pre-Audit

**Issue Log
Notes**

Audit

Interview Guides

- Administrative (Human Resources) Staff – Q: 4, 5

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency ask all applicants and employees who may have contact with detainees directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?*

Provision Findings

- ☐ Yes
☐ No

Does the agency ask all applicants and employees who may have contact with detainees directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?*

Provision Findings

- ☐ Yes
☐ No

Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?*

Provision Findings

- ☐ Yes
☐ No

115.117 (g): Material omissions regarding such misconduct, or the provision of materially false information, are grounds for termination.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.117 (g)-1	Agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination. If applicable, select policy on hiring and promotions and/or policy on background checks and indicate relevant page(s)/section(s)	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
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Audit

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?*

Provision Findings

- ☐ Yes
- ☐ No

115.117 (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.

Audit

Interview Guides

- Administrative (Human Resources) Staff – Q: 6

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Unless prohibited by law, does the agency 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? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Prevention Planning

115.118: Upgrades to facilities and technologies

115.118 (a): When designing or acquiring any new lockup and in planning any substantial expansion or modification of existing lockups, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect detainees from sexual abuse.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.118 (a)-1	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/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
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Audit

Interview Guides

- Agency Head – Q: 1
- Sheriff, Chief, or Director – Q: 5

Documentation Review

- Documentation on how the agency considered the effect of the facility design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

If the agency designed or acquired any new lockup or planned any substantial expansion or modification of existing lockups, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency’s ability to protect detainees from sexual abuse? (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.)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

115.118 (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 detainees from sexual abuse.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.118 (b)-1	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/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
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Audit

Interview Guides

- Agency Head – Q: 2
- Sheriff, Chief, or Director– Q: 6

Documentation Review

- If the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, documentation of how the agency considered how such technology may enhance the agency's ability to protect detainees from sexual abuse (e.g., minutes from meetings referencing installing or updating monitoring technology).

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your

findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect detainees from sexual abuse? (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.)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken

by the facility.

Responsive Planning

115.121: Evidence protocol and forensic medical examinations			
115.121 (a): To the extent the agency is responsible for investigating allegations of sexual abuse in its lockups, the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions.			
Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.121 (a)-1	The agency/facility is responsible for conducting administrative sexual abuse investigations (including detainee-on-detainee sexual abuse or staff sexual misconduct).	Yes/No ☐ Yes ☐ No Enter Comment	
115.121 (a)-2	The agency/facility is responsible for conducting criminal sexual abuse investigations (including detainee-on-detainee sexual abuse or staff sexual misconduct).	Yes/No ☐ Yes ☐ No Enter Comment	
115.121 (a)-3	If another agency has responsibility for conducting either administrative or criminal investigations, the name of the agency that has responsibility (if another agency has responsibility for conducting both administrative and criminal sexual abuse investigations, skip to 115.21 (b)-3).	Enter Comment	
115.121 (a)-4	When conducting a sexual abuse investigation, the agency investigators follow a uniform evidence protocol. • Upload/select uniform evidence protocol	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

Interview Guides

- Random Sample of Staff – Q: 9, 11

Other Audit Instructions

- Note: Review uniform evidence protocol for evidence that there is sufficient technical detail to aid responders in obtaining usable physical evidence.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

If the agency is responsible for investigating allegations of sexual abuse in its lockups, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

115.121 (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. As part of the training required in § 115.131, employees and volunteers who may have contact with lockup detainees shall receive basic training regarding how to detect and respond to victims of sexual abuse.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.121 (b)-1	The protocol is developmentally appropriate for youth. If applicable, select uniform evidence protocol and indicate relevant page/section	Yes/No ☐ Yes ☐ No ☐ N/A Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.121 (b)-2	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. If "No", indicate the source used to develop the protocol in the comments section. Upload/select alternative source (if applicable)	Yes/No ☐ Yes ☐ No Enter Comment	
115.121 (b)-3	Employees and volunteers who may have contact with detainees receive basic training regarding how to detect and respond to victims of sexual abuse. Upload/select any relevant documentation (e.g. policies, training curriculum, training logs).	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

Other Audit Instructions

- 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.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

Is this protocol, as appropriate, 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? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

115.121 (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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.121 (c)-1	The facility offers all detainees who experience sexual abuse access to forensic medical examinations. If no, skip to 115.121 (d)-1.	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.121 (c)-2	Forensic medical examinations are offered without financial cost to the victim. Upload/select documentation that forensic medical exams are offered for free	Yes/No ☐ Yes ☐ No Enter Comment	
115.121 (c)-3	Where possible, examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). If "Sometimes", please describe situations when SAFEs or SANEs are not used in the comments section.	Yes/No ☐ Yes ☐ No ☐ Sometimes Enter Comment	
115.121 (c)-4	When SANEs or SAFEs are not available, a qualified medical practitioner performs forensic medical examinations.	Yes/No ☐ Yes ☐ No Enter Comment	
115.121 (c)-5	The facility documents efforts to provide SANEs or SAFEs. Upload/select documentation of efforts to provide SAFEs/ SANEs	Yes/No ☐ Yes ☐ No Enter Comment	
115.121 (c)-6	The number of forensic medical exams conducted during the past 12 months:	(Number only) Enter Comment	
115.121 (c)-7	The number of exams performed by SANEs/SAFEs during the past 12 months:	(Number only) Enter Comment	

115.121 (c)-8	The number of exams performed by a qualified medical practitioner during the past 12 months:	 (Number only) Enter Comment	
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Audit

Documentation Review

- Documentation to corroborate that all detainee victims of sexual abuse have access to forensic medical examinations.
- Any available documentation that delineates responsibilities of outside medical and mental health practitioners.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency 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?*

Provision Findings

- ☐ Yes
- ☐ No

Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?*

Provision Findings

- ☐ Yes
- ☐ No

If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?*

Provision Findings

- ☐ Yes
- ☐ No

Has the agency documented its efforts to provide SAFEs or SANEs?*

Provision Findings

- ☐ Yes
- ☐ No

115.121 (d): If the detainee is transported for a forensic examination to an outside hospital that offers victim advocacy services, the detainee shall be permitted to use such services to the extent available, consistent with security needs.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.121 (d)-1	Victims of sexual abuse are transported for forensic examination to an outside hospital. If "No", skip to 115.121(e)-1.	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.121 (d)-2	If YES, victims are permitted to use any existing victim advocacy services said hospital may offer, consistent with security needs. • Upload/select relevant documentation	Yes/No ☐ Yes ☐ No Enter Comment	
115.121 (d)-3	In the past 12 months, the number of detainees transported to outside hospital for forensic examination:	(Number only) Enter Comment	
115.121 (d)-4	In the past 12 months, the number of detainees transported to outside hospital for forensic examination who were offered victim advocacy services:	(Number only) Enter Comment	

Audit

Interview Guides

- PREA Coordinator – Q: 9

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

If the detainee is transported for a forensic examination to an outside hospital that offers victim advocacy services, does the agency permit the detainee to use such services to the

extent available, consistent with security needs?*

Provision Findings

- ☐ Yes
☐ No

115.121 (e): 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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.121 (e)-1	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 §115.121 (a) through (e) of the standards. Check N/A if the agency/facility is responsible for conducting criminal and administrative sexual abuse investigations. • Upload/select agreements/ MOUs with responsible agency	Yes/No ☐ Yes ☐ No ☐ N/A Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Documentation Review

- Documentation of establishment of the requirements of 115.121(a) through (e) with outside investigating agency.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting any form of criminal or administrative sexual abuse investigations.)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

115.121 (f): The requirements of paragraphs (a) through (e) 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 lockups; and (2) Any Department of Justice component that is responsible for investigating allegations of sexual abuse in lockups.

Pre-Audit

Issue Log Notes

Audit

Other Audit Instructions

- **Auditor is not required to audit this provision.**

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Responsive Planning

115.122: Policies to ensure referrals of allegations for investigations

115.122 (a): The agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.122 (a)-1	The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (including detainee-on-detainee sexual abuse and staff sexual misconduct). Upload/select policies and/or procedures governing investigations of allegations of sexual abuse and sexual harassment	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.122 (a)-2	During the past 12 months, the number of allegations of sexual abuse and sexual harassment that were received:	(Number only) Enter Comment	
115.122 (a)-3	During the past 12 months, the number of allegations resulting in an administrative investigation:	(Number only) Enter Comment	
115.122 (a)-4	During the past 12 months, the number of allegations referred for criminal investigation:	(Number only) Enter Comment	
115.122 (a)-5	Referring to allegations received during the past 12 months, all administrative and/or criminal investigations were completed. If "No", please explain in the comments section.	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

Interview Guides

- Agency Head – Q: 3, 4

Documentation Review

- Documentation of reports of sexual abuse and harassment and documentation of investigations, including full investigative report with findings.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?*

Provision Findings

- ☐ Yes
☐ No

Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?*

Provision Findings

- ☐ Yes
☐ No

115.122 (b): If another law enforcement agency is responsible for conducting investigations of allegations of sexual abuse or sexual harassment in its lockups, the agency shall have in place a policy to ensure that such allegations 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 shall publish such policy, including a description of responsibilities of both the agency and the investigating entity, on its website, or, if it does not have one, make available the policy through other means. The agency shall document all such referrals.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.122 (b)-1	If another law enforcement agency is responsible for conducting investigations of allegations of sexual abuse or sexual harassment in its facilities, 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, unless the allegation does not involve potentially criminal behavior. Check N/A if the agency is responsible for conducting its own administrative AND criminal investigations. If "No" or "N/A", skip to 115.222(c)-1. • Upload/select investigative policy	Yes/No ☐ Yes ☐ No ☐ N/A Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.122 (b)-2	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.	Yes/No ☐ Yes ☐ No Enter Comment	
115.122 (b)-3	The agency documents all referrals of allegations of sexual abuse or sexual harassment for criminal investigation.	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

Interview Guides

- Investigative Staff – Q: 4

Documentation Review

- Verify that policy is on website or other means made publicly available.
- 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.
- Documentation of referrals of allegations of sexual abuse and/or sexual harassment.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

If another law enforcement agency is responsible for conducting investigations of allegations of sexual abuse and sexual harassment in its lockups, does the agency have a policy in place to ensure that such allegations are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

Has the agency published such policy, including a description of responsibilities of both the agency and the investigating entity, on its website or, if it does not have one, made the policy available through other means? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

Does the agency document all such referrals? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See

115.121(a.)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

115.122 (c): Any State entity responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in lockups shall have in place a policy governing the conduct of such investigations.

Pre-Audit

Issue Log
Notes

Audit

Other Audit Instructions

- Auditor is not required to audit this provision.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

115.122 (d): Any Department of Justice component responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in lockups shall have in place a policy governing the conduct of such investigations.

Pre-Audit

Issue Log
Notes

Audit

Other Audit Instructions

- **Auditor is not required to audit this provision.**

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Training and Education

115.131: Employee and volunteer training

115.131 (a): The agency shall train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: (1) The agency's zero-tolerance policy and detainees' right to be free from sexual abuse and sexual harassment; (2) The dynamics of sexual abuse and harassment in confinement settings, including which detainees are most vulnerable in lockup settings; (3) The right of detainees and employees to be free from retaliation for reporting sexual abuse or harassment; (4) How to detect and respond to signs of threatened and actual abuse; (5) How to communicate effectively and professionally with all detainees; and (6) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.131 (a)-1	The agency trains all employees and volunteers who may have contact with detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on the agency's zero-tolerance policy and detainees' right to be free from sexual abuse and sexual harassment • Upload/select: ◦ training policy and/or procedures ◦ training curriculum	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.131 (a)-2	The agency trains all employees and volunteers who may have contact with detainees on the dynamics of sexual abuse and harassment in confinement settings, including which detainees are most vulnerable in lockup settings. • If applicable, select training curriculum and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	
115.131 (a)-3	The agency trains all employees and volunteers who may have contact	Yes/No ☐ Yes ☐ No	

	with detainees on the right of detainees and employees to be free from retaliation for reporting sexual abuse or harassment. If applicable, select training curriculum and indicate relevant page/section	Enter Comment
115.131 (a)-4	The agency trains all employees and volunteers who may have contact with detainees on how to detect and respond to signs of threatened and actual abuse. If applicable, select training curriculum and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment
115.131 (a)-5	The agency trains all employees and volunteers who may have contact with detainees on how to communicate effectively and professionally with all detainees. If applicable, select training curriculum and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment
115.131 (a)-6	The agency trains all employees and volunteers who may have contact with detainees on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. If applicable, select training curriculum and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment

Audit

Interview Guides

- Random Sample of Staff – Q: 1
- Volunteers (who may have contact with detainees) – Q: 1

Documentation Review

- Sample of training records.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: Its zero-tolerance policy and detainees' right to be free from sexual abuse and sexual harassment?*

Provision Findings

- ☐ Yes
☐ No

Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The dynamics of sexual abuse and sexual harassment in confinement, including which detainees are most vulnerable in lockup settings?*

Provision Findings

- ☐ Yes
☐ No

Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The right of detainees and employees to be free from retaliation for reporting sexual abuse or harassment?*

Provision Findings

- ☐ Yes
☐ No

Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to detect and respond to signs of threatened and actual sexual abuse?*

Provision Findings

- ☐ Yes
☐ No

Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to communicate effectively and professionally with all detainees?*

Provision Findings

- ☐ Yes
☐ No

Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?*

Provision Findings

- ☐ Yes
☐ No

115.131 (b): All current employees and volunteers who may have contact with lockup detainees shall be trained within one year of the effective date of the PREA standards, and the agency shall provide annual refresher information to all such employees and volunteers to ensure that they know the agency's current sexual abuse and sexual harassment policies and procedures.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.131 (b)-3	Between trainings the agency provides employees and volunteers who may have contact with detainees with information about current policies regarding sexual abuse and sexual harassment. If "YES", please describe in the comments section. If applicable, select training curriculum and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.131 (b)-4	The frequency with which employees and volunteers who may have contact with detainees receive refresher training on PREA requirements.	Enter Comment	

Audit

Documentation Review

- Sample of training records.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Have all current employees and volunteers who may have contact with detainees received such training?*

Provision Findings

- ☐ Yes
☐ No

Does the agency provide each employee and volunteer with annual refresher information to ensure that they know the agency's current sexual abuse and sexual harassment policies and procedures?*

Provision Findings

- ☐ Yes
☐ No

115.131 (c): The agency shall document, through employee signature or electronic verification, that employees understand the training they have received.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.131 (c)-1	The agency documents that employees who may have contact with detainees understand the training they have received through employee signature or electronic verification.	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Documentation Review

- Documentation of employee signatures or electronic verification signifying comprehension of the training.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?*

Provision Findings

- ☐ Yes
☐ No

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in

your report)

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Training and Education

115.132: Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy

115.132 (a): During the intake process, employees shall notify all detainees of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.132 (a)-1	During the intake process, employees notify all detainees of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment. • Upload agency/facility policy governing PREA education of detainees	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.132 (a)-2	Of detainees admitted during the past 12 months, the number who were given this information at intake (if available):	(Number only) Enter Comment	

Audit

Interview Guides

- Intake Staff – Q: 1
- Detainee Interview Questionnaire – Q: 3

PREA Audit Site Review

INTAKE: PREA INFORMATION

As part of the site review, the auditor must ask to observe, during an actual intake process, if possible, the sexual safety information (PREA information/zero-tolerance information) provided at the point of intake; if no one is being admitted during the onsite audit, the auditor may ask staff to walk through the process and do a mock intake for demonstration purposes.

During the intake or mock demo, the auditor must:

- Confirm who is responsible for conducting the intake process.
 - This information will be important for interviewing the right staff who are responsible for the intake process.
- Test how the facility provides the necessary PREA information to all persons confined in the facility, regardless of ability and language, including whether:
 - Written information, if applicable, is clear and provided at an appropriate reading-level and is accessible for all persons confined in the facility, including those who are limited English proficient (LEP) (i.e., the facility provides written information in the languages most commonly spoken in the facility and/or provides translation services on- demand).
 - Note: people who are “limited English proficient” (LEP) refers to those who do not speak English as their primary language and who have a limited ability to read, write, speak, or understand English. People who are limited English proficient may use spoken or sign language.
 - The facility provides interpreters, when needed, to assist Deaf and non-English speaking persons confined in the facility (see section Interpretation Services).
 - Staff are prepared to read written information out loud, if applicable, to make accommodations for persons confined in the facility when necessary (e.g., Blind or have low vision, limited reading skills, etc.).
 - Mental health staff or other skilled educators/staff are involved in providing the required information to persons confined in the facility who have cognitive or functional disabilities.

Additionally, the auditor should:

- Have informal conversations with staff (if mock demo) or persons confined in the facility (if an actual intake) regarding initial PREA education provided during intake

(e.g., understanding of information provided, access to additional support to understand information provided, if necessary).

Documentation Review

- Intake records of detainees entering the facility in the last 12 months (spot check).
- Log or other record corroborating that those detainees received information at intake (e.g., detainee signatures).
- Any relevant education materials (e.g. detainee handbook) to ensure that relevant information is covered.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

During the intake process, do employees notify all detainees of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment?*

Provision Findings

- ☐ Yes
- ☐ No

115.132 (b): The agency shall ensure that, upon entering the lockup, contractors and any inmates who work in the lockup are informed of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.132 (b)-1	Contractors and any inmates who work in the facility are informed of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment upon entering the facility.	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.132 (b)-2	All contractors and inmates who work in the lockup are informed upon entering the lockup of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment:	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

Interview Guides

- Contractor(s) and Inmates who work in the Lockup (who may have contact with Detainees – Q: 1

Documentation Review

- Log or other record corroborating that those contractors and any inmates who work in the lockup received information upon entering the lockup (e.g., contractor/inmate signatures).
- Any relevant education materials (e.g. handout) to ensure that relevant information is covered.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your

findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency ensure that, upon entering the lockup, all contractors and any inmates who work in the lockup are informed of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?*

Provision Findings

- ☐ Yes
☐ No

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Training and Education

115.134: Specialized training: Investigations

115.134 (a): In addition to the general training provided to all employees and volunteers pursuant to § 115.131, 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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.134 (a)-1	Agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings. Check N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations and skip to 115.141(a)-1. • Upload/select: ◦ training policy ◦ training curriculum for investigators	Yes/No ☐ Yes ☐ No ☐ N/A Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Interview Guides

- Investigative Staff – Q: 1, 2

Documentation Review

- Training records/logs of investigative staff.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

In addition to the general training provided to all employees and volunteers pursuant to §115.131, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

115.134 (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.

Pre-Audit

Issue Log Notes

Audit

Interview Guides

- Investigative Staff – Q: 3

Documentation Review

- Training records/logs of investigative staff.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does this specialized training include: Techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

Does this specialized training include: Proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

Does this specialized training include: Sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

115.134 (c): The agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.134 (c)-1	The agency maintains documentation showing that investigators have completed the required training. • Upload/select documentation that investigators have completed training	Yes/No ☐ Yes ☐ No Enter Comment	
115.134 (c)-2	The number of investigators currently employed who have completed the required training:	(Number only) Enter Comment	

Audit**Auditor Personal Notes**

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

115.134 (d): Any State entity or Department of Justice component that investigates sexual abuse in lockups shall provide such training to their agents and investigators who conduct such investigations.

Pre-Audit

Issue Log Notes

Audit

Other Audit Instructions

- Note to auditors: Agents and investigators must be trained in conducting investigations in confinement settings as per 115.134(b) above.
- **Auditor is not required to audit this provision.**

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Supporting Documentation

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Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

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Screening for Risk of Sexual Victimization and Abusiveness

115.141: Screening for risk of victimization and abusiveness

115.141 (a): In lockups that are not utilized to house detainees overnight, before placing any detainees together in a holding cell, staff shall consider whether, based on the information before them, a detainee may be at a high risk of being sexually abused and, when appropriate, shall take necessary steps to mitigate any such danger to the detainee.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.141 (a)-1	The facility is used to house detainees overnight. If YES, skip to 115.141(b). If NO, complete 115.141(a)-2 and 3 AND skip to 115.151.	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.141 (a)-2	Before placing any detainees together in a holding cell, staff considers whether a detainee may be at a high risk of being sexually abused. • Upload/select screening policy	Yes/No ☐ Yes ☐ No Enter Comment	
115.141 (a)-3	When appropriate, staff takes necessary steps to mitigate any such danger to the detainee.	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

Interview Guides

- Staff Who Perform Screening for Risk of Victimization – Q: 1
- Random Sample of Staff – Q: 15, 16

PREA Audit Site Review

Note: If the facility is a lockup where persons confined in the facility are never placed in a holding cell with other persons and are never placed in an area with other persons confined in the facility absent continuous staff supervision, then no screening for risk of sexual abusiveness or victimization is required (see this FAQ for more information: <https://www.prearesourcecenter.org/frequently-asked-questions/what-screening-required-detainees-lockups-are-never-placed-holding-cell>).

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your

findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

If the lockup is not utilized to house detainees overnight, before placing any detainees together in a holding cell do staff consider whether, based on the information before them, a detainee may be at a high risk of being sexually abused? (N/A if the lockup is utilized to house detainees overnight.)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

When appropriate, do staff take necessary steps to mitigate such danger to the detainee? (N/A if the lockup is utilized to house detainees overnight.)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

115.141 (b): In lockups that are utilized to house detainees overnight, all detainees shall be screened to assess their risk of being sexually abused by other detainees or sexually abusive toward other detainees.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.141 (b)-1	The agency has a policy that requires that detainees be screened to assess their risk of sexual victimization or risk of sexually abusing other detainees. • Upload/select: ◦ screening policy ◦ screening instrument	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.141 (b)-2	In the past 12 months, the number of detainees who were screened for risk of sexual victimization or risk of sexually abusing other detainees:	(Number only) Enter Comment	

Audit

Interview Guides

- Staff Who Perform Screening for Risk of Victimization and Abusiveness – Q: 1, 2
- Random Sample of Staff – Q: 17
- Detainee Interview Questionnaire – Q: 4

PREA Audit Site Review

INTAKE: PREA RISK SCREENING

During the site review, the auditor must ask to observe a person confined in the facility being screened for risk of being sexually abused or sexually abusive, if possible; if no persons are being screened during the onsite portion of the audit, the auditor may ask staff to walk through the process and do a mock intake for demonstration purposes.

During the risk screening or mock demo, the auditor must:

- Confirm who is responsible for risk screening.
 - This information will be important for interviewing the right staff who are responsible for conducting risk screening.

- Observe the method for assessing persons confined in the facility's risk of being sexually abused or being sexually abusive, including whether:
 - Screening staff uses information, outlined in the Standards, to complete the risk screening assessment.
 - Screening staff ask persons confined in the facility about their perception of vulnerability in a manner that fosters comfort and elicits responses.

Additionally, the auditor should:

- Have informal conversations with staff while conducting risk screening (or mock demo) regarding the risk screening process (e.g., how information is collected, how privacy is maintained.)
- Have informal conversations with persons confined in the facility regarding the risk screening process (e.g., their comfort answering questions in the space where the screening is being provided, ability to answer the questions asked).

Documentation Review

- Records for detainees admitted to the facility for evidence of appropriate screening.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

If the lockup is utilized to house detainees overnight, are all detainees screened to assess their risk of being sexually abused by other detainees or sexually abusive toward other detainees? (N/A if lockup is NOT used to house detainees overnight.)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

115.141 (c): In lockups described in paragraph (b) of this section, staff shall ask the detainee about his or her own perception of vulnerability.

Audit

Interview Guides

- Staff Who Perform Screening for Risk of Victimization and Abusiveness – Q: 2
- Random Sample of Staff – Q: 18
- Detainee Interview Questionnaire – Q: 4

PREA Audit Site Review

- Review site review instructions outlined in provision (b).

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

In lockups described in paragraph (b) of this section, do staff always ask the detainee about his or her own perception of vulnerability? (N/A if lockup is NOT used to house detainees overnight.)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

115.141 (d): The screening process in the lockups described in paragraph (b) of this section shall also consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: (1) Whether the detainee has a mental, physical, or developmental disability; (2) The age of the detainee; (3) The physical build and appearance of the detainee; (4) Whether the detainee has previously been incarcerated; and (5) The nature of

the detainee's alleged offense and criminal history.

Pre-Audit

Issue Log Notes

Audit

Interview Guides

- Staff Who Perform Screening for Risk of Victimization and Abusiveness – Q: 2
- Random Sample of Staff - Q: 17

PREA Audit Site Review

- Review site review instructions outlined in provision (b).

Other Audit Instructions

- 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 (1-5) at a minimum, to assess risk.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen

detainees for risk of sexual victimization: Whether the detainee has a mental, physical, or developmental disability. (N/A if lockup is NOT used to house detainees overnight.)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The age of the detainee? (N/A if lockup is NOT used to house detainees overnight.)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The physical build and appearance of the detainee? (N/A if lockup is NOT used to house detainees overnight.)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: Whether the detainee has previously been incarcerated? (N/A if lockup is NOT used to house detainees overnight.)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The nature of the detainee's alleged offense and criminal history? (N/A if lockup is NOT used to house detainees overnight.)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Reporting

115.151: Detainee reporting

115.151 (a): The agency shall provide multiple ways for detainees to privately report sexual abuse and sexual harassment, retaliation by other detainees or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.151 (a)-1	The agency has established procedures allowing for multiple internal ways for detainees to report privately to agency officials about: (a) sexual abuse or sexual harassment; (b) retaliation by other detainees or staff for reporting sexual abuse and sexual harassment; and (c) staff neglect or violation of responsibilities that may have contributed to such incidents. • Upload/select: ◦ detainee reporting policy ◦ other relevant documentation on detainee reporting (e.g. detainee handbooks)	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
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Audit

Interview Guides

- Random Sample of Staff – Q: 6
- Detainee Interview Questionnaire – Q: 5, 7

PREA Audit Site Review

SIGNAGE

During the site review, the auditor must actively observe any posted or printed signage throughout the facility (e.g., posters, pamphlets, brochures, electronic signage). Signage includes audit notices, how to report sexual abuse and sexual harassment, and other relevant information (see table below). The auditor must review the information provided on signage to determine whether it is readable and accessible, consistent, and placed throughout the facility to convey vital sexual safety information specific to the facility. Note: The expectations of what an auditor must observe regarding signage are outlined below; however, a thorough review of signage documentation for readability and accessibility, consistency, placement, and accuracy must also be conducted as part of the auditor's analysis of the evidence to make a compliance determination.

During the site review, the auditor must:

- Observe whether signage throughout the facility can be easily read/accessed by persons in the facility, specifically:
 - Signage language is clear and easy to understand.
 - Signage specific to services, such as external reporting, should include language that clearly details what services are available and for what purposes.
 - Signage is provided in English and translated for the other languages most commonly spoken in the facility.
 - The signage text size, formatting, and physical placement accommodates most readers, including those of average height, low vision/visually impaired, or those physically disabled/in a wheelchair, etc.
 - The information provided by the signage is not obscured, unreadable by graffiti, or missing due to damage (e.g., part of the signage is ripped off that included the sexual abuse reporting hotline, a person drew a picture over the words which makes them illegible, etc.).
- Observe whether the information on the signage is accurate and consistent throughout the facility (e.g., audit notices are relevant to the current audit; contact information is consistent for service provider/organization name(s), addresses, phone number(s)).
- Observe where signage is placed in the facility to assess whether the signage is accessible to staff and/or those confined in the facility and other persons who may need the information or services provided. The auditor must observe the placement of the following types of signage:
 - **How to report sexual abuse and/or sexual harassment (external and internal reporting methods)**
 - Posted in any areas frequented by persons confined in the facility or “inmate workers” who may be working in the facility, including areas with cells or other secure enclosures and common spaces.
 - Recommended: It is often helpful for such signage to be located near the phone(s), so persons confined in the facility can easily access the phone number if needed.

Additionally, the auditor should:

- Have informal conversations with staff and persons confined in the facility regarding signage throughout the facility (e.g., readability and accessibility of information, including for persons confined in the facility who have disabilities; consistency and accuracy of information; signage posted just for the audit or always posted (with the exception of the PREA Audit Notice).

TESTING INTERNAL REPORTING METHODS

Note: Facilities are required to have multiple internal methods for persons confined in the facility to privately report sexual abuse or sexual harassment, retaliation by other persons confined in the facility or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

Accordingly, during the site review, auditors must test the methods provided for the purpose of assessing whether people confined in the facility have regular and timely access to reporting methods and how the facility receives these reports.

Reporting in Writing

If one of the ways in which persons confined in the facility can report sexual abuse or sexual harassment includes a mechanism or mechanisms for submitting a written report (which might be a note or a form) into a drop box or other receptacle, the auditor must assess access to writing materials (e.g., forms, paper, envelopes, writing implements) and the drop box in the same way as that available to persons confined in the facility. Auditors, however, do not need to complete and submit a written report via hard copy/drop box to test this reporting mechanism.

During the site review the auditor must:

- Test access, or ask a person confined in the facility to test access, to the mechanism(s)/form(s).
 - Determine whether persons confined in the facility can access forms without having to make a request from staff.
- Assess the accessibility of writing instruments for persons confined in the facility (e.g., paper, writing instruments, sexual abuse and sexual harassment reporting form(s), if applicable, envelopes, stamps).
- Observe how mail moves from persons confined in the facility to the mailroom or mailbox.
 - If mail moves via mail drop boxes/receptacles/lock boxes:
 - Assess whether placement of mail drop boxes/receptacles are located in areas accessible to all persons confined in the facility.
 - Ideally, mail drop boxes/receptacles should also be in locations where a person confined in the facility could drop written communication anonymously (e.g., an area where a person confined in the facility could drop a form, letter, or note in passing.)
 - **Note:** Drop boxes or other receptacles used to collect reports of sexual abuse and sexual harassment should not be used exclusively for reporting sexual abuse and sexual harassment. Other staff and persons confined in the facility should not know, from the nature of the receptacle being used, that a person is reporting a sexual abuse or sexual harassment.
 - If mail moves via staff (i.e., other than mailroom staff), see “have informal conversations” below.
- Assess the security of written communication (if mail is available to persons confined in the facility as a mechanism for reporting sexual abuse and sexual harassment).
 - Mail drop boxes/receptacles/lock boxes are kept locked/secured.
 - Mail in the mail drop boxes/receptacles/lock boxes is only accessible by a designated agency official or selected official(s).

Additionally, the auditor should:

- Have informal conversations with staff responsible for sending mail for the purposes of internal reporting of sexual abuse and sexual harassment (e.g., mailroom staff and/or other staff) and persons confined in the facility regarding the process of sending mail to the internal reporting entity, and the perception of privacy/confidentiality/anonymity in sending mail, and accessibility of writing instruments and required forms).

Reporting Electronically

If the facility has a system by which persons confined in the facility can report sexual abuse and/or sexual harassment electronically via kiosk, tablet, or computer (whether by internal email, grievance, or some other method), during the site review the auditor must:

- Complete and submit a test report via the kiosk/tablet/computer during the site review, and in the same manner as that available to persons confined in the facility.
- Assess whether the facility receives the test report.
 - Ask to see evidence of having received the test report that the auditor submitted.
- Test accessibility of kiosks/tablets/computers, including whether:
 - Kiosks/tablets/computers are easily and readily available to all persons confined in the facility and are placed in areas frequented by persons confined in the facility.
 - Kiosks/tablets/computers are accessible to all persons confined in the facility and have reasonable accommodations, where necessary (i.e., for persons confined in the facility who are Deaf or hard-of-hearing, Blind or have low vision, cognitively or functionally disabled, limited English proficient, non-English speaking, and/or have limited reading skills).
 - Kiosks/tablets/computers are placed in areas that afford persons confined in the facility reasonable privacy while submitting a report.
 - Kiosks/tablets/computers are operable (i.e., in working order).
- Assess whether a person confined in the facility can access the kiosks/tablets/computers to complete and submit a sexual abuse or harassment report without providing their name and/or ID. This means that there must be a way for persons confined in the facility to access the reporting mechanism without logging into the kiosk/tablet/computer with a traceable login.

Additionally, the auditor should:

- Have informal conversations with staff and persons confined in the facility regarding internal reporting electronically (e.g., access to kiosks/tablets/computers, including access for persons confined in restricted housing, reasonable accommodations for persons confined in the facility who need it, operability of kiosks/tablets/computers, anonymity in reporting).

Reporting Verbally

For verbal reports of sexual abuse and/or sexual harassment made by persons confined in the facility, during the site review the auditor should:

- Have informal conversations with persons confined in the facility, to determine whether they are aware that they are allowed to report verbally and that they can report not only to an officer working in the cell area, but to other staff in the facility.
- Have informal conversations with staff, to determine whether staff are aware of the process for receiving and documenting verbal reports.
- See section “Record Storage” for instructions on what the auditor must observe during the site review regarding how documented reports are stored and who has access to those documented reports.

RECORD STORAGE

During the site review, the auditor must:

- Observe the physical storage area of any information/documentation collected and maintained in hard copy pursuant to the PREA Standards (e.g., risk screening information, sexual abuse allegations) to determine if the area is secured (e.g., key card, lock and key).
- Observe electronic safeguards of any information/documentation collected and maintained electronically pursuant to the PREA Standards (e.g., risk screening information) to determine how access to the information is secured (e.g., password protected, accessible only in certain areas, role-based security).
 - **Note**, the auditor may have to speak with the agency/facility information technology staff person to understand the secure storage of electronic information and who has access to that information.

Additionally, the auditor should:

- Have informal conversations with staff regarding access to secure information, including medical and mental health files, if they exist, sexual abuse and sexual harassment reports, etc. (e.g., where, how, and security of information is stored electronically and in hard copy, specifically who has access and how access is restricted).

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency provide multiple ways for detainees to privately report: Sexual abuse and

sexual harassment?*

Provision Findings

- ☐ Yes
- ☐ No

Does the agency provide multiple ways for detainees to privately report: Retaliation by other detainees or staff for reporting sexual abuse and sexual harassment?*

Provision Findings

- ☐ Yes
- ☐ No

Does the agency provide multiple ways for detainees to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?*

Provision Findings

- ☐ Yes
- ☐ No

115.151 (b): The agency shall also inform detainees of at least one way 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 detainee reports of sexual abuse and sexual harassment to agency officials, allowing the detainee to remain anonymous upon request.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.151 (b)-1	The agency informs detainees of at least one way to report abuse or harassment to a public or private entity or office that is not part of the agency. • Upload/select documentation of agreement with outside public or private entity responsible for taking reports • If applicable, also select detainee reporting policy and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
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Audit

Interview Guides

- PREA Coordinator – Q: 7, 8
- Detainee Interview Questionnaire – Q: 5, 6

PREA Audit Site Review

- Review site review instructions outlined in provision (a).

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency also provide at least one way for detainees to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?*

Provision Findings

- ☐ Yes
☐ No

Is that entity or office able to receive and immediately forward detainee reports of sexual abuse and sexual harassment to agency officials?*

Provision Findings

- ☐ Yes
☐ No

Does that private entity or office allow the detainee to remain anonymous upon request?*

Provision Findings

- ☐ Yes
☐ No

115.151 (c): Staff shall accept reports made verbally, in writing, anonymously, and from third parties and promptly document any verbal reports.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.151 (c)-1	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. If applicable, select detainee reporting policy and other relevant documentation on detainee reporting (e.g. detainee handbooks) and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.151 (c)-2	Staff are required to document verbal reports. If "Yes", please provide the timeframe within which staff are required to document the reports in the comments section. If "No", please explain in the comments section. Upload/select documentation made of verbal reports	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

Interview Guides

- Random Sample of Staff – Q: 7
- Detainee Interview Questionnaire – Q: 7

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Do staff members accept reports of sexual abuse and sexual harassment made verbally, in

writing, anonymously, and from third parties?*

Provision Findings

- ☐ Yes
☐ No

Do staff members promptly document any verbal reports of sexual abuse and sexual harassment ?*

Provision Findings

- ☐ Yes
☐ No

115.151 (d): The agency shall provide a method for staff to privately report sexual abuse and sexual harassment of detainees.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.151 (d)-1	The agency has established procedures for staff to privately report sexual abuse and sexual harassment of detainees. If "Yes", please describe the procedures in the comments section. If "No", please explain in the comments. • Upload/select staff reporting policy or procedures	Yes/No ☐ Yes ☐ No Enter Comment	
115.151 (d)-2	Staff are informed of these procedures in the following ways: • Upload/select any other relevant documentation, such as staff handbooks	(Number only) Enter Comment	

Interview Guides

- Random Sample of Staff- Q: 5

PREA Audit Site Review

TESTING STAFF REPORTING

During the site review, the auditor must:

- Test by asking a staff person to walk through the staff reporting method(s) provided by the facility.
- Observe whether the staff reporting method is available, on demand, to all staff in the facility.
- Assess whether staff are required to report to their direct colleagues or their immediate supervisor.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of detainees?*

Provision Findings

- ☐ Yes
- ☐ No

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Reporting

115.154: Third-party reporting

115.154 (a): The agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment in its lockups and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of a detainee.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.154 (a)-1	The agency or facility provides a method to receive third-party reports of detainee sexual abuse or sexual harassment. If "Yes", please describe the method in the comments section.	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.154 (a)-2	The agency or facility publicly distributes information on how to report detainee sexual abuse or sexual harassment on behalf of detainees. If "Yes", please describe in the comments section. • Upload/select publicly distributed information	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

PREA Audit Site Review

SIGNAGE

During the site review, the auditor must actively observe any posted or printed signage throughout the facility (e.g., posters, pamphlets, brochures, electronic signage). Signage includes audit notices, how to report sexual abuse and sexual harassment, and other relevant information (see table below). The auditor must review the information provided on signage to determine whether it is readable and accessible, consistent, and placed throughout the facility to convey vital sexual safety information specific to the facility. Note: The expectations of what an auditor must observe regarding signage are outlined below; however, a thorough review of signage documentation for readability and accessibility, consistency, placement, and accuracy must also be conducted as part of the auditor's analysis of the evidence to make a compliance determination.

During the site review, the auditor must:

- Observe whether signage throughout the facility can be easily read/accessed by persons in the facility, specifically:
 - Signage language is clear and easy to understand.
 - Signage specific to services, such as external reporting, should include language that clearly details what services are available and

for what purposes.

- Signage is provided in English and translated for the other languages most commonly spoken in the facility.
- The signage text size, formatting, and physical placement accommodates most readers, including those of average height, low vision/visually impaired, or those physically disabled/in a wheelchair, etc.
- The information provided by the signage is not obscured, unreadable by graffiti, or missing due to damage (e.g., part of the signage is ripped off that included the sexual abuse reporting hotline, a person drew a picture over the words which makes them illegible, etc.).
- Observe whether the information on the signage is accurate and consistent throughout the facility (e.g., audit notices are relevant to the current audit; contact information is consistent for service provider/organization name(s), addresses, phone number(s)).
- Observe where signage is placed in the facility to assess whether the signage is accessible to staff and/or those confined in the facility and other persons who may need the information or services provided. The auditor must observe the placement of the following types of signage:
 - **Third-party reporting**
 - Posted in public areas of the facility that can be accessed by advocates, and attorneys (e.g., attorney visiting areas, public-facing websites) as well as any areas frequented by persons confined in the facility.

Additionally, the auditor should:

- Have informal conversations with staff and persons confined in the facility regarding signage throughout the facility (e.g., readability and accessibility of information, including for persons confined in the facility who have disabilities; consistency and accuracy of information; signage posted just for the audit or always posted (with the exception of the PREA Audit Notice).

TESTING THIRD-PARTY REPORTING

Either prior to the onsite, during the site review, or post-onsite, the auditor must:

- Complete and submit a test third-party report using the same method(s) provided to the public (e.g., via the agency/facility website).
 - Confirm the method(s) to submit third-party reports is easily accessible and understandable and can be found in reasonably conspicuous and appropriate locations (e.g., facility/agency website).
 - Confirm that the third-party reporting method is not the general contact information for the facility, but is specific to reporting sexual abuse and sexual harassment in the facility.
- Verify the facility has a process for receiving third-party reports.
 - Ask to see evidence of having received the test report that the auditor submitted.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment in its lockups?*

Provision Findings

- ☐ Yes
☐ No

Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a detainee?*

Provision Findings

- ☐ Yes
☐ No

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Official Response Following a Detainee Report

115.161: Staff and agency reporting duties			
115.161 (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 an agency lockup; retaliation against detainees or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.			
Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.161 (a)-1	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 that occurred in an agency lockup. • Upload/select policy on staff and agency reporting duties	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.161 (a)-2	The agency requires all staff to report immediately and according to agency policy any retaliation against detainees or staff who reported such an incident. • If applicable, select policy on staff and agency reporting duties and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	
115.161 (a)-3	The agency requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. • If applicable, select policy on staff and agency reporting duties and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

Interview Guides

- Random Sample of Staff - Q: 4

PREA Audit Site Review

TESTING STAFF REPORTING

During the site review, the auditor must:

- Test by asking a staff person to walk through the staff reporting method(s) provided by the facility.
- Observe whether the staff reporting method is available, on demand, to all staff in the facility.
- Assess whether staff are required to report to their direct colleagues or their immediate supervisor.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency 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 an agency lockup?*

Provision Findings

- ☐ Yes
☐ No

Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against detainees or staff who reported such an incident?*

Provision Findings

- ☐ Yes
☐ No

Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?*

Provision Findings

- ☐ Yes
☐ No

115.161 (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 and investigation decisions.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.161 (b)-1	Apart from reporting to designated supervisors or officials and designated state or local services 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. If applicable, select policy on staff and agency reporting duties and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Interview Guides

- Random Sample of Staff - Q: 10

PREA Audit Site Review

RECORD STORGE

During the site review, the auditor must:

- Observe the physical storage area of any information/documentation collected and maintained in hard copy pursuant to the PREA Standards (e.g., risk screening information, sexual abuse allegations) to determine if the area is secured (e.g., key card, lock and key).
- Observe electronic safeguards of any information/documentation collected and maintained electronically pursuant to the PREA Standards (e.g., risk screening information) to determine how access to the information is secured (e.g., password protected, accessible only in certain areas, role-based security).
 - **Note**, the auditor may have to speak with the agency/facility information technology staff person to understand the secure storage of electronic information and who has access to that information.

Additionally, the auditor should:

- Have informal conversations with staff regarding access to secure information, including medical and mental health files, if they exist, sexual abuse and sexual harassment reports, etc. (e.g., where, how, and security of information is stored electronically and in hard copy, specifically who has access and how access is restricted).

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Apart from reporting to designated supervisors or officials, do staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, and investigation decisions?*

Provision Findings

- ☐ Yes
☐ No

115.161 (c): 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.

Audit

Interview Guides

- Sheriff, Chief, or Director – Q: 11
- PREA Coordinator – Q: 17

Documentation Review

- Documentation of any such reports.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?*

Provision Findings

- ☐ Yes
- ☐ No

115.161 (d): The agency shall report all allegations of sexual abuse, including third-party and anonymous reports, to the agency's designated investigators.

Audit

Interview Guides

- Sheriff, Chief, or Director – Q: 9

Documentation Review

- Sample of reports to investigators.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency report all allegations of sexual abuse, including third-party and anonymous reports, to the agency's designated investigators?*

Provision Findings

- ☐ Yes
☐ No

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Official Response Following a Detainee Report

115.162: Agency protection duties			
115.162 (a): When an agency learns that a detainee is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the detainee.			
Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.162 (a)-1	When the agency or facility learns that a detainee is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the detainee (i.e., it takes some action to assess and implement appropriate protective measures without unreasonable delay). • Upload/select policy on agency/facility protection duties	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.162 (a)-2	In the past 12 months, the number of times the agency or facility determined that a detainee was subject to substantial risk of imminent sexual abuse:	 (Number only) Enter Comment	
115.162 (a)-3	If the agency or facility made such determinations in the past 12 months, the average amount of time (in hours) that passed before taking action: • Upload/select any relevant documentation	 Enter Comment	
115.162 (a)-4	The longest amount of time elapsed (in hours or days) before taking action. If not immediate (i.e., without unreasonable delay), please explain in the comments section. • Upload/select any relevant documentation	 Enter Comment	

Audit

Interview Guides

- Agency Head – Q: 12
- Sheriff, Chief, or Director – Q: 7

- Random Sample of Staff – Q: 12

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

When the agency learns that a detainee is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the detainee?*

Provision Findings

- ☐ Yes
☐ No

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

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and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Official Response Following a Detainee Report

115.163: Reporting to other confinement facilities

115.163 (a): Upon receiving an allegation that a detainee 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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.163 (a)-1	The agency has a policy requiring that, upon receiving an allegation that a detainee 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. • Upload/select policy on agency reporting to other confinement facilities	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.163 (a)-2	In the past 12 months, the number of allegations the facility received that a detainee was abused while confined at another facility:	(Number only) Enter Comment	
115.163 (a)-3	Please describe your facility's response to these allegations:	Enter Comment	

Audit

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Upon receiving an allegation that a detainee was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?*

Provision Findings

- ☐ Yes
- ☐ No

115.163 (b): Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.163 (b)-1	Agency policy requires that the facility head provide such notification as soon as possible, but no later than 72 hours after receiving the allegation. If applicable, select policy on agency reporting to other confinement facilities and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
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Audit

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?*

Provision Findings

- ☐ Yes
☐ No

115.163 (c): The agency shall document that it has provided such notification.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.163 (c)-1	The agency or facility documents that it has provided such notification within 72 hours of receiving the allegation. • Upload/select documentation of notifications	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Documentation Review

- Documentation of notifications to verify that they occurred within 72 hours of receiving allegation.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency document that it has provided such notification?*

Provision Findings

- ☐ Yes
☐ No

115.163 (d): The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.163 (d)-1	The agency or facility policy requires that allegations received from other facilities/agencies are investigated in accordance with the PREA standards. • Upload/select policy	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.163 (d)-2	In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities:	(Number only) Enter Comment	

Audit

Interview Guides

- Agency Head – Q: 5
- Sheriff, Chief, or Director – Q: 12, 13

Documentation Review

- Documentation of allegations from other facilities and documentation of responses (i.e. evidence that allegation has been investigated in accordance with the standard).

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?*

Provision Findings

- ☐ Yes
- ☐ No

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Official Response Following a Detainee Report

115.164: Staff first responder duties			
115.164 (a): Upon learning of an allegation that a detainee was sexually abused, the first law enforcement 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.			
Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.164 (a)-1	The agency has a first responder policy for allegations of sexual abuse. If "No", skip to 115.164(a)-6. • Upload/select policy on first responder duties	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.164 (a)-2	The policy requires that, upon learning of an allegation that a detainee was sexually abused, the first law enforcement staff member to respond to the report shall be required to separate the alleged victim and abuser. • If applicable, select policy on first responder duties and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	
115.164 (a)-3	The policy requires that, upon learning of an allegation that a detainee was sexually abused, the first law enforcement staff member to respond to the report shall be required to preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. • If applicable, select policy on first responder duties and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	
115.164 (a)-4	The policy requires that, upon learning of an allegation that a detainee was sexually abused, that if the abuse occurred within a time period that still allows for the collection of physical evidence, the first law enforcement staff member to respond to the report shall be required to 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.	Yes/No ☐ Yes ☐ No Enter Comment	

	If applicable, select policy on first responder duties and indicate relevant page/section	
115.164 (a)-5	The policy requires that, upon learning of an allegation that a detainee was sexually abused, that if the abuse occurred within a time period that still allows for the collection of physical evidence, the first law enforcement staff member to respond to the report shall be required to 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. If applicable, select policy on first responder duties and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment
115.164 (a)-6	In the past 12 months, the number of allegations that a detainee was sexually abused:	(Number only) Enter Comment
115.164 (a)-7	Of these allegations, the number of times the first law enforcement staff member to respond to the report separated the alleged victim and abuser:	(Number only) Enter Comment
115.164 (a)-8	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:	(Number only) Enter Comment
115.164 (a)-9	Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first law enforcement staff member to respond to the report preserved and protected any crime scene until appropriate	(Number only) Enter Comment

	steps could be taken to collect any evidence:		
115.164 (a)-10	Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first law enforcement staff member to respond to the report 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:	 (Number only) Enter Comment	
115.164 (a)-11	Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first law enforcement staff member to respond to the report ensured that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating:	 (Number only) Enter Comment	

Audit

Interview Guides

- Law Enforcement Staff and Non-Law Enforcement Staff First Responders – Q: 1

Documentation Review

- Documentation of responses to allegations.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Separate the alleged victim and abuser?*

Provision Findings

- ☐ Yes
☐ No

Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?*

Provision Findings

- ☐ Yes
☐ No

Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: 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, if the abuse occurred within a time period that still allows for the collection of physical evidence?*

Provision Findings

- ☐ Yes
☐ No

Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: 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, if the abuse occurred within a time period that still allows for the collection of physical evidence?*

Provision Findings

- ☐ Yes
☐ No

115.164 (b): If the first staff responder is not a law enforcement staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify law enforcement staff.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.164 (b)-1	Agency policy requires that if the first staff responder is not a law enforcement staff member, that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence. If applicable, select policy on first responder duties and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.164 (b)-2	Agency policy requires that if the first staff responder is not a law enforcement staff member, that responder shall be required to notify law enforcement staff. If applicable, select policy on first responder duties and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	
115.164 (b)-3	Of the allegations that a detainee was sexually abused made in the past 12 months, the number of times a non-law enforcement staff member was the first responder:	(Number only) Enter Comment	
115.164 (b)-4	Of those allegations responded to first by a non-law enforcement staff member, the number of times that the staff member requested that the alleged victim not take any actions that could destroy physical evidence:	(Number only) Enter Comment	
115.164 (b)-5	Of those allegations responded to first by a non-law enforcement staff member, the number of times that the	(Number only)	

staff member notified law
enforcement staff:

Enter Comment

Audit

Interview Guides

- Law Enforcement Staff and Non-Law Enforcement Staff First Responders – Q: 1
- Random Sample of Staff – Q: 10

Documentation Review

- Documentation of responses to allegations.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

If the first staff responder is not a law enforcement staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify law enforcement staff?*

Provision Findings

- ☐ Yes
☐ No

Supporting Documentation

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Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

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Official Response Following a Detainee Report

115.165: Coordinated response

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

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.165 (a)-1	The agency 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 agency leadership. • Upload/select agency's institutional plan	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Interview Guides

- Sheriff, Chief, or Director – Q: 14

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Has the agency developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to a lockup incident of sexual abuse?*

Provision Findings

- ☐ Yes
- ☐ No

If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law and unless the victim requests otherwise, inform the receiving facility of the incident and the victim’s potential need for medical or social services?*

Provision Findings

- ☐ Yes
- ☐ No

115.165 (b): If a victim is transferred from the lockup to a jail, prison, or medical facility, the agency shall, as permitted by law, inform the receiving facility of the incident and the victim’s potential need for medical or social services, unless the victim requests otherwise.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.165 (b)-1	The agency is permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse, of the incident and the victim's potential need for medical or social services.	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.165 (b)-2	If a victim is transferred from the lockup to a jail, prison, or medical facility, the agency informs the receiving facility of the incident and the victim's potential need for medical or social services, unless the victim requests otherwise.	Yes/No ☐ Yes ☐ No Enter Comment	
115.165 (b)-3	In the past 12 months, the number of victims transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse:	(Number only) Enter Comment	
115.165 (b)-4	In the past 12 months, the number of those victims transferred as a result of an allegation of sexual abuse where the agency informed the receiving facility of the incident and the victim's potential need for medical or social services:	(Number only) Enter Comment	
115.165 (b)-5	In the past 12 months, the number of those victims transferred as a result of an allegation of sexual abuse who requested the agency not inform the receiving facility:	(Number only) Enter Comment	

Audit

Interview Guides

- Sheriff, Chief, or Director – Q: 15

Documentation Review

- If the agency is not permitted by law to inform a receiving facility per the standard, review a copy of the law.
- Log or other documentation of victim transfers from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse (verify that receiving facility was informed per the standard or if not, that victim requested otherwise).

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the receiving facility of the incident unless the victim requests otherwise? (N/A if the agency is not permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse of the incident and the victim's potential need for medical or social services.)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the receiving facility of the victim's potential need for medical or social services unless the victim requests otherwise? (N/A if the agency is not permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse of the incident and the victim's potential need for medical or social services.)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

Supporting Documentation

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Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

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Official Response Following a Detainee Report

115.166: Preservation of ability to protect detainees from contact with abusers

115.166 (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 detainees pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.166 (a)-1	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. • Upload/select all agreements entered into since August 20, 2012 or since the last PREA audit	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
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Audit

Interview Guides

- Agency Head - Q: 6

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged

staff sexual abusers from contact with detainees pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?*

Provision Findings

- ☐ Yes
☐ No

115.166 (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 §§ 115.172 and 115.176; 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.

Pre-Audit

Issue Log
Notes

Audit

Other Audit Instructions

- Auditor is not required to audit this provision.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Official Response Following a Detainee Report

115.167: Agency protection against retaliation

115.167 (a): The agency shall establish a policy to protect all detainees and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other detainees or staff, and shall designate which staff members or departments are charged with monitoring retaliation.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.167 (a)-1	The agency has a policy to protect all detainees and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other detainees or staff. • Upload/select policy protecting detainees and staff against retaliation	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.167 (a)-2	The agency designates staff member(s) or charges department(s) with monitoring for possible retaliation. If YES, provide staff name(s), title(s), and department(s) in the comments section.	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Has the agency established a policy to protect all detainees and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other detainees or staff?*

Provision Findings

- ☐ Yes
☐ No

Has the agency designated which staff members or departments are charged with monitoring retaliation?*

Provision Findings

- ☐ Yes
☐ No

115.167 (b): The agency shall employ multiple protection measures, such as housing changes or transfers for detainee victims or abusers, removal of alleged staff or detainee abusers from contact with victims, and emotional support services for staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

Pre-Audit

Issue Log Notes

Audit

Interview Guides

- Agency Head – Q: 7
- Sheriff, Chief, or Director – Q: 16
- Designated Staff Member Charged with Monitoring Retaliation (or Sheriff/Chief/Director if none available) – Q: 1, 2, 3

Documentation Review

- Documentation of any protective measures taken.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency employ multiple protection measures, such as housing changes or transfers

for detainee victims or abusers, removal of alleged staff or detainee abusers from contact with victims, and emotional support services for detainees or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?*

Provision Findings

- ☐ Yes
- ☐ No

115.167 (c): The agency shall monitor the conduct and treatment of detainees or staff who reported sexual abuse and of detainees who were reported to have suffered sexual abuse, and shall act promptly to remedy any such retaliation.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.167 (c)-1	The agency/facility monitors the conduct and treatment of detainees or staff who reported sexual abuse and of detainees who were reported to have suffered sexual abuse. If applicable, select policy on protecting detainees against retaliation and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.167 (c)-2	The agency/facility acts promptly to remedy any such retaliation. If applicable, select policy on protecting detainees against retaliation and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	
115.167 (c)-3	The number of times an incident of retaliation occurred in the past 12 months:	(Number only) Enter Comment	

Audit

Interview Guides

- Sheriff, Chief, or Director – Q: 17
- Designated Staff Member Charged with Monitoring Retaliation (or Sheriff/Chief/Director if none available) – Q: 4, 5

Documentation Review

- Documentation of monitoring efforts.
- Documentation of reports of retaliation and agency response.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Monitor the conduct and treatment of detainees or staff who have reported sexual abuse?*

Provision Findings

- ☐ Yes
☐ No

Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Monitor the conduct and treatment of detainees who were reported to have suffered sexual abuse?*

Provision Findings

- ☐ Yes
☐ No

Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Act promptly to remedy any such retaliation?*

Provision Findings

- ☐ Yes
☐ No

115.167 (d): 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.

Pre-Audit

Issue Log Notes

Audit

Interview Guides

- Agency Head – Q: 8
- Sheriff, Chief, or Director– Q: 16, 17

Documentation Review

- Documentation of any such protective measures taken.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?*

Provision Findings

- ☐ Yes
- ☐ No

115.167 (e): An agency's obligation to monitor shall terminate if the agency determines that the allegation is unfounded.

Pre-Audit

Issue Log Notes

Audit

Other Audit Instructions

- **Auditor is not required to audit this provision.**

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken

by the facility.

Investigations

115.171: Criminal and administrative agency investigations

115.171 (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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.171 (a)-1	The agency/facility has a policy related to criminal and administrative agency investigations. Upload/select policy related to criminal and administrative agency investigations	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Interview Guides

- Investigative Staff – Q: 5, 8

Documentation Review

- Sample of investigative records/reports for allegations of sexual abuse or sexual harassment.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.121(a).)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.121(a).)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

115.171 (b): Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to § 115.134.

Pre-Audit		Issue Log Notes
Audit		
Interview Guides		
Investigative Staff – Q: 1, 2		
Auditor Personal Notes		
Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.		
Provision Findings		
Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.134?*		
Provision Findings ☐ Yes ☐ No		
115.171 (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.		
Pre-Audit		Issue Log Notes
Audit		
Interview Guides		

- Investigative Staff – Q: 6, 7, 9

Documentation Review

- Investigative reports, record retention schedule, and copies of case records detailing allegations of abuse.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?*

Provision Findings

- ☐ Yes
☐ No

Do investigators interview alleged victims, suspected perpetrators, and witnesses?*

Provision Findings

- ☐ Yes
☐ No

Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?*

Provision Findings

- ☐ Yes
☐ No

115.171 (d): When the quality of evidence appears to 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.

Audit

Interview Guides

- Investigative Staff – Q: 10

Documentation Review

- Sample of criminal and administrative investigation reports.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?*

Provision Findings

- ☐ Yes
☐ No

115.171 (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 detainee or staff. No agency shall require a detainee 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.

Audit

Interview Guides

- Investigative Staff – Q: 11, 12

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as detainee or staff?*

Provision Findings

- ☐ Yes
☐ No

Does the agency investigate allegations of sexual abuse without requiring a detainee who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?*

Provision Findings

- ☐ Yes
☐ No

115.171 (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.

Audit

Interview Guides

- Investigative Staff – Q: 16, 17

PREA Audit Site Review

RECORD STORAGE

During the site review, the auditor must:

- Observe the physical storage area of any information/documentation collected and maintained in hard copy pursuant to the PREA Standards (e.g., risk screening information, sexual abuse allegations) to determine if the area is secured (e.g., key card, lock and key).
- Observe electronic safeguards of any information/documentation collected and maintained electronically pursuant to the PREA Standards (e.g., risk screening information) to determine how access to the information is secured (e.g., password protected, accessible only in certain areas, role-based security).
 - **Note**, the auditor may have to speak with the agency/facility information technology staff person to understand the secure storage of electronic information and who has access to that information.

Additionally, the auditor should:

- Have informal conversations with staff regarding access to secure information, including medical and mental health files, if they exist, sexual abuse and sexual harassment reports, etc. (e.g., where, how, and security of information is stored electronically and in hard copy, specifically who has access and how access is restricted).

Documentation Review

- Sample of administrative investigation reports.
- Sample of cases involving substantiated allegations to ensure that they were referred for prosecution.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?*

Provision Findings

- ☐ Yes
- ☐ No

Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?*

Provision Findings

- ☐ Yes
- ☐ No

115.171 (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 documentary evidence where feasible.

Pre-Audit	Issue Log Notes
Audit	

Interview Guides

- Investigative Staff - Q: 18

PREA Audit Site Review

RECORD STORAGE

During the site review, the auditor must:

- Observe the physical storage area of any information/documentation collected and maintained in hard copy pursuant to the PREA Standards (e.g., risk screening information, sexual abuse allegations) to determine if the area is secured (e.g., key card, lock and key).
- Observe electronic safeguards of any information/documentation collected and maintained electronically pursuant to the PREA Standards (e.g., risk screening information) to determine how access to the information is secured (e.g., password protected, accessible only in certain areas, role-based security).
 - **Note**, the auditor may have to speak with the agency/facility information technology staff person to understand the secure storage of electronic information and who has access to that information.

Additionally, the auditor should:

- Have informal conversations with staff regarding access to secure information, including medical and mental health files, if they exist, sexual abuse and sexual harassment reports, etc. (e.g., where, how, and security of information is stored electronically and in hard copy, specifically who has access and how access is restricted).

Documentation Review

- Sample of criminal investigation reports.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? *

Provision Findings

- ☐ Yes
- ☐ No

115.171 (h): Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.171 (h)-1	Substantiated allegations of conduct that appear to be criminal are referred for prosecution.	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.171 (h)-2	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:	(Number only) Enter Comment	

Audit

Interview Guides

- Investigative Staff – Q: 13

Documentation Review

- Sample of cases referred for prosecution.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?*

Provision Findings

- ☐ Yes
- ☐ No

115.171 (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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.171 (i)-1	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. If applicable, select policy on criminal and administrative agency investigations and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
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Audit

PREA Audit Site Review

- Review site review instructions outlined in provisions (f) and (g).

Documentation Review

- Sample of investigation reports (including older reports, if applicable).

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency retain all written reports referenced in 115.171(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?*

Provision Findings

- ☐ Yes
☐ No

115.171 (j): The departure of the alleged abuser or victim from the employment or control of the lockup or agency shall not provide a basis for terminating an investigation.

Pre-Audit

Issue Log Notes

Audit

Interview Guides

- Investigative Staff – Q: 14

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the lockup or agency does not provide a basis for terminating an investigation?*

Provision Findings

- ☐ Yes
☐ No

115.171 (k): Any State entity or Department of Justice component that conducts such

investigations shall do so pursuant to the above requirements.

Pre-Audit

Issue Log Notes

Audit

Other Audit Instructions

- **Auditor is not required to audit this provision.**

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

115.171 (I): 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.

Pre-Audit

Issue Log Notes

Audit

Interview Guides

- Sheriff, Chief, or Director – Q: 10
- PREA Coordinator – Q: 16
- Investigative Staff – Q: 15

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

When outside agencies investigate sexual abuse, does the agency cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.121(a).)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Investigations

115.172: Evidentiary standard for administrative investigations

115.172 (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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.172 (a)-1	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. • Upload/select policy on standards for administrative investigations	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Interview Guides

- Investigative Staff – Q: 19

Documentation Review

- Documentation of administrative findings for proper standard of proof.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?*

Provision Findings

- ☐ Yes
☐ No

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in

making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Discipline

115.176: Disciplinary sanctions for staff

115.176 (a): Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.176 (a)-1	Staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. • Upload/select policy on staff disciplinary sanctions	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?*

Provision Findings

- ☐ Yes
- ☐ No

115.176 (b): Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.176 (b)-1	In the past 12 months, the number of staff from the facility who have violated agency sexual abuse or sexual harassment policies: • Upload/select sample records of terminations, resignations, or other sanctions for violation of sexual abuse or harassment policy • If applicable, also select policy on staff disciplinary sanctions and indicate relevant page/section	(Number only) Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.176 (b)-2	In the past 12 months, 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:	(Number only) Enter Comment	

Audit

Documentation Review

- Additional sample records of terminations, resignations, or other sanctions for violation of sexual abuse or sexual harassment policies.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?*

Provision Findings

- ☐ Yes
☐ No

115.176 (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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.176 (c)-1	The 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. If applicable, select policy on staff disciplinary sanctions and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.176 (c)-2	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 (other than actually engaging in sexual abuse):	(Number only) Enter Comment	

Audit

Documentation Review

- Records of disciplinary sanctions taken against staff for violations of the agency sexual abuse or sexual harassment policies in the past 12 months.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) 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?*

Provision Findings

- ☐ Yes
- ☐ No

115.176 (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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.176 (d)-1	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. If applicable, select policy on staff disciplinary sanctions and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.176 (d)-2	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:	(Number only) Enter Comment	

Documentation Review

- Reports to law enforcement for violations of agency sexual abuse or sexual harassment policies.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Are 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, reported to: o Law enforcement agencies, unless the activity was clearly not criminal?*

Provision Findings

- ☐ Yes
☐ No

Are 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, reported to: Relevant licensing bodies?*

Provision Findings

- ☐ Yes
☐ No

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Discipline

115.177: Corrective action for contractors and volunteers

115.177 (a): Any contractor or volunteer who engages in sexual abuse is prohibited from contact with detainees and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.177 (a)-1	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. • Upload/select policy on corrective actions for contractors and volunteers	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.177 (a)-2	Agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with detainees. • If applicable, select policy on corrective actions for contractors and volunteers and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	
115.177 (a)-3	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 detainees. • Upload/select reports of sexual abuse of detainees by contractors or volunteers	Yes/No ☐ Yes ☐ No Enter Comment	
115.177 (a)-4	In the past 12 months, the number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of detainees:	(Number only) Enter Comment	

Audit

Documentation Review

- Documentation of referrals to law enforcement and/or relevant licensing bodies.
- Investigative reports if relevant.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Is any contractor or volunteer who engages in sexual abuse prohibited from contact with detainees?*

Provision Findings

- ☐ Yes
☐ No

Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies(unless the activity was clearly not criminal)?*

Provision Findings

- ☐ Yes
☐ No

Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?*

Provision Findings

- ☐ Yes
☐ No

115.177 (b): The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with detainees, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.177 (b)-1	The facility takes appropriate remedial measures and considers whether to prohibit further contact with detainees in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. • Upload/select documentation of remedial measures that have been enforced	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
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Audit

Interview Guides

- Sheriff, Chief, or Director – Q: 18

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with detainees?*

Provision Findings

- ☐ Yes
☐ No

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

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Discipline

115.178: Referral for prosecution for detainee-on-detainee sexual abuse

115.178 (a): When there is probable cause to believe that a detainee sexually abused another detainee in a lockup, the agency shall refer the matter to the appropriate prosecuting authority.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.178 (a)-1	When there is probable cause to believe that a detainee sexually abused another detainee in a lockup, agency policy requires that the matter be referred to the appropriate prosecuting authority. Upload/select policy on prosecution referral	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.178 (a)-2	In the past 12 months, the number of allegations where there was probable cause to believe that a detainee sexually abused another detainee in the facility:	Yes/No ☐ Yes ☐ No Enter Comment	
115.178 (a)-3	In the past 12 months, the number of the allegations above that were referred to the appropriate prosecuting authority:	(Number only) Enter Comment	

Audit

Interview Guides

- Sheriff, Chief, or Director – Q: 19

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

When there is probable cause to believe that a detainee sexually abused another detainee in a lockup, does the agency refer the matter to the appropriate prosecuting authority?*

Provision Findings

- ☐ Yes
☐ No

115.178 (b): To the extent the agency itself is not responsible for investigating allegations of sexual abuse, the agency shall inform the investigating entity of this policy.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.178 (b)-1	If the agency is not responsible for administrative and criminal investigations of allegations of sexual abuse, the agency informs the investigating agency of this policy. Check N/A if the agency/facility is responsible for conducting administrative and criminal investigations. If applicable, select policy on prosecution referral and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall

Compliance Determination.

Provision Findings

If the agency itself is not responsible for investigating allegations of sexual abuse, does the agency inform the investigating entity of this policy? (N/A if the agency/facility is responsible for administrative and criminal investigations. See 115.121(a).)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

115.178 (c): Any State entity or Department of Justice component that is responsible for investigating allegations of sexual abuse in lockups shall be subject to this requirement.

Pre-Audit

Issue Log Notes

Audit

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Supporting Documentation

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Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

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Medical and Mental Care

115.182: Access to emergency medical and mental health services

115.182 (a): Detainee victims of sexual abuse in lockups shall receive timely, unimpeded access to emergency medical treatment.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.182 (a)-1	Detainee victims of sexual abuse receive timely, unimpeded access to emergency medical treatment. • Upload/select sample medical secondary forms/logs regarding detainees' access to services	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
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Audit

Interview Guides

- Sheriff, Chief, or Director – Q: 23, 24

Documentation Review

- Additional medical secondary materials describing access to services.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Do detainee victims of sexual abuse in lockups receive timely, unimpeded access to emergency medical treatment?*

Provision Findings

- ☐ Yes
☐ No

115.182 (b): 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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.182 (b)-1	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. • Upload/select policy on medical treatment for sexual abuse	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Are treatment services 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?*

Provision Findings

- ☐ Yes
☐ No

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

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Data Collection and Review

115.186: Sexual abuse incident reviews

115.186 (a): The lockup 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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.186 (a)-1	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. • Upload/select: ◦ policy on conducting sexual abuse incident reviews ◦ documentation of sexual abuse incident reviews ◦ sample documentation of completed criminal or administrative investigations of sexual abuse (if incident review documents contained therein)	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.186 (a)-2	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:	(Number only) Enter Comment	

Audit

Interview Guides

- Sheriff, Chief, or Director – Q: 20

Documentation Review

- Additional documentation of completed criminal or administrative investigations of sexual abuse.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the lockup 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?*

Provision Findings

- ☐ Yes
☐ No

115.186 (b): Such review shall ordinarily occur within 30 days of the conclusion of the investigation.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.186 (b)-1	The facility ordinarily conducts a sexual abuse incident review within 30 days of the conclusion of the criminal or administrative sexual abuse investigation. If applicable, select documentation of sexual abuse incident reviews and sample documentation of completed criminal or administrative (if incident review documents contained therein) and indicate relevant page(s)/section(s)	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.186 (b)-2	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:	(Number only) Enter Comment	

Audit

Documentation Review

- Additional documentation of completed criminal or administrative investigations of sexual abuse.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does such review ordinarily occur within 30 days of the conclusion of the investigation?*

Provision Findings

- ☐ Yes
☐ No

115.186 (c): The review team shall include upper-level management officials, with input from line supervisors and investigators.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.186 (c)-1	The sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors and investigators. If applicable, select policy on sexual abuse incident reviews and indicate relevant page/ section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Interview Guides

- Sheriff, Chief, or Director – Q: 20

Documentation Review

- Documentation of review team minutes or reports.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the review team include upper-level management officials, with input from line supervisors and investigators?*

Provision Findings

- ☐ Yes
☐ No

115.186 (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 lockup; (3) Examine the area in the lockup 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 lockup head and PREA Coordinator.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.186 (d)-1	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 standard and any recommendations for improvement, and submits such report to the facility head and PREA Coordinator. • Upload/select reports of findings from sexual abuse incident reviews • If applicable, select documentation of sexual abuse incident reviews and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
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Audit

Interview Guides

- Sheriff, Chief, or Director – Q: 21, 22
- PREA Coordinator – Q: 10, 11, 12
- Incident Review Team – Q: 1, 2, 3, 4

Documentation Review

- Additional reports of findings from sexual abuse incident reviews.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?*

Provision Findings

- ☐ Yes
- ☐ No

Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or was motivated or otherwise caused by other group dynamics at the lockup?*

Provision Findings

- ☐ Yes
- ☐ No

Does the review team: Examine the area in the lockup where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?*

Provision Findings

- ☐ Yes
- ☐ No

Does the review team: Assess the adequacy of staffing levels in that area during different shifts?*

Provision Findings

- ☐ Yes
- ☐ No

Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?*

Provision Findings

- ☐ Yes
- ☐ No

Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.186(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the lockup head and agency PREA coordinator?*

Provision Findings

- ☐ Yes
- ☐ No

115.186 (e): The lockup shall implement the recommendations for improvement, or shall document its reasons for not doing so.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.186 (e)-1	The lockup implements the recommendations for improvement or documents its reasons for not doing so. • Upload/select: ◦ documentation supporting implementation of recommendations ◦ documentation of reasons for not implementing recommendations	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the lockup implement the recommendations for improvement, or document its reasons for not doing so?*

Provision Findings

- ☐ Yes
- ☐ No

Supporting Documentation

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Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

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Data Collection and Review

115.187: Data collection

115.187 (a): The agency shall collect accurate, uniform data for every allegation of sexual abuse at lockups under its direct control using a standardized instrument and set of definitions.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility	

		Response	
115.187 (a)-1	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. • Upload/select: ◦ policy on sexual abuse data collection ◦ set of definitions ◦ data collection instrument	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency collect accurate, uniform data for every allegation of sexual abuse at lockups under its direct control using a standardized instrument and set of definitions?*

Provision Findings

- ☐ Yes
☐ No

115.187 (b): The agency shall aggregate the incident-based sexual abuse data at least

annually.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.187 (b)-1	The agency aggregates the incident-based sexual abuse data at least annually.	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Documentation Review

- Sample of aggregated data.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency aggregate the incident-based sexual abuse data at least annually?*

Provision Findings

- ☐ Yes
☐ No

115.187 (c): The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Local Jail Jurisdictions Survey of Sexual Violence conducted by the Department of Justice, or any subsequent form developed by the Department of Justice and designated for lockups.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.187 (c)-1	The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Local Jail Jurisdictions Survey of Sexual Violence (SSV) conducted by the Department of Justice, or any subsequent form developed by the Department of Justice and designated for lockups. If applicable, select policy on sexual abuse data collection and data collection instrument and indicate relevant page(s)/section(s)	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Local Jail Jurisdictions Survey of Sexual Violence conducted by the Department of Justice, or any subsequent form developed by the Department of Justice and designated for lockups?*

Provision Findings

- ☐ Yes
- ☐ No

115.187 (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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.187 (d)-1	The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. If applicable, select policy on sexual abuse data collection and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
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Audit

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?

Provision Findings
☐ Yes
☐ No

115.187 (e): The agency also shall obtain incident-based and aggregated data from every private agency with which it contracts for the confinement of its detainees.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.187 (e)-1	The agency obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its detainees. Check N/A if agency does not contract for the confinement of its detainees and skip to 115.187 (f). If applicable, select policy on sexual abuse data collection and indicate relevant page/section	Yes/No ☐ Yes ☐ No ☐ N/A Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.187 (e)-2	The data from private facilities complies with SSV reporting regarding content.	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

Documentation Review

- Sample of incident-based and aggregated data from private facility, if applicable.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its detainees? (N/A if the agency does not contract for the confinement of its detainees.)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

115.187 (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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.187 (f)-1	The agency provided the Department of Justice (DOJ) with data from the previous calendar year upon request. Check N/A if DOJ has not requested agency data.	Yes/No ☐ Yes ☐ No ☐ N/A Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Data Collection and Review

115.188: Data review for corrective action

115.188 (a): The agency shall review data collected and aggregated pursuant to § 115.187 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 lockup, as well as the agency as a whole.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.188 (a)-1	The agency reviews data collected and aggregated pursuant to §115.187 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 lockup, as well as the agency as a whole. • Upload/select: ◦ documentation of corrective action plans ◦ annual report of findings from data reviews/corrective actions	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Interview Guides

- Agency Head – Q: 9
- PREA Coordinator – Q: 13, 14

Documentation Review

- Additional documentation of corrective action plans.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency review data collected and aggregated pursuant to § 115.187 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?*

Provision Findings

- ☐ Yes
☐ No

Does the agency review data collected and aggregated pursuant to § 115.187 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?*

Provision Findings

- ☐ Yes
☐ No

Does the agency review data collected and aggregated pursuant to § 115.187 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each lockup, as well as the agency as a whole?*

Provision Findings

- ☐ Yes

☐ No

115.188 (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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.188 (b)-1	The annual report includes a comparison of the current year's data and corrective actions with those from prior years. If applicable, select annual report of findings from data reviews/corrective actions and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.188 (b)-2	The annual report provides an assessment of the agency's progress in addressing sexual abuse. If applicable, select annual report of findings from data reviews/corrective actions and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?*

Provision Findings

- ☐ Yes
☐ No

115.188 (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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.188 (c)-1	The agency makes its annual report readily available to the public at least annually through its website. If "yes," skip to 115.188(c)-3. Provide link to website where annual report is available	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.188 (c)-2	If NO, the agency makes it available through other means.	Yes/No ☐ Yes ☐ No Enter Comment	
115.188 (c)-3	The annual reports are approved by the agency head.	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

Interview Guides

- Agency Head – Q: 10

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Is the agency’s annual report 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?*

Provision Findings

- ☐ Yes
- ☐ No

115.188 (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 lockup, but must indicate the nature of the material redacted.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.188 (d)-1	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. • If applicable, select annual report of findings from data reviews/corrective actions and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.188 (d)-2	The agency indicates the nature of material redacted. • If applicable, select annual report of findings from data reviews/corrective actions and indicate relevant page/section	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

Interview Guides

- PREA Coordinator – Q: 15

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a lockup?*

Provision Findings

- ☐ Yes
☐ No

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Data Collection and Review

115.189: Data storage, publication, and destruction

115.189 (a): The agency shall ensure that data collected pursuant to § 115.187 are securely retained.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.189 (a)-1	The agency ensures that incident-based and aggregate data are securely retained. • Upload/select policy on data storage	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested

Audit

Interview Guides

- PREA Coordinator – Q: 13

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency ensure that data collected pursuant to § 115.187 are securely retained?*

Provision Findings

- ☐ Yes
☐ No

115.189 (b): The agency shall make all aggregated sexual abuse data, from lockups under its direct control and private agencies 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.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	
115.189 (b)-1	Agency policy requires that aggregated sexual abuse data from lockups under its direct control and private facilities with which it contracts be made readily available to the public, at least annually, through its website. • Upload/select policy on data availability	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.189 (b)-2	If NO, the agency makes it available through other means.	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

Documentation Review

- Website or other means for publicly available aggregated sexual abuse data.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency make all aggregated sexual abuse data, from lockups under its direct control and any private agencies 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?*

Provision Findings

- ☐ Yes
- ☐ No

115.189 (c): Before making aggregated sexual abuse data publicly available, the agency shall remove all personal identifiers.

Pre-Audit			Issue Log Notes
Section	Question Text	Agency/Facility Response	

115.189 (c)-1	Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.	Yes/No ☐ Yes ☐ No Enter Comment	The text and checkboxes below can be used to populate an audit Issue Log that identifies clarifications or additional documentation requested by the auditor. Note: this text will not be included in the interim or final reports. ☐ Clarification requested ☐ Additional documentation requested
115.189 (c)-2	The agency maintains sexual abuse data collected pursuant to §115.187 for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise. If Federal, State, or local law requires otherwise, upload/ select a copy of the applicable law	Yes/No ☐ Yes ☐ No Enter Comment	

Audit

Documentation Review

- Sample of publicly available sexual abuse data to check that personal identifiers have been removed.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?*

Provision Findings

- ☐ Yes
☐ No

115.189 (d): The agency shall maintain sexual abuse data collected pursuant to § 115.187 for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.

Pre-Audit

Issue Log Notes

Audit

Documentation Review

- Historical sexual abuse data since August 20, 2012.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Does the agency maintain sexual abuse data collected pursuant to § 115.187 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?*

Provision Findings

- ☐ Yes
☐ No

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your

Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Auditing and Corrective Action

115.401: Frequency and scope of audits	
115.401 (a): During the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency shall ensure that each facility operated by the agency, or by a private organization on behalf of the agency, is audited at least once.	
Pre-Audit	Issue Log Notes
Audit	
Documentation Review	
Review agency records, website, etc. to ensure that each facility has been audited.	

Other Audit Instructions

- Note. The auditor comments (below) should indicate whether the agency met this standard during the prior three-year audit cycle. If the standard was not met for the prior cycle, the narrative should discuss the agency's plans for future audits during the current audit cycle. See also FAQ: Audit and Compliance, issued April 23, 2014.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)*

Provision Findings

- ☐ Yes
☐ No

115.401 (b): During each one-year period starting on August 20, 2013, the agency shall ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, is audited.

Pre-Audit

Issue Log Notes

Audit

Documentation Review

- Review agency records, website, etc. to ensure that one-third of each facility type has been audited.

Other Audit Instructions

- Note. The auditor comments (below) should indicate whether the agency met this standard during the prior year. If the standard was not met for the prior year, the narrative should discuss the agency's plans for future audits during the upcoming years. See also FAQ: Audit and Compliance, issued April 23, 2014.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)*

Provision Findings

- ☐ Yes
☐ No

If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)*

Provision Findings

- ☐ Yes
☐ No
☐ N/A

115.401 (h): The auditor shall have access to, and shall observe, all areas of the audited facilities.

Pre-Audit

Issue Log Notes

Audit

Other Audit Instructions

- Note. The agency/facility must have provided the auditor with full access to all areas of the audited agency/facility. If full access was not provided to any areas of the agency/facility, answer “No”.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Did the auditor have access to, and the ability to observe, all areas of the audited facility?*

Provision Findings

- ☐ Yes
☐ No

115.401 (i): The auditor shall be permitted to request and receive copies of any relevant documents (including electronically stored information).

Pre-Audit

Issue Log Notes

Audit

Other Audit Instructions

- Note. The agency/facility must have provided the auditor with copies of any requested documents and information (including, among other things, electronically stored information). If copies of any requested documents were not provided, answer “No”.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?*

Provision Findings

☐ Yes

☐ No

115.401 (m): The auditor shall be permitted to conduct private interviews with detainees.

Pre-Audit

Issue Log Notes

Audit

Other Audit Instructions

- Note. The agency/facility must have permitted the auditor to conduct interviews with any detainees that were requested by the auditor. The agency/facility must have allowed the auditor to conduct these interviews in a private setting. If the agency/facility did not allow interviews of certain detainees and/or did not allow interviews to be conducted in private, answer “No”.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?*

Provision Findings

- ☐ Yes
- ☐ No

115.401 (n): Detainees shall be permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel.

Pre-Audit

Issue Log Notes

Audit

PREA Audit Site Review

- Ensure that information about the PREA audit (e.g., Notice of Audit) is posted in all housing units. Ask detainees about the notice and how long it has been posted.

Documentation Review

- Review information provided to detainees regarding the confidential nature of any correspondence and communication with the auditor. Ensure that the information is accurate.
- Review methods provided by agency/facility for sending confidential information or correspondence to the auditor, and detail methods in the notes section or upload documentation, if applicable.

Other Audit Instructions

- Note. The agency/facility must have provided detainees, with information about the PREA audit at least six weeks prior to the site visit. The information or “Notice of Audit” is generally provided to the agency/facility by the auditor, and the agency is required to post such information in all housing units. The information provided to the detainees must have included accurate information regarding the confidential nature of any correspondence and communication with the auditor. The agency/facility must have provided detainees, with a method of sending confidential information or correspondence to the auditor. Such method provided the same level of confidentiality as if the detainees were communicating with legal counsel. If any of these elements were not met, answer “No”.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?*

Provision Findings

- ☐ Yes
☐ No

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Auditing and Corrective Action

115.403: Audit contents and findings

115.403 (f): The agency shall ensure that the auditor's final report is published on the agency's website if it has one, or is otherwise made readily available to the public.

Pre-Audit

Issue Log Notes

Audit

Documentation Review

- A list of all of the agency's facility and agency audit reports completed 90 days prior to the audit within the appropriate review period, and web links to each of these reports or any other evidence that these reports have been provided publicly if the agency does not have a website.

Auditor Personal Notes

Auditor's Personal Notes: This text will not be included in your report. Analysis of your findings for the interim/final report should go in the discussion following your Overall Compliance Determination.

Provision Findings

The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)*

Provision Findings

- ☐ Yes
- ☐ No
- ☐ N/A

Supporting Documentation

Supporting Documentation Instructions: Use this button to upload interview notes, your Site Review Checklist or other site review notes, supporting documentation you have collected during the course of the audit, and/or tag any supplemental files provided by the facility after the Pre-Audit Questionnaire was submitted.

Select File(s) (including supplemental files)

Auditor Overall Determination

Auditor 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)

Instructions for Overall Compliance Determination Narrative (this text will appear in your report)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:

2. End date of the onsite portion of the audit:

Audit Notice

Remember that pursuant to Standard 115.401(j), auditors are required to preserve and retain, and release to DOJ upon request, all audit documentation relied upon in making audit determinations. This includes the notice of the onsite audit and documentation gathered by the auditor to verify that the notice was properly posted (e.g., interview notes, time-stamped photos).

3. Did you request that the facility post the audit notice at least 6 weeks in advance of the onsite portion of the audit?

☐ Yes

☐ No

4. Did the facility post the audit notice?

☐ Yes

☐ No

5. What steps did you take to verify whether the notice was posted in required areas by the agreed upon deadline? Check all that apply	☐ I requested time-stamped photos of all posted notices from the PREA Coordinator or other authorized point of contact in the facility ☐ I requested a written assurance (e.g., in an email) from the PREA Coordinator or other authorized point of contact in the facility that the notice was posted as required ☐ I visited the facility at least 6 weeks before the onsite portion of the audit and personally confirmed that the audit notice was posted as required ☐ During the onsite portion of the audit I asked all inmate/resident/detainee interviewees about the timing and placement of the audit notice ☐ Other
Confidential Correspondence	
6. Did you receive any confidential correspondence from INMATES/ RESIDENTS/DETAINEES that was relevant to sexual safety in the facility?	☐ Yes ☐ No
7. Did you receive any confidential correspondence from STAFF that was relevant to sexual safety in the facility?	☐ Yes ☐ No
8. Did you receive any confidential correspondence from VOLUNTEERS OR CONTRACTORS that was relevant to sexual safety in the facility?	☐ Yes ☐ No
9. Did you receive any confidential correspondence from any OTHER INTERESTED PARTIES (e.g., family members of incarcerated individuals, advocates) that was relevant to sexual safety in the facility?	☐ Yes ☐ No

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?

- ☐ Yes
- ☐ No

Research

11. Did you review mandatory reporting laws for the state where the facility is located?

- ☐ Yes
- ☐ No

12. Did you review the agency and/or facility website(s) for PREA information (e.g., how to make a third-party report, PREA investigation policies, other policies, etc.)?

- ☐ Yes
- ☐ No
- ☐ NA

13. Did you conduct internet research regarding the audited facility (e.g., litigation related to sexual abuse or sexual harassment, federal consent decrees, etc.)?

- ☐ Yes
- ☐ No

AUDITED FACILITY INFORMATION

14. Designated facility capacity:

15. Average daily population for the past 12 months:

16. Number of inmate/resident/detainee housing units:

DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows residents to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.

17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?

☐ Yes

☐ No

☐ Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics for the 12 Months Preceding the Audit (for documentation sampling)

Inmates/Residents/Detainees Population Characteristics for the 12 Months Preceding the Audit

18. Enter the total number of inmates/residents/detainees who were admitted to the facility over the past 12 months:

19. Enter the total number of inmates/residents/detainees with a physical disability who were in the facility over the past 12 months:

20. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) who were in the facility over the past 12 months:

21. Enter the total number of inmates/ residents/detainees who are Blind or have low vision (visually impaired) who were in the facility over the past 12 months:	
22. Enter the total number of inmates/ residents/detainees who are Deaf or hard-of-hearing who were in the facility over the past 12 months:	
23. Enter the total number of inmates/ residents/detainees who are Limited English Proficient (LEP) who were in the facility over the past 12 months:	
24. Enter the total number of inmates/ residents/detainees who identify as lesbian, gay, or bisexual who were in the facility over the past 12 months:	
25. Enter the total number of inmates/ residents/detainees who identify as transgender or intersex who were in the facility over the past 12 months:	
26. Enter the total number of inmates/ residents/detainees who reported sexual abuse in this facility over the past 12 months:	
27. Enter the total number of inmates/ residents/detainees who disclosed prior sexual victimization during risk screening who were in the facility over the past 12 months:	
28. Enter the total number of inmates/ residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization who were in the facility over the past 12 months:	

29. Provide any additional comments regarding the population characteristics of inmates/residents/detainees who were in the facility over the past 12 months (e.g., groups not tracked, issues with identifying certain populations).	
Staff, Volunteers, and Contractors Population Characteristics for the 12 Months Preceding the Audit	
30. Enter the total number of STAFF employed by the facility over the past 12 months:	
31. Enter the total number of STAFF employed by the facility who may have had contact with inmates/residents/detainees over the past 12 months:	
32. Enter the total number of VOLUNTEERS who may have had contact with inmates/residents/detainees over the past 12 months:	
33. Enter the total number of CONTRACTORS who may have had contact with inmates/residents/detainees over the past 12 months:	
34. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility over the past 12 months:	
Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit	
Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit	
35. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	

36. Enter the total number of inmates/ residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	
37. Enter the total number of inmates/ residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	
38. Enter the total number of inmates/ residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	
39. Enter the total number of inmates/ residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	
40. Enter the total number of inmates/ residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	
41. Enter the total number of inmates/ residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	
42. Enter the total number of inmates/ residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	
43. Enter the total number of inmates/ residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	

44. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	
45. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	
46. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
47. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	
48. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	
49. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	
50. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

51. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:

52. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)

- ☐ Age
- ☐ Race
- ☐ Ethnicity (e.g., Hispanic, Non-Hispanic)
- ☐ Length of time in the facility
- ☐ Housing assignment
- ☐ Gender
- ☐ Other
- ☐ None

53. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?

54. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?

- ☐ Yes
- ☐ No

55. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):

Targeted Inmate/Resident/Detainee Interviews

56. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:

As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

57. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:

58. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:

59. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:

60. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:

61. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	
62. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	
63. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	
64. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	
65. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	
66. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	

67. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
68. Enter the total number of RANDOM STAFF who were interviewed:	
69. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☐ Length of tenure in the facility ☐ Shift assignment ☐ Work assignment ☐ Rank (or equivalent) ☐ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
70. Were you able to conduct the minimum number of RANDOM STAFF interviews?	☐ Yes ☐ No
71. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
72. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	

73. Were you able to interview the Agency Head?	☐ Yes ☐ No
74. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	☐ Yes ☐ No
75. Were you able to interview the PREA Coordinator?	☐ Yes ☐ No
76. Were you able to interview the PREA Compliance Manager?	☐ Yes ☐ No ☐ NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

77. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- ☐ Agency contract administrator
- ☐ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- ☐ Line staff who supervise youthful inmates (if applicable)
- ☐ Education and program staff who work with youthful inmates (if applicable)
- ☐ Medical staff
- ☐ Mental health staff
- ☐ Non-medical staff involved in cross-gender strip or visual searches
- ☐ Administrative (human resources) staff
- ☐ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- ☐ Investigative staff responsible for conducting administrative investigations
- ☐ Investigative staff responsible for conducting criminal investigations
- ☐ Staff who perform screening for risk of victimization and abusiveness
- ☐ Staff who supervise inmates in segregated housing/residents in isolation
- ☐ Staff on the sexual abuse incident review team
- ☐ Designated staff member charged with monitoring retaliation
- ☐ First responders, both security and non-security staff
- ☐ Intake staff

	☐ Other
78. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	☐ Yes ☐ No
79. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	☐ Yes ☐ No
80. Provide any additional comments regarding selecting or interviewing specialized staff.	

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

81. Did you have access to all areas of the facility?	☐ Yes ☐ No
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Was the site review an active, inquiring process that included the following:

82. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	☐ Yes ☐ No
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83. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	☐ Yes ☐ No
84. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	☐ Yes ☐ No
85. Informal conversations with staff during the site review (encouraged, not required)?	☐ Yes ☐ No
86. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	
Documentation Sampling	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
87. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	☐ Yes ☐ No
88. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

89. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse				
Staff-on-inmate sexual abuse				
Total				

90. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment				
Staff-on-inmate sexual harassment				
Total				

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

91. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse					
Staff-on-inmate sexual abuse					
Total					

92. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse				
Staff-on-inmate sexual abuse				
Total				

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

93. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment					
Staff-on-inmate sexual harassment					
Total					

94. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment				
Staff-on-inmate sexual harassment				
Total				

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

95. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:

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96. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☐ Yes ☐ No ☐ NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
97. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	
98. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
99. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☐ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
100. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	
101. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☐ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

102. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☐ Yes ☐ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
103. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	
104. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☐ Yes ☐ No ☐ NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
105. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	
106. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	☐ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
107. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	☐ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

108. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:

109. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?

☐ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

110. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?

☐ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

111. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

SUPPORT STAFF INFORMATION

IMPORTANT REMINDER: Lead auditors are required to include in their audit contracts and in their audit reports information on all other DOJ-certified PREA auditors and non-certified support staff who assisted the lead auditor during any phase of the PREA audit. For details on what information to include, refer to p. 6 and p. 66 of the PREA Auditor Handbook. The following questions are about support staff. Please provide complete information about any assistance you received from any other DOJ-certified PREA auditors and/or non-certified support staff during each phase of this audit.

DOJ-certified PREA Auditors Support Staff

112. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

☐ Yes

☐ No

Non-certified Support Staff

113. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

- ☐ Yes
- ☐ No

LEAD AUDITOR TIME SPENT AUDITING THIS FACILITY

114. How many HOURS did you (the lead auditor) spend on the PRE-ONSITE portion of this audit?

- ☐ 10 hours or less
- ☐ 11-20 hours
- ☐ 21-30 hours
- ☐ 31-40 hours
- ☐ 41-50 hours
- ☐ 51 or more hours

For the following question, please account for all days spent at the audited facility, regardless of the amount of time you were onsite on a particular day. For example, if you were onsite for only 2 hours on the last day of the onsite portion of the audit, count this as one day. Remember, the number of days you indicate here should match the number of days indicated in your Audit Start Date and Audit End Date entries above.

115. How many DAYS did you (the lead auditor) spend conducting the ONSITE portion of this audit?	☐ 1 day ☐ 2 days ☐ 3 days ☐ 4 days ☐ 5 days ☐ 6 days ☐ 7 days ☐ 8 days ☐ 9 days ☐ 10 days ☐ 11 days ☐ 12 days
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AUDITING ARRANGEMENTS AND COMPENSATION

For the following questions, the PREA Management Office is collecting information on auditing arrangements and compensation for trend analysis so that better information and guidance can be provided to the field in the future.

118. Who paid you to conduct this audit?

- ☐ The audited facility or its parent agency
- ☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)
- ☐ A third-party auditing entity (e.g., accreditation body, consulting firm)
- ☐ Other

119. How much were you paid to conduct this audit? Please indicate the dollar amount for the compensation received for your time to complete audit-related tasks (e.g., documentation review, report writing, interviews, onsite observations). Do not include reimbursements for airfare, per diem rates, or non-personnel costs.

- ☐ \$5,001 or more
- ☐ \$4,001-\$5,000
- ☐ \$3,001-\$4,000
- ☐ \$2,001-\$3,000
- ☐ \$1,001-\$2,000
- ☐ \$1- \$1,000
- ☐ \$0 - I conducted this audit as part of a consortium or circular auditing arrangement
- ☐ \$0 - I was unpaid for a reason other than a consortium or circular auditing arrangement

120. Does the amount indicated above reflect the amount you were paid to conduct the audit of the single facility named above (i.e., not the amount you were paid to conduct multiple audits under a single contract)?

- ☐ Yes
- ☐ No

121. What was the total cost of this audit? Total cost refers to the TOTAL AMOUNT THAT THE AUDITED AGENCY PAID for this audit, including the auditor's compensation, travel costs, per diem costs, and so on.	☐ \$7,001 or more ☐ \$6,001-\$7,000 ☐ \$5,001-\$6,000 ☐ \$4,001-\$5,000 ☐ \$3,001-\$4,000 ☐ \$2,001-\$3,000 ☐ \$1,001-\$2,000 ☐ \$1-\$1,000 ☐ \$0 - This audit was conducted as part of a consortium or circular auditing arrangement ☐ \$0 - There was no cost for this audit for a reason other than a consortium or circular auditing arrangement ☐ Unknown - I was not responsible for procuring this audit, and do not know the total amount paid by the audited agency
122. Is there any other information you would like to provide about this audit? The PREA Management Office is interested in hearing from auditors about particular challenges associated with this audit, as well as examples of important achievements by the audited agency or facility. Please provide a brief description here.	