## **PREA CHECKLIST**

### PREA Policy Reporting & Investigation of Sexual Assaults

Shift Leader:			DATE:			
Victim(s) JJIS #:		Alleged Abuser(s) JJIS	\$ #: 			
	Ensure the victim is safe and kept separated (sight and sound) from the alleged abuser.					
	Notify the Detention Facility Manager and the PREA Coordinator and advise on the status of the victim and the alleged abuser.					
	Isolate victim and Detention Manager/PREA Coordinator ask the following questions:					
Wher	did the assa	ult occur?				
Wher	e did the assa					
Was t	the assault:					
	□ Anal	□ Oral	☐ Other:			
Wher	was the last	time you Showered	j?			
Have	you changed	clothes since the a	assault? If yes, where is the clothing?			
Have	you brushed	your teeth since the	e assault? If yes, what is the location of	of the toothbrush?		
\/\ho	assaulted vou	12				

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	If deemed appropriate maintain crime scene and chain of custody for evidence until the scene and evidence is released by the investigating law enforcement agency. Evidence may include but is not limited to the victim and aggressor's toothbrush, undergarments, clothing, personal items in cell.				
	Place the alleged, identified youth suspect(s) in a dry segregation cell(s) <b>If within 96 hours</b> or empty regular cell(s) if over 96 hours.				
		ot interview the alleged suspections to the suspection of the susp	ct(s) unless authorized by the investigating law		
	Notifications: *Any life threatening injuries call 9-1-1*				
<u>IMMEI</u>	DIATE NOTIFI	<u>CATIONS</u>			
<u>Name</u>		<u>Date</u>	<u>Time</u>		
			Detention Manager/PREA Coordinator		
			Juvenile Department Director		
			Officer of the Day (OD)		
			County Dispatch		
			Law Enforcement Agency Case #		
			Health Services Manager		
			Behavioral Health Services		
	<b>Within 96 hours:</b> Work with Health Services and the investigating law enforcement agency to arrange for transport to a designated medical facility for treatment, examination, documentation, collection of forensic evidence, testing for sexually transmitted diseases, and referral for counseling.				
	Over 96 hours: Work with Health Services Staff for:				
		on and determination of on-site rall facility for treatment, examination	nedical evaluations versus transport to a designated ation, and documentation.		
	Testing for	or sexually transmitted diseases			
	Referral t	to Behavioral Health Services fo	or counseling.		
	Remove victir	m from assault area, place on 5	minute checks.		

Place both victim and perpetrator on peer restriction.
Prepare JJIS Incident Report.

### **STAFF RESPONSIBILITIES**

#### **PREA Policy Reporting & Investigation of Sexual Assaults**

- A. Youth are encouraged to immediately report sexual assault to any staff member. Upon notification by a youth that he/she has been sexually assaulted or coerced into unwanted sexual contact, the staff member shall immediately:
  - 1. Ensure the victim is safe and kept separated from the alleged perpetrator.
  - 2. Notify the Shift Leader.
  - 3. Refer to the PREA Checklist. \*\*Note: Life threatening injuries call 911\*\*
  - 4. Notify the Detention Facility Manager/PREA Coordinator.
  - 5. Notify County Dispatch
  - 6. Complete JJIS Incident Report before leaving the detention facility.