

Sexual Abuse Incident Review

The Facility Sexual Abuse Incident Review Team shall meet monthly and conduct a sexual abuse incident review at the conclusion of every facility or OIG sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. The review shall normally occur within 30 days of the conclusion of the investigation (PREA 115.86; 115.286)

Date of Review: _____ Facility: _____

OIG Case #: _____ Unsubstantiated Substantiated

Type of Victimization:

Inmate on Inmate:

- Inmate on Inmate - Nonconsensual Sexual Acts Inmate on Inmate - Abusive Sexual Acts
- Inmate on Inmate - Sexual Harassment

Staff on Inmate:

- Staff on Inmate - Staff Sexual Misconduct Staff on Inmate - Staff Sexual Harassment

Review Team Members:

Name:

Title:

1. Was the area in the facility where the incident allegedly occurred assessed to determine whether physical barriers or blind spots in the area may have enabled abuse?

Yes No N/A

If yes, what barriers or blind spots were identified?

2. Was the incident or allegation motivated by any of the following? *Check all that apply:*

Race Ethnicity Gender Identity; Lesbian Gay Bisexual Transgender

Intersex Identification Status Perceived Status Gang Affiliation

Motivated or otherwise caused by other group dynamics at the facility (please explain).

3. Staffing levels in the area were assessed during different shifts and were found to be adequate?

Yes No N/A

If no, please explain:

4. Should monitoring technology be deployed or augmented to supplement supervision by staff?

Yes No N/A

If yes, please explain:

5. Does the committee review of the allegations or investigation indicate a need to change policy or practice to better prevent, detect, or respond to sexual abuse?

Yes No N/A

If yes, please indicate recommended changes to policy or practice:

6. Facility Head Review:

I have reviewed the Sexual Abuse Incident review committee's recommendations and as a result the following changes or improvements will be implemented.

Please include timeframe for implementation:

7. The following recommendations of the Sexual Abuse Incident review committee are not recommended for implementation or changes (please explain).

Signature of Facility Head

Date

(R 4/16)