



**OFFICE OF REFUGEE RESETTLEMENT
PREVENTION OF SEXUAL ABUSE
COMPLIANCE AUDIT TOOL**

**ICF PREAUDIT QUESTIONNAIRE
AND
REQUESTED DOCUMENTATION
CHECKLIST**

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13) STATEMENT OF PUBLIC BURDEN: The purpose of this information collection is to allow ORR contractor auditors to collect information and supporting documents related to the overall functioning and oversight of the care provider program as part of the preaudit process for. Audits are required in the Interim Final Rule on Standards to Prevent, Detect, and Respond to Sexual Abuse and Sexual Harassment Involving Unaccompanied Children (45 CFR Part L). Public reporting burden for this collection of information is estimated to average 4 hours per response for the care provider and 3 hours per response for the contractor performing the audit, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information. This is a mandatory collection of information (Homeland Security Act, 6 U.S.C. 279). An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information subject to the requirements of the Paperwork Reduction Act of 1995, unless it displays a currently valid OMB control number. If you have any comments on this collection of information please contact UCPolicy@acf.hhs.gov.

PREAUDIT QUESTIONNAIRE

Preaudit Questionnaire Information				
Completed by:				
Date completed:				
Date revised (if relevant):				
Care Provider Information				
Name of Care Provider:	Governing Authority or Parent Facility (if applicable):			
Physical Address:	City, State, Zip:	Telephone:		
Mailing Address:	City, State, Zip:			
The Facility is:	<input type="checkbox"/> Therapeutic Group Home <input type="checkbox"/> Residential Treatment Center <input type="checkbox"/> Shelter	<input type="checkbox"/> Transitional Foster Care <input type="checkbox"/> Staff Secure <input type="checkbox"/> Therapeutic Staff Secure		
State Licensing Contact Information (if applicable):	Email:		Phone:	
Care Provider Program Director				
Name:				
Email:		Telephone:		

Preaudit Questionnaire Information

PSA Compliance Manager

Name:	Title:
Email:	Telephone:
PSA Compliance Manager reports to:	
Date of the last facility PSA audit (if applicable):	

Care Provider Characteristics

Licensed facility capacity:	
Age and gender facility is licensed to house:	
If exceptions to licensing capacity and/or age or gender served has been sought, please describe and provide relevant licensing documentation:	
Current population of facility:	
Number of unaccompanied children admitted to care provider during the past 12 months:	
Number of unaccompanied children admitted to care provider during the past 12 months whose length of stay was 45 days or more:	
Average daily population for the past 12 months:	
Age range of population:	

Preaudit Questionnaire Information

Average length of stay:	
Number of staff currently employed by the facility who may have contact with unaccompanied children:	
Number of staff hired during the past 12 months who may have contact with unaccompanied children:	
Number of contractors in the past 12 months for services who may have contact with unaccompanied children:	
Number of volunteers in the past 12 months who may have contact with unaccompanied children:	
Physical Plant	
Number of buildings:	
Number of housing units (where children sleep):	
Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months? Or since the date of the last audit?	<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe and provide date of installation or update:

Preaudit Questionnaire Information

Please provide a description of the facility video monitoring system, electronic surveillance system, or other monitoring technology (e.g., cameras, etc.):

Medical and Mental Health and Forensic Medical Exams

Are medical services provided onsite?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, describe how and where services are provided and who provides medical services:	
Are mental health services provided onsite?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If no, describe how and where services are provided and who provides mental health services:	
Where are sexual assault forensic medical exams provided? Select all that apply:	<input type="checkbox"/> Onsite <input type="checkbox"/> Local hospital/clinic <input type="checkbox"/> Rape crisis center <input type="checkbox"/> Other (please name and describe):

REQUESTED DOCUMENTATION CHECKLIST

Policies/Procedures/Other Documents Background Information		
	Preaudit	Onsite Audit
	<p>Please provide the documents listed under the Preaudit column when returning the questionnaire via the link provided in the facility notice letter.</p>	
	<input type="checkbox"/> Schematic (layout) of facility	<input type="checkbox"/> A list of all current and former employees who have contact with children that includes their title, assignment, shift, and dates of employment for the last 12 months
	<input type="checkbox"/> Current agency organizational chart	<input type="checkbox"/> A list of unaccompanied children by housing area and a list of unaccompanied children alphabetically
	<input type="checkbox"/> If possible, access to facility personnel records	<input type="checkbox"/> A list of all current and former contractors and volunteers with dates of service for the last 12 months
	<input type="checkbox"/> If possible, access to facility training records	

Policies/Procedures/Other Documents
Subpart B – Prevention Planning
§411.11–§411.17

Standard	Preaudit	Onsite Audit
<p>§411.11 – Zero tolerance of sexual abuse and sexual harassment, ORR’s Prevention of Sexual Abuse Coordinator (ORR’s Preventing Sexual Assault Coordinator)</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Agency policy mandating zero tolerance of all forms of sexual abuse and sexual harassment in facilities operated directly or under contract <input type="checkbox"/> Implementation plan: Facility policy outlining how the facility will implement the agency’s zero-tolerance approach to preventing, detecting, and responding to sexual abuse and sexual harassment <input type="checkbox"/> Employed or designated Office of Refugee Resettlement (ORR) approved Prevention of Sexual Abuse (PSA) Compliance Manager with sufficient time and authority to develop, implement, and oversee the care provider facility’s efforts to comply with this provision and serve as a point of contact for ORR’s PSA Coordinator 	<ul style="list-style-type: none"> <input type="checkbox"/> Not applicable (NA)
<p>§411.13 – Unaccompanied Children (UC) Supervision and monitoring</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Facility’s policy and/or process for ensuring adequate level of staffing and monitoring of UC <input type="checkbox"/> Sample of records or documentation of unannounced rounds conducted in the last 12 months 	<ul style="list-style-type: none"> <input type="checkbox"/> Placement of video monitoring cameras <input type="checkbox"/> Records of unannounced rounds (day and night shifts) to identify and deter sexual abuse and sexual harassment conducted in the last 12 months
<p>§411.14 – Limits to cross-gender viewing and searches</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Facility policy and/or process for ensuring compliance with standard 411.14 – limits to cross-gender viewing and searches <input type="checkbox"/> If facility prohibits pat-down searches, policy stating as such <input type="checkbox"/> Documentation of instances where same gender staff assisted viewing children under age 6 needing assistance; a UC with special needs or a UC requesting or requiring assistance when such viewing is incidental to routine room checks, in connection with medical examination, or in connection to a monitored bowel movement 	<ul style="list-style-type: none"> <input type="checkbox"/> Staff training records of youth care workers for past 12 months <input type="checkbox"/> Documentation and Sexual Abuse Significant Incident Reports (SA/SIRs) of pat-down searches in the past 12 months

Policies/Procedures/Other Documents
Subpart B – Prevention Planning
§411.11–§411.17

Standard	Preaudit	Onsite Audit
	<ul style="list-style-type: none"> <input type="checkbox"/> Documentation of exigent circumstances requiring deviance from 411.14 and reporting documentation to ORR <input type="checkbox"/> Facility training curriculum and process for training youth care worker staff specific to pat-down searches and searches of cross-gender, transgender, and intersex UCs 	
§411.15 – Accommodating UCs with disabilities and UCs who are limited English proficient (LEP)	<ul style="list-style-type: none"> <input type="checkbox"/> Facility steps/processes to accommodate UCs with disabilities to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment <input type="checkbox"/> Facility steps/processes to accommodate UCs with limited English proficiency to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment <input type="checkbox"/> If applicable, written materials used for effective communication about the prevention of sexual abuse, sexual harassment, and other inappropriate sexual behavior with UCs with disabilities, intellectual disabilities, limited reading skills, or who are blind or have low vision 	<ul style="list-style-type: none"> <input type="checkbox"/> Documentation of circumstances in which UC interpreters, readers, and other UC assistants were used
§411.16 – Hiring and promotion decisions	<ul style="list-style-type: none"> <input type="checkbox"/> Facility policies/decision making on hiring of employees and contractors and promotion of employees, including policies governing criminal background checks as required per ORR Policy 4.3.3 <input type="checkbox"/> In the past 12 months, the number of persons hired who may have contact with UCs who have had criminal background checks 	<p>PLEASE NOTE: If able to access records during Preaudit Phase, this will be considered a part of the Preaudit Phase work. If records are not accessible during Preaudit Phase, reviews will be completed during the Onsite Phase.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Files of persons hired or promoted in the last 12 months to determine whether proper criminal-record background checks have been conducted, questions regarding past conduct were asked and answered, and efforts to contact all prior institutional employers of an applicant to obtain information

**Policies/Procedures/Other Documents
Subpart B – Prevention Planning
§411.11–§411.17**

Standard	Preaudit	Onsite Audit
	<ul style="list-style-type: none"> <input type="checkbox"/> In the past 12 months, the number of new contracts for services involving people who may have contact with UCs who have had criminal background checks <input type="checkbox"/> In the past 12 months, the number of new volunteers who may have contact with UCs who have had criminal background checks 	<p>on substantiated allegations of sexual abuse or sexual harassment or any resignation during a pending investigation of alleged sexual abuse or sexual harassment</p> <ul style="list-style-type: none"> <input type="checkbox"/> Files of personnel hired in the past 12 months to determine that the agency has completed checks consistent with 411.16 <input type="checkbox"/> Records of background checks of contractors hired in the past 12 months who might have contact with UCs <input type="checkbox"/> Records of background checks of new volunteers hired in the past 12 months who might have contact with UCs <input type="checkbox"/> Documentation of background record checks of current employees at five-year intervals when applicable <input type="checkbox"/> Copies of performance evaluations of staff within the last 12 months
<p>§411.17 – Upgrades to facilities and technology</p>	<ul style="list-style-type: none"> <input type="checkbox"/> NA 	<ul style="list-style-type: none"> <input type="checkbox"/> Documentation of the facility’s consideration/planning in design, acquisition, expansion, or modification of new or existing facility <input type="checkbox"/> Minutes from meetings and/or other documentation referencing the installation or update of monitoring technology

**Policies/Procedures/Other Documents
Subpart C – Responsive Planning
§411.21–§411.22**

Standard	Preaudit	Onsite Audit
<p>§411.21 – Victim advocacy, access to counselors, and forensic medical examinations</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Facility policy/procedures for the best use of available crisis intervention and counseling community resources and services <input type="checkbox"/> Facility policy/procedures for the availability of rape crisis center victim advocates and, if not available, the facility process and procedures for use of facility staff providing these services <input type="checkbox"/> Facility policy/procedures associated with conducting forensic medical examinations on UCs, including the presence of the child’s outside or internal victim advocate if requested by child <input type="checkbox"/> When Sexual Assault Nurse Examiners (SANEs) or Sexual Assault Forensic Examiners (SAFEs) are not available, process/procedures addressing a qualified medical practitioner performing forensic medical examinations <input type="checkbox"/> List of community crisis intervention and counseling resources and services available to UCs <input type="checkbox"/> Documentation of agreements with rape crisis center for services and/or documentation of efforts 	<ul style="list-style-type: none"> <input type="checkbox"/> Log indicating use of program’s licensed clinician to provide crisis intervention and trauma services for UC if no rape crisis available or due to UC preference <input type="checkbox"/> Documentation of efforts to provide forensic examinations by SAFEs or SANEs, if applicable <input type="checkbox"/> Documentation to corroborate that all victims of sexual abuse have access to forensic medical examinations <input type="checkbox"/> Log or other recordkeeping of UCs having forensic medical examinations and name of person who conducted examination (SAFE, SANE, medical practitioner, etc.), if applicable <input type="checkbox"/> Log or other recordkeeping of UCs requesting the presence of outside or internal victim advocate <input type="checkbox"/> The number of forensic medical exams conducted during the past 12 months, the number performed by SANE/SAFEs, and the number performed by qualified medical practitioner
<p>§411.22 – Policies to ensure investigation of allegations and appropriate agency oversight</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Policies and/or process for referral of investigations of allegations of sexual abuse or sexual harassment and reporting of allegations to Department of Justice and ORR, and facility requirement to cooperate with investigations <input type="checkbox"/> Policies and/or procedures governing record retention of documentation of all reports and referrals of allegations of sexual abuse and sexual harassment 	<ul style="list-style-type: none"> <input type="checkbox"/> Documents of reports of sexual abuse, sexual harassment, inappropriate sexual behavior, and code of conduct violations, and documentation of investigations including full investigative report(s) with findings <input type="checkbox"/> Documentation of referrals of allegations of sexual abuse and sexual harassment

Policies/Procedures/Other Documents Subpart C – Responsive Planning §411.21–§411.22		
Standard	Preaudit	Onsite Audit
	<input type="checkbox"/> Copy of written memorandum of understanding or other agreement specific to investigations of sexual abuse or sexual harassment with the law enforcement agency, designated state or local child protective services, and/or state or local licensing agencies responsible for conducting sexual abuse and sexual harassment investigations (If no written memorandum of understanding or agreement, documentation indicating attempts to secure memorandum of understanding or agreement)	

Policies/Procedures/Other Documents Subpart D – Training and Education §411.31 – §411.34		
Standard	Preaudit	Onsite Audit
§411.31 – Care provider facility staff training	<input type="checkbox"/> Facility training policy and/or procedures <input type="checkbox"/> Staff training curriculum with required elements under §411.31 (a) 1–13, which includes: <ol style="list-style-type: none"> 1. ORR and the care provider facility’s zero-tolerance policies for all forms of sexual abuse and sexual harassment 2. Right of UCs and staff to be free from sexual abuse and sexual harassment and from retaliation for reporting abuse and harassment 3. Definitions and examples of prohibited and illegal sexual behavior 4. Recognition of situations where sexual abuse or sexual harassment may occur 5. Recognition of physical, behavioral, and emotional signs of sexual abuse and methods 	<p>PLEASE NOTE: If able to access records during Preaudit Phase, this will be considered a part of the Preaudit Phase work. If records are not accessible during Preaudit Phase, reviews will be completed during the Onsite Phase.</p> <input type="checkbox"/> Sample of training records for compliance with standards and ORR policy guide 4.3.6

**Policies/Procedures/Other Documents
Subpart D – Training and Education
§411.31 – §411.34**

Standard	Preaudit	Onsite Audit
	<p>of preventing and responding to such occurrences</p> <ol style="list-style-type: none"> 6. How to avoid inappropriate relationships with UCs 7. How to communicate effectively and professionally with UCs, including UCs who are lesbian, gay, bisexual, transgender, questioning, or intersex (LGBTQI+) 8. Procedures for reporting knowledge or suspicion of sexual abuse and sexual harassment as well as how to comply with relevant laws related to mandatory reporting 9. The requirement to limit reporting of sexual abuse and sexual harassment to personnel with a need to know in order to make decisions concerning the victim's welfare and for law enforcement, investigative, or prosecutorial purposes 10. Cultural sensitivity toward diverse understandings of acceptable and unacceptable sexual behavior and appropriate terms and concepts to use when discussing sex, sexual abuse, and sexual harassment with a culturally diverse population 11. Sensitivity and awareness regarding past trauma UCs may have experienced 12. Knowledge of all existing resources for UCs, both inside and outside the care provider facility, that provide treatment and counseling for trauma and legal advocacy for victims 13. General cultural competency and sensitivity to the culture and age of UCs 14. Proper procedures for conducting professional pat-down searches, including cross-gender pat-down searches and searches of 	

**Policies/Procedures/Other Documents
Subpart D – Training and Education
§411.31 – §411.34**

Standard	Preaudit	Onsite Audit
	<p>transgender and intersex UCs in a respectful and least-intrusive manner (If facility has elected to prohibit pat-down searches, provide a copy of the policy stating such)</p> <ul style="list-style-type: none"> <input type="checkbox"/> Staff training curriculum for refresher training on the above topics <input type="checkbox"/> Staff training curriculum for 6-month refresher training on topic of avoiding inappropriate relationships and reporting sexual abuse and sexual harassment 	
§411.32 – Volunteer and contractor training	<ul style="list-style-type: none"> <input type="checkbox"/> Training curriculum for volunteers and contractors who have contact with UCs <input type="checkbox"/> Sample documentation of information provided (e.g., handbook or information sheet) 	<p>PLEASE NOTE: If able to access records during Preaudit Phase, this will be considered a part of the Preaudit Phase work. If records are not accessible during Preaudit Phase, reviews will be completed during the Onsite Phase.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Training records for volunteers and contractors who have contact with UCs
§411.33 – UC education	<ul style="list-style-type: none"> <input type="checkbox"/> Facility intake process for ensuring UCs are notified and informed of the facility's zero-tolerance policies and procedures <input type="checkbox"/> Sample documentation of information provided to UCs (e.g., handbook or information sheet) <input type="checkbox"/> Facility policy and/or process for ensuring notification, orientation, and instructions are in formats accessible to UCs, are age and culturally appropriate, and are separate in time and manner than information provided in their immigration case <input type="checkbox"/> Copy of required pamphlet in accordance with §411.15 (e) 	<p>PLEASE NOTE: If able to access records during Preaudit Phase, this will be considered a part of the Preaudit Phase work. If records are not accessible during Preaudit Phase, reviews will be completed during the Onsite Phase.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Intake records of UCs entering facility in past 12 months (spot check) <input type="checkbox"/> Log or other recordkeeping corroborating that those UCs received information required by the standard at intake (e.g., UC signature)

**Policies/Procedures/Other Documents
Subpart D – Training and Education
§411.31 – §411.34**

Standard	Preaudit	Onsite Audit
		<input type="checkbox"/> Education and informational materials (posters, UC handbook, etc.) in compliance with the standard (materials in multiple languages, if applicable) <input type="checkbox"/> Logs and/or documentation of refresher training of ORR education of UCs
§411.34 – Specialized training: Medical and mental healthcare staff	<input type="checkbox"/> Training curriculum for medical and mental healthcare staff (employed and contracted)	<p>PLEASE NOTE: If able to access records during Preaudit Phase this will be considered a part of the Preaudit Phase work. If records not accessible during Preaudit Phase, reviews will be completed during the Onsite Phase.</p> <input type="checkbox"/> Training records for employed and contracted medical and mental healthcare staff

Policies/Procedures/Other Documents
Subpart E – Assessment for Risk of Sexual Victimization and Abusiveness
§411.41–§411.42

Standard	Preaudit	Onsite Audit
<p>§411.41- Assessment for risk of sexual victimization and abusiveness</p>	<ul style="list-style-type: none"> <input type="checkbox"/> Facility policy and/or process for completing screening of UCs and any specialized staff training specific to assessment of risk of sexual victimization and abusiveness <input type="checkbox"/> If specialized training noted above, copy of training <input type="checkbox"/> Facility policy and/or process for ensuring appropriate controls on the dissemination within the care provider facility of responses to questions asked pursuant to this standard to ensure sensitive information is not exploited to the UC's detriment by staff or other UCs <input type="checkbox"/> Copy of screening instrument used to determine risk of victimization or abusiveness (should note source of information indicated in instrument) 	<ul style="list-style-type: none"> <input type="checkbox"/> Sample of case record reviews for compliance with this standard <input type="checkbox"/> If specialized training noted, log of staff training and/or documentation to corroborate training attendance <input type="checkbox"/> Use of screening instrument, if one used (spot check) <input type="checkbox"/> Staff trained to talk to UCs to obtain information listed under this standard
<p>§411.42 – Use of assessment information</p>	<ul style="list-style-type: none"> <input type="checkbox"/> How the facility utilizes information obtained from the risk assessment under §411.11 to inform UC assignment to housing, education, recreation, and other activities and services <input type="checkbox"/> How assessments and housing assignments are made for transgender or intersex UCs <input type="checkbox"/> Facility policy and/or process/procedures regarding one-on-one supervision 	<ul style="list-style-type: none"> <input type="checkbox"/> Documentation of UCs with one-on-one supervision over the last 12 months <input type="checkbox"/> Average length of time a UC is under one-on-one supervision <input type="checkbox"/> Documentation of required daily visits from a medical practitioner or mental healthcare clinician for UCs with one-on-one supervision

Policies/Procedures/Other Documents
Subpart F – Reporting
§411.51 – §411.55

Standard	Preaudit	Onsite Audit
§411.51 – UC reporting	<ul style="list-style-type: none"> <input type="checkbox"/> UC reporting policies, procedures, and documents: <ul style="list-style-type: none"> <input type="checkbox"/> Policies, procedures, documents to identify different established procedures allowing for multiple internal ways for UCs to report per the standard <input type="checkbox"/> Policy providing ways for UCs to report abuse or harassment to their consular official, ORR’s headquarters, and an outside entity <input type="checkbox"/> Policy and procedures for UCs to access telephones with free, preprogrammed numbers for ORR headquarters and the outside entity designated under §411.51 <input type="checkbox"/> Policy providing at least one way for UCs to report abuse and harassment to a public or private entity or office that is not part of the agency and ability to receive and immediately forward UC reports of sexual abuse and sexual harassment to ORR officials, allowing UCs to remain anonymous upon request <input type="checkbox"/> Documentation of memorandum of understanding or other agreements with a public or private entity or office that is not part of the agency (If there is no memorandum of understanding [MOU] or agreement, documentation showing attempts to secure agreement) <input type="checkbox"/> Policy and/or procedures for staff to accept reports made verbally, in writing, anonymously, and from third parties <input type="checkbox"/> Documentation of verbal reports of sexual abuse and sexual harassment <input type="checkbox"/> Policy and documentation (e.g., staff handbooks) outlining procedures for staff to privately report sexual abuse and sexual harassment of UCs 	<ul style="list-style-type: none"> <input type="checkbox"/> Check for location of phones, how many are available for this use, do the phones work, are they accessible without staff assistance, are phones placed where the UC are afforded some level of privacy so other children and staff cannot easily listen to telephone conversations, etc. <input type="checkbox"/> Facility options available to UCs for reporting

Policies/Procedures/Other Documents
Subpart F – Reporting
§411.51 – §411.55

Standard	Preaudit	Onsite Audit
§411.52 – Grievances	<ul style="list-style-type: none"> <input type="checkbox"/> Policies and procedures for identifying and handling time sensitive grievances involving an immediate threat to UC health, safety, or welfare related to sexual abuse and sexual harassment <input type="checkbox"/> Policies and procedures for reporting identified and time sensitive grievances involving an immediate threat to UC health, safety, or welfare related to sexual abuse and sexual harassment to ORR <input type="checkbox"/> Policies and procedures related to medical emergencies <input type="checkbox"/> Documentation of written grievance decisions in the past 12 months 	
§411.53 – UC access to outside confidential support services	<ul style="list-style-type: none"> <input type="checkbox"/> Memoranda of understanding or other agreements with community service providers or, if local providers are not available, with national organizations. If no agreements, documentation showing attempts to enter into agreements <input type="checkbox"/> Facility sexual abuse and sexual harassment prevention and intervention protocols including outside agencies <input type="checkbox"/> Policy and/or procedures making local and/or national organizations information (including contact information) available to assist UCs who are victims of sexual abuse and sexual harassment <input type="checkbox"/> Policy and/or procedures enabling reasonable communication between UCs and local and/or national organizations available to assist UCs who are victims of sexual abuse and sexual harassment 	<ul style="list-style-type: none"> <input type="checkbox"/> MOUs or other agreements with national organizations
§411.55 – UC access to attorneys or other	<ul style="list-style-type: none"> <input type="checkbox"/> Policy and/or procedures governing confidential access to a UC’s attorney or other legal 	<ul style="list-style-type: none"> <input type="checkbox"/> Location/rooms/offices designated for attorney-client visitation to ensure UCs are afforded privacy with legal service provider (LSP)/attorney during visitation

Policies/Procedures/Other Documents Subpart F – Reporting §411.51 – §411.55		
Standard	Preaudit	Onsite Audit
legal representatives and families	<p>representative in accordance with care provider’s attorney-client visitation rules</p> <ul style="list-style-type: none"> <input type="checkbox"/> Copy of care provider’s visitation rules and attorney-client visitation rules <input type="checkbox"/> Documentation indicating ORR approval of care provider attorney-client visitation rules <input type="checkbox"/> Policies and/or procedures governing a UC’s access to their families, including legal guardians 	

Policies/Procedures/Other Documents Subpart G – Official Response Following a UC Report §411.61–§411.68		
Standard	Preaudit	Onsite Audit
§411.61 – Staff reporting duties	<ul style="list-style-type: none"> <input type="checkbox"/> Relevant approved policy (or policies) governing: (1) the reporting of any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred while a UC was in ORR care; (2) retaliation against UCs or staff who reported incident; (3) any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation; (4) the reporting by the facility regarding allegations of sexual abuse and sexual harassment to the alleged victim’s parents or legal guardians; (5) victim not consenting to disclosure or the UC is 14 years of age or older and ORR has determined the victim is able to make an independent decision <input type="checkbox"/> Policy governing sharing of allegations of sexual abuse or sexual harassment to the UC’s attorney of record 	<ul style="list-style-type: none"> <input type="checkbox"/> Documentation of notification to the alleged victim’s parents or legal guardians <input type="checkbox"/> Documentation when notification to the alleged victim’s parents or legal guardians was not safe <input type="checkbox"/> Documentation of notification to the UC’s attorney of record within 48 hours

Policies/Procedures/Other Documents
Subpart G – Official Response Following a UC Report
§411.61–§411.68

Standard	Preaudit	Onsite Audit
§411.62 – Protection duties	<input type="checkbox"/> Facility policy and/or process to ensure the protection of UC if a care provider facility employee, volunteer, or contractor reasonably believes that a UC is subject to substantial risk of imminent sexual abuse or sexual harassment	
§411.63 – Reporting to other care provider facilities and DHS	<input type="checkbox"/> How the facility reports allegations of sexual abuse or harassment of UCs while located at another care provider facility and the referral for investigation process <input type="checkbox"/> Documentation of facility notification to ORR after receiving the allegation of UC abuse while at another care provider facility (immediately but no later than 24 hours) <input type="checkbox"/> Documentation of facility notification to ORR after receiving an allegation of UC abuse while in DHS custody (immediately but no later than 24 hours)	<input type="checkbox"/> Documentation of allegations that a UC was sexually abused or sexually harassed while at another care provider facility <input type="checkbox"/> Documentation of allegations that a UC was sexually abused or sexually harassed while in DHS custody <input type="checkbox"/> Additional documentation of notifications of abuse while placed at another care facility to verify they occurred no later than 24 hours from receiving allegation <input type="checkbox"/> Additional documentation of notifications of abuse while in DHS custody to verify they occurred no later than 24 hours from receiving allegation <input type="checkbox"/> Documentation of allegations from other facilities and documentation of response
§411.64 – Responder duties	<input type="checkbox"/> Facility staff first-responder duties and process <input type="checkbox"/> Facility policy and/or process for collecting physical evidence <input type="checkbox"/> In the past 12 months, the number of allegations that a UC was sexually abused, sexually harassed, or subjected to inappropriate sexual behaviors	<input type="checkbox"/> Documentation of response to allegations
§411.65 – Coordinated response	<input type="checkbox"/> Facility’s ORR-approved institutional plan to coordinate actions taken in response to an incident of sexual abuse by staff first responders, medical and mental health practitioners, outside investigators, victim advocates, and care provider facility leadership	<input type="checkbox"/> If the agency is not permitted by law to inform a receiving facility per the standard, a copy of that law <input type="checkbox"/> Log or other documentation of victim transfers from the care provider facility because of an allegation of sexual abuse <input type="checkbox"/> Verification of ORR’s approval

Policies/Procedures/Other Documents
Subpart G – Official Response Following a UC Report
§411.61–§411.68

Standard	Preaudit	Onsite Audit
§411.66 – Protection of UCs from contact with alleged abusers	<input type="checkbox"/> Facility policy and/or process directing the suspension of ORR and care provider facility staff, contractors, and volunteers suspected of perpetrating sexual abuse or sexual harassment from all duties involving or allowing access to UCs pending the outcome of the investigation	<input type="checkbox"/> Log of staff, contractor, or volunteer suspected sexual abuse or sexual harassment, including date of allegation and date suspended
§411.67 – Protection against retaliation	<input type="checkbox"/> Facility policy and/or procedures or process protecting all UCs, staff, contractors, or volunteers who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other UCs, staff, contractors, or volunteers (including policies on the monitoring of UC, staff, contractors, or volunteers following a report and agency response to suspected retaliation)	<input type="checkbox"/> Documentation of any protective measures taken for UCs, staff, contractors, or volunteers who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations <input type="checkbox"/> Documentation of any monitoring efforts for UCs, staff, contractors, or volunteers <input type="checkbox"/> Documentation of reports of retaliation and agency response
§411.68 – Post-allegation protection	<input type="checkbox"/> Facility policy and/or process for assignment of UC victims of sexual abuse and sexual harassment to the least-restrictive housing option to keep the UC safe and secure, including policy (or policies) employing multiple protection measures and assessment for one-on-one supervision <input type="checkbox"/> Number of UC victims placed on one-on-one supervision for protection in the last 12 months by age and gender <input type="checkbox"/> Average length of time for facility to complete a reassessment	<input type="checkbox"/> Documentation of placement changes of UC victims of sexual abuse and sexual harassment

**Policies/Procedures/Other Documents
Subpart I – Intervention and Discipline
§411.81–§411.83**

Standard	Preaudit	Onsite Audit
§411.81- Disciplinary sanctions for staff	<input type="checkbox"/> Facility policy and/or process regarding violations of agency sexual abuse and sexual harassment policies	<input type="checkbox"/> Sample records of termination, resignations, or other sanctions against staff for violating agency sexual abuse and sexual harassment policies from the past 12 months <input type="checkbox"/> Records of disciplinary actions taken against staff for violations of the agency sexual abuse and sexual harassment policies from the past 12 months <input type="checkbox"/> Reports to law enforcement and relevant state or local licensing bodies for violations of agency sexual abuse and sexual harassment policies
§411.82 – Corrective action for contractors and volunteers	<input type="checkbox"/> Facility policy and/or process for requiring that any contractor or volunteer with a substantiated allegation of sexual abuse or sexual harassment is prohibited from working or volunteering at the care provider facility <input type="checkbox"/> Documentation of remedial measures taken to prohibit further contact with UCs by the contractors or volunteers who have not engaged in sexual abuse or sexual harassment but violated other provisions within the standard, ORR, and care provider sexual abuse and sexual harassment policies and procedures	<input type="checkbox"/> Documentation of referrals to law enforcement and/or relevant licensing bodies <input type="checkbox"/> Reports of sexual abuse of UCs by contractors or volunteers
§411.83 – Interventions for UCs who engage in sexual abuse	<input type="checkbox"/> How the facility ensures appropriate UC interventions are received if minors engage in UC-on-UC sexual abuse <input type="checkbox"/> Facility policy and/or procedures for referring incidents of UC-on-UC abuse to appropriate investigating authorities	<input type="checkbox"/> Documentation of UC-on-UC abuse incidents and facility response <input type="checkbox"/> Interventions facilitated by external mental health providers (look at referrals) or could trigger a transfer to other facility (documentation of transfers)

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Standard	Preaudit	Onsite Audit
§411.91 – Medical and mental health assessments; history of sexual abuse	<input type="checkbox"/> How the facility ensures the immediate referral to a qualified medical or mental health practitioner of a UC who has experienced prior sexual victimization or perpetrated sexual abuse <input type="checkbox"/> Facility policy and/or process for UC victims of sexual abuse to access treatment services	<input type="checkbox"/> Documentation of referrals to a qualified medical or mental health practitioner of UCs who have experienced prior sexual victimization or perpetrated sexual abuse <input type="checkbox"/> Documentation of health evaluation no later than 72 hours after the referral for medical follow-up is initiated <input type="checkbox"/> Documentation of mental health evaluation no later than 72 hours after the referral for mental health follow-up is initiated
§411.92 – Access to emergency medical and mental health services	<input type="checkbox"/> Policy (or policies) regarding access to treatment service by UC victims of sexual abuse	<input type="checkbox"/> Sample of secondary materials (e.g., form, log) documenting access to required services per the standard
§411.93 – Ongoing medical and mental healthcare for sexual abuse and sexual harassment victims and abusers	<input type="checkbox"/> Facility policy and/or procedures for the provision of ongoing medical and mental health evaluations and treatment to all UCs victimized by sexual abuse or sexual harassment while in ORR care and custody <input type="checkbox"/> Facility policy and/or procedures for the provision of ongoing medical and mental health services to all UCs victimized by sexual abuse or sexual harassment while in ORR care and custody <input type="checkbox"/> Facility policy and/or procedures ensuring female UC victims of sexual abuse by a male abuser while in ORR care and custody are offered pregnancy tests, as necessary <input type="checkbox"/> Facility policy and/or procedures regarding positive pregnancy tests of female UC victims of sexual abuse by a male abuser while in ORR care and custody <input type="checkbox"/> Facility policy and/or procedures ensuring UC victims of sexual abuse that occurred in ORR care	<input type="checkbox"/> Log of UCs victimized by sexual abuse or sexual harassment while in ORR care and custody <input type="checkbox"/> Documentation corroborating receipt of medical and mental health evaluations and ongoing treatment <input type="checkbox"/> Documentation corroborating offer of pregnancy tests to female UC victims of sexual abuse by a male abuser while in ORR care and custody <input type="checkbox"/> Documentation corroborating offer of sexually transmitted infection (STI) testing to UC victims <input type="checkbox"/> Documentation of mental health evaluations within 72 hours of learning about a UC-on-UC abuser <input type="checkbox"/> Additional medical/mental health secondary forms/logs describing access to services <input type="checkbox"/> Sample of secondary materials (e.g., form, log, handout) documenting access to required services per the standard

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Standard	Preaudit	Onsite Audit
	<p>and custody are offered tests for sexually transmitted infections</p> <ul style="list-style-type: none"> <input type="checkbox"/> Facility policy and/or procedures ensuring UC victims are provided access to treatment services regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident <input type="checkbox"/> Facility policy and/or procedures regarding conducting a mental health evaluation of all known UC-on-UC abusers within 72 hours of learning about such abuse and/or such abuse history and offering of treatment deemed appropriate by mental health practitioners 	