

PREA AUDIT: AUDITOR'S SUMMARY REPORT

COMMUNITY CONFINEMENT FACILITIES



Name of facility:		Mary Magdalene House	
Physical address:		405 Clinton Avenue, Bridgeport, CT 06605	
Date report submitted:		19 June 2015	
Auditor Information			
Address:		123 Farmington Ave., Suite 117, Bristol, CT 06010-4200	
Email:		wcsparks@sparkssecurityct.com	
Telephone number:		(860) 841-0416	
Date of facility visit:		18 May 2015	
Facility Information			
Facility mailing address: (if different from above)		PO 1399, Bridgeport, CT 06601-1399	
Telephone number:		(203) 334-0030	
The facility is:	<input type="checkbox"/> Military	<input type="checkbox"/> County	<input type="checkbox"/> Federal
	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
Facility Type:	<input type="checkbox"/> Community treatment center	<input type="checkbox"/> Community based confinement facility	<input type="checkbox"/> Other:
	<input type="checkbox"/> Halfway house		
	<input type="checkbox"/> Alcohol or drug rehabilitation center	<input type="checkbox"/> Mental health facility	
Name of Facility Head:		Title:	
Email address:		Telephone number:	
Name of PREA Compliance Manager (if applicable):		Title:	
Email address:		Telephone number:	
Agency Information			
Name of agency:			
Governing authority or parent agency: (if applicable)			
Physical address:			
Mailing address: (if different from above)			
Telephone number:			
Agency Chief Executive Officer			
Name:		Title:	

Email address:	Telephone number:	
Agency-Wide PREA Coordinator		
Name:	Title:	
Email address:	Telephone number:	

AUDIT FINDINGS

NARRATIVE: A PREA Audit was conducted at the Isaiah 61:1 Inc., Mary Magdalene House, Bridgeport, CT on 18, 19 May, 2015. The audit team consisted of certified PREA Auditor W.C. Sparks (certified by the U.S. Department of Justice to conduct PREA Audits) and one assistant, Todd Sturgeon from Sparks Security LLC. Interviewed was Ed Davies in the capacity of Agency Head designee, PREA Compliance Manager, PREA Compliance Coordinator, Incident Review Team member, Investigator, and Retaliation Manager. Ms. Mary Sandor was interviewed in her capacity as the Program Director. During the six weeks prior to the audit, a comprehensive review was conducted of both Agency and Facility policy and procedures.

On 18 May, 2015, the audit team arrived at the Mary Magdalene House and began the day meeting with Executive Director Ed Davies. Ed Davies lead a tour of the Mary Magdalene House. A Mary Magdalene House inmate listing was furnished. There were no inmates identifying as transgender, intersex, gay, bisexual, not English proficient or disabled or that had reported sexual abuse. The audit team interviewed random inmates from within the house. In all, seven inmates were identified and were interviewed. The audit team also interviewed three random staff. Specialized staff interviewed on-site included those noted above, three staff that screen/reassess and three Intake staff. The facility does not employ medical or mental health staff, utilizing those services from the community. Mary Magdalene House provided the audit team with two private locations to conduct interviews with both staff and inmates. Interviews were conducted during the Day. The staff interviewed was both articulate and knowledgeable on the subject of their duties and specifically those aspects of PREA that were of potential impact to their positions. The overall impression was one of a well-trained work force.

DESCRIPTION OF FACILITY CHARACTERISTICS:



Mary Magdalene House, administered by Isaiah 61:1 Inc. in conjunction with the Connecticut Department of Correction (DOC), is a 15 bed program that serves Greater Bridgeport. The female residents there participate in a work-release program.

Potential residents of the program are referred by the DOC Community Services Division. These referrals must meet the eligibility criteria for community release as established by the DOC. The average length of stay at Mary Magdalene House is four months for individuals within six to eight months of discharge from sentence or release to Parole or Transitional Supervision. Admission is only by DOC referral.

The Program emphasizes work release. All participants must be able to work and pay weekly room and board. As required, contributions are also made to the State's Victim's Compensation Fund. In-house substance abuse monitoring is conducted routinely.

The Mary Magdalene House program of Isaiah 61:1 Inc. maintains a zero tolerance toward all forms of sexual assault/harassment. Any person who becomes aware of or suspects sexual assault/abuse or sexual harassment must report it immediately to the Program Manager or a higher authority. Any incident determined to be a criminal matter will be reported to law enforcement.

During the previous year, there were no sexual assault or harassment allegations.

SUMMARY OF AUDIT FINDINGS:

Number of standards exceeded:	0
Number of standards met:	36
Number of standards not met:	0
Number of standards not applicable	3

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

- 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)
- Standard is Not Applicable

The Mary Magdalene House maintains a zero tolerance policy toward all forms of sexual assault, abuse and harassment. Governing policy is "PREA Policy for Isaiah 61:1," Section 1 "Policy". This document defines what PREA is, the actions of the PREA Coordinator, staff responsibilities for monitoring, response plan, referrals and investigation protocols. The agency has designated 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 community confinement facilities. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115. 212 Contracting with other entities for the confinement of residents.

- 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)
- Standard is Not Applicable

The Mary Magdalene House does not contract with other entities for the confinement of their residents. The standard is determined to be "**Not Applicable**" to the Mary Magdalene House.

§ 115.213 Supervision and monitoring.

- 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)
- Standard is Not Applicable

The Mary Magdalene House has a "Staffing Plan." This documents staff deployment over all shifts for all staff. The staffing plan dictates that the program is not permitted to deviate from authorized deployment levels, even if it results in management having to fill vacant slots. Review of the physical areas and schedules of tours and inspections indicates that Mary Magdalene House is staffed to provide adequate supervision of the physical premises. The Agency is currently in the process of developing a video surveillance plan of the premises and acquiring sufficient visual surveillance equipment to accomplish that. The annual security review shows that the facility does perform annual reviews of the requisite areas mandated in the standard, this as evidenced by the "Senior Staff Meeting" dated 07 Oct 2014. There have been no deviations from the staffing plan. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115.215 Limits to cross-gender viewing and searches.

- 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)
- Standard is Not Applicable

The facility does not conduct cross-gender, or any other type of strip search, such searches being prohibited by policy. There have been no instances of a strip search ever occurring at the Mary Magdalene House. The facility does not conduct cross-gender pat searches, such searches being prohibited by policy. The facility does not accept male inmates. Training provided to all staff covers a policy prohibition against conducting any kind of search of a transgender or intersex inmate for the sole purpose of determining genital status. Training provided to all staff covers the methods and manner of how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. Training attendance was verified through inspection of training logs and sign-in sheets. Curriculum was contained in "Isaiah PREA Training" slide #25, power point presentation. Governing policy includes the "PREA Policy". Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115.216 Residents with disabilities and residents who are limited English proficient.

- 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)
- Standard is Not Applicable

Governing policy includes the "PREA Policy," that states that residents with disabilities and/or limited English proficiency will have every opportunity to participate in all aspects of sexual abuse and sexual harassment prevention, detection and response. That same policy prohibits the utilization of inmate interpreters, readers, or assistants in matters involving PREA issues. Interpretive services are available through the CT DOC and may be accessed via the assigned Parole Officer. Training lesson plan as contained in "Isaiah PREA Training" slides #48-50, power point presentation contains information pertaining to disabilities and limited English proficiency. It must be noted that, as a work release center, the Mary Magdalene House does not accept significantly disabled inmates. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115. 217 Hiring and promotion decisions.

- 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)
- Standard is Not Applicable

“PREA Policy”, Section 4e, “Hiring and Promotion Decisions” as well as the “Isaiah House Employee Interview PREA Questions” serve to show that the agency takes significant steps to ensure that they do not hire staff or contractors or promote anyone who may have contact with residents who has any history of having 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) or has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or has been civilly or administratively adjudicated to have engaged in the activity described above. It is also evident from review of these documents and interviews conducted with the Executive Director that the agency considers 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 residents. During the previous five months, two new staff were hired. Review of personnel files shows that the mandated checks were accomplished. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be “**Meets Standard**” for this standard.

§ 115.218 Upgrades to facilities and technologies.

- 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)
- Standard is Not Applicable

The Mary Magdalene House has not designed or acquired any new facility nor has it planned any substantial expansion or modification of existing facilities within the reporting period. The Mary Magdalene House has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology within the reporting period. "PREA Policy" section 4f, "Upgrade to Facilities and Technologies" mandates that, should the aforementioned activities occur; the agency will consider the effect of the design in protecting inmates from sexual abuse. They will also consider video equipment upgrades to enhance protection of inmates from sexual abuse. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard..

§ 115.221 Evidence protocol and forensic medical examinations.

- 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)
- Standard is Not Applicable

Relevant documentation reviewed includes a memorandum addressed to the Chief of Police, Bridgeport Police Department, Bridgeport, CT from the Mary Magdalene House informing them of the requirements of 115.221 as they pertain to evidence protocol and forensic medical examinations resulting from incidents alleged to occur in the Mary Magdalene House. Also included was a memorandum to the Bridgeport Hospital informing them of the requirements for SAFE/SANE treatment for any resident of Mary Magdalene House brought in following a sexual assault incident. Also reviewed was an MOU with a local Rape Crisis Center, Center for Family Justice, arranging for victim advocate services for those same victims. Mary Magdalene House does not accept youthful inmates as defined in PREA standards. SAFE/SANE examinations are conducted at Bridgeport Hospital, Bridgeport, CT at no cost to the victim. This is affirmed in the “PREA Policy,” section 5, A2-3, “Response Planning.” Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be “**Meets Standard**” for this standard..

§ 115.222 Policies to ensure referrals of allegations for investigations.

- 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)
- Standard is Not Applicable

Mary Magdalene House does maintain policies which mandate that all reported incidents of sexual assault/abuse will be immediately reported to Bridgeport Police Department for investigation. Said policy further states that the PREA Coordinator shall ensure any report of sexual assault/abuse or harassment, determined to be non-criminal by law enforcement will be administratively investigated. Governing policy is "PREA Policy" section 8, "Official Response Following Resident Reports". There have been no such incidents or allegations made during the reporting period, thus there is no sample documentation available for review. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115.231 Employee training.

- 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)
- Standard is Not Applicable

Mary Magdalene House trains all employees who may have contact with residents on all of the requisite points as mandated in the standard. Governing standard is "PREA Policy" Section 6, "Training and Education" which mandates that, during employee orientation as well as annually, employees are trained on PREA policies and obligations. Review of the lesson plan contained in the "Isaiah PREA Training" power point shows all required areas are covered. Sign-in sheets were reviewed showing that employees sign in and acknowledge the training received. Nine of the ten staff members have been trained, which represents ninety percent of the Mary Magdalene House work force. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115.232 Volunteer and contractor training.

- 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)
- Standard is Not Applicable

Mary Magdalene House has a policy in place to train contractors and volunteers in the form of, "PREA Policy", Section six, b, "Volunteer and Contractor Training". That same policy mandates that, absent this training, no contractor or volunteer will be permitted contact with inmates and will be escorted and supervised by staff at all times. There are ten volunteers. Those contractors entering the house are limited to maintenance functions and are always under constant escort by staff. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115.233 Resident education.

- 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)
- Standard is Not Applicable

The Mary Magdalene House ensures that inmates receive information explaining the requisite subjects during the intake process. Inmates receive information explaining the facility's zero- tolerance policy regarding sexual abuse and sexual harassment, how to report incidents or suspicions of sexual abuse or sexual harassment, their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents. Mary Magdalene House is not a Direct Intake facility, in that all inmates are transferred from other facilities and are subject to the intake procedures. All inmates receive an "Mary Magdalene House Handbook," which contains a "PREA Notice" both of which serve to provide the necessary education. The Mary Magdalene House also provides resident education in formats accessible to all residents, including those who are limited English proficient and deaf. Visually impaired or otherwise disabled inmates are not accepted to the program. During the previous twelve months, twenty two inmates were educated as a result of their admission to the program. Ten inmate files were reviewed and documentation of education was determined to be in order. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115.234 Specialized training: Investigations.

- 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)
- Standard is Not Applicable

Mary Magdalene House does not perform sexual abuse investigations other than an administrative overview after the matter has been investigated by the local police. All sexual abuse investigations are referred to the Bridgeport Police Department for investigation. Governing policy is "PREA Policy", section 6-d, "Specialized Training: Investigations" which states that any criminal act is referred and reported to local law enforcement and the Connecticut DOC (Parole). There have been no incidents of this type during the review period. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115.235 Specialized training: Medical and mental health care.

- 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)
- Standard is Not Applicable

The Mary Magdalene House has no Medical or Mental Health staff that work regularly, or even occasionally, in their facility. All medical and mental health services are obtained at local hospitals, clinics or through the CT Department of Correction. The standard is determined to be **“Not Applicable”** to the Mary Magdalene House.

§ 115.241 Screening for risk of victimization and abusiveness.

- 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)
- Standard is Not Applicable

The Mary Magdalene House subjects each arriving inmate to screening in order to ascertain potential risk of sexual abuse by other inmates or being sexually abusive toward other inmates. Intake screening occurs immediately upon arrival at the facility. The Case Manager accomplishes intake screening. The "Screening Checklist" form is utilized to ensure that all of the requisite factors are evaluated, including; whether the resident has a mental, physical, or developmental disability; the age of the resident; the physical build of the resident; whether the resident has previously been incarcerated; whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; the intake screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing residents for risk of being sexually abusive; whether the resident has a serious and/or lengthy history of violent offenses; whether the resident has previously experienced sexual victimization; and the resident's own perception of vulnerability. Per, "PREA Policy", section 6, "Training and Education", subsection f, "Screening for Risk of Victimization and Abusiveness" mandates that reassessment will occur after ten business days, but never later than thirty days after arrival. Reassessment will be accomplished by the Case Manager and noted in the inmate's progress notes. In the event of any new information or any incident related to an inmate's safety or risk of victimization the Case Manager will conduct the reassessment and immediately take appropriate action to ensure the inmate safety. This policy also states that inmates will not be disciplined for refusing to answer, or discuss information related to mental/physical disability, sexual orientation, previous victimization, or a resident's perception of vulnerability. All information gathered pursuant to intake screening and subsequent reassessment(s) is contained within the inmate file that is restricted to Case Managers and Program Director access. A random review of ten inmate files showed intake screening and reassessments were occurring as mandated by policy. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115.242 Use of screening information.

- 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)
- Standard is Not Applicable

Mary Magdalene House uses information from risk screening to assess housing, bed, work, education, and program assignments with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive. "PREA Policy", section 6, "Screening For Risk of Victimization and Abusiveness" states that upon obtaining any new information or incident related to safety or risk of victimization the Program Manager will conduct a reassessment and take immediate action to ensure the safety of a potential victim. The "PREA Policy" states that risk factors are considered in making housing and programming assignments. During screening, the intake package is reviewed for indicators and staff makes individualized determinations about how to ensure the safety of each resident. Mary Magdalene House does not accept male inmates. There were no transgender or intersex inmates at the facility. There were no dedicated facilities, units, or wings solely for housing inmates based on such identification or status. All showering is accomplished separately. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard..

§ 115.251 Resident reporting.

- 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)
- Standard is Not Applicable

The Mary Magdalene House provides multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Inmates can report directly to staff, including to the Program Director, via written memo, verbally, anonymously, or from a third party to any staff member. Inmates are permitted to retain cell phones and thus are able to contact facility administration, outside agencies, DOC hotlines or law enforcement agencies telephonically. Since these are private phones, they are not monitored. In short, there are no limitations placed on inmates or their ability to report issues of this sort. Reporting rights are outlined in the "Inmate Handbook," and the "PREA Notice". Staff is mandated to document any verbal reports immediately. Staff is permitted to report issues privately, as stated in the "Isaiah PREA Training" power point lesson plan, slide #51-54 and the "Employee Handbook". Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115.252 Exhaustion of administrative remedies.

- 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)
- Standard is Not Applicable

The Mary Magdalene House does not have administrative procedures to address resident grievances regarding sexual abuse. Facility Grievance policy states that any issues related to sexual abuse will be handled as administratively rather than as a Grievance. The standard is determined to be "**Not Applicable**" to the Mary Magdalene House.

§ 115.253 Resident access to outside confidential support services.

- 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)
- Standard is Not Applicable

Mary Magdalene House “PREA Policy” Section 6, “Training and Education” mandates that the facility shall provide inmates with contact information to outside victim advocates and support services. Since inmates retain personal cell phones, contact is made in as confidential a manner as possible. Since these are private cell phones, the extent to which such communications will be monitored is zero. Mary Magdalene House has entered into an MOU with Center for Family Justice and is also covered by the MOU between CONNSACS and the CT DOC to provide these services and maintains copies of those agreements. Inmates are not limited to that organization as they have the ability to contact anyone, anywhere. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be “**Meets Standard**” for this standard.

§ 115.254 Third-party reporting.

- 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)
- Standard is Not Applicable

The Mary Magdalene House has the PREA poster prominently displayed throughout the facility, in all inmate occupied areas, with contact numbers for the CT DOC PREA Hotline and the CSP PREA Hotline, CONNSACS, Center For Family Justice. Mary Magdalene House has established a method to receive third-party reports of sexual abuse and sexual harassment by posting their phone number and email address on the publicly available CT DOC web page as well as their stance of zero tolerance and mandatory reporting of sexual abuse and sexual harassment. The Mary Magdalene House complies in all material ways with the standard for the relevant review period and is determined to be **“Meets Standard”** for this standard.

§ 115.261 Staff and agency reporting duties.

- 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)
- Standard is Not Applicable

Mary Magdalene House requires all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment; retaliation against residents or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. The requirement is embodied within "Isaiah PREA Policy, sections 8-a, "Official Response Following Resident Report". "Isaiah PREA Training" power point slide #8 documents the requirement and training of staff to maintain confidentiality of information related to a sexual abuse report. Mary Magdalene House does not have medical or mental health practitioners working in the facility. Mary Magdalene House does not accept inmates under the age of 18. Mary Magdalene House mandates all allegations of sexual abuse and sexual harassment, including third party and anonymous reports, be forwarded to the Bridgeport Police Department. There have been no such reports during the review period. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115.262 Agency protection duties.

- 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)
- Standard is Not Applicable

Mary Magdalene House mandates that immediate action to protect the inmate be taken upon learning that an inmate is subject to a substantial risk of imminent sexual abuse. This mandate is encompassed within "Isaiah PREA Policy, sections 8-b, "Agency Protection Duties." There have been no such determinations within the reporting period. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115.263 Reporting to other confinement facilities.

- 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)
- Standard is Not Applicable

“Isaiah PREA Policy, sections 8-c, “Reporting to Other Confinement Facilities” states that, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the Program Director shall notify the Connecticut Department of Correction Parole Office and the facility head of the facility from which the inmate arrived. All inmates accepted to Mary Magdalene House arrive under the custody of the Connecticut Department of Correction Parole Office and arrive from a CTDOC facility or another halfway house but still under their custody. Policy mandates such notification shall be provided immediately after receiving the allegation. There have been no such incidents; however, the policy mandates that such notification shall be documented. There have been no such determinations within the reporting period. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be “**Meets Standard**” for this standard.

§ 115.264 Staff first responder duties.

- 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)
- Standard is Not Applicable

“Isaiah PREA Policy”, sections 8-d, “Staff First Responders” outlines the responsibilities of first responder staff members. Upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report shall be required to: ensure the safety of the alleged victim from the alleged aggressor/ abuser; notify a supervisor, duty officer and program manager; identify, separate and secure the inmates involved; ensure that the victim is not left alone; identify the crime scene; maintain the security and integrity of the crime scene. 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, changing clothes, defecating, drinking, or eating. All staff members at the Mary Magdalene House are “Security Staff” by definition. There have been no incidents during the reporting period which would require response under this section. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be “**Meets Standard**” for this standard.

§ 115.265 Coordinated response.

- 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)
- Standard is Not Applicable

Mary Magdalene House maintains a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, and facility leadership. Said plan is delineated in "Isaiah PREA Policy", sections 8-e, "Coordinated Response". The plan generally outlines the actions of the various personnel in order to achieve a unified and coordinated response. There have been no occasions requiring a coordinated response during the reporting period. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115.266 Preservation of ability to protect residents from contact with abusers.

- 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)
- Standard is Not Applicable

The Mary Magdalene House has not entered into or renewed any collective bargaining agreement or other agreement of any sort during this reporting period or at any other time that limits their ability to remove alleged staff sexual abusers from contact with inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be **“Meets Standard”** for this standard.

§ 115.267 Agency protection against retaliation.

- 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)
- Standard is Not Applicable

The Mary Magdalene House has established “Isaiah PREA Policy”, sections 8-g, “Agency Protection Against Retaliation” to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff and to designate which staff members are charged with monitoring retaliation. Inmate victims or abusers may be subject to transfer or remand at the discretion of the CT DOC Parole Services. Alleged staff abusers would also be subject to removal from inmate contact, again at the discretion of the CT DOC Parole Services. Emotional support services for inmates are handled via MOU with CONNSACS and/or Center for Family Justice. The PREA Coordinator would monitor the conduct and treatment of inmates or staff. During interview, the PREA Coordinator indicated that he would accomplish detection of retaliation by watching for isolation, mood changes, behaviors other than normal and different interactions between staff and inmates. He also indicated that he would utilize other staff to gain information on issues of this nature. Monitoring would take place on individuals who reported the sexual abuse and/or who were reported to have suffered sexual abuse in order to detect changes that may suggest possible retaliation by inmates or staff and would enable the administration to act promptly to remedy any such retaliation. Monitoring would continue for as long as those individuals were in the Mary Magdalene House program. No such incidents of retaliation have ever occurred at the Mary Magdalene House. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be “**Meets Standard**” for this standard.

§ 115.271 Criminal and administrative agency investigations.

- 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)
- Standard is Not Applicable

The Mary Magdalene House conducts its own administrative investigations into allegations of sexual abuse and sexual harassment in a prompt, thorough and objective manner for all allegations, including third-party and anonymous reports. All investigations encompassing areas beyond the administrative arena are conducted by local law enforcement, specifically the Bridgeport Police Department. Policy governing investigations is promulgated via "Isaiah PREA Policy" section 9, "Investigations". Mary Magdalene House has no authority to compel interviews. Mary Magdalene House has no authority to mandate polygraph examination or other truth-telling devices for any reason. Standard investigation protocols are utilized for investigations. Written reports document investigative findings including whether staff actions or failures to act contributed to the incident. A letter was sent to the Chief of Police at the Bridgeport Police Department requesting that such investigations shall be conducted in a manner consistent with those mandates contained within the PREA standards. To date, there have been no investigations arising from incidents occurring within the Mary Magdalene House. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115.272 Evidentiary standard for administrative investigations.

- 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)
- Standard is Not Applicable

The Mary Magdalene House maintains a “preponderance of evidence” standard for administrative investigations as outlined in “Isaiah PREA Policy” section 9 “Investigations”, b “Evidentiary Standards for Administrative Investigations”. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be “**Meets Standard**” for this standard.

§ 115.273 Reporting to residents.

- 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)
- Standard is Not Applicable

Mary Magdalene House has never had an incident/investigation that would necessitate notification pursuant to this standard. Mary Magdalene House does maintain a policy, "Isaiah PREA Policy", section 9, "Investigations, subsection c "Reporting to Residents". Notification will be documented via incident report. Obviously, when an investigation is conducted by an outside law enforcement agency, that agency has no obligation to share the results thereof with the Mary Magdalene House; however, a request for those results would be made and documented. It is noted that, under the current arrangement between the Mary Magdalene House and the CT DOC and Division of Parole, it is virtually inconceivable that an inmate would still be housed at the Mary Magdalene House by the time such an investigation was completed and notification became warranted. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115.276 Disciplinary sanctions for staff.

- 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)
- Standard is Not Applicable

Mary Magdalene House "Isaiah PREA Policy" Section 10 "Discipline", subsection a, "Discipline Sanctions on Staff" stipulates that staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. All allegations of violation of agency sexual abuse or sexual harassment policies would be referred to law enforcement agencies prior to any investigation on the part of the Mary Magdalene House unless the activity was clearly not criminal. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115. 277 Corrective action for contractors and volunteers.

- 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)
- Standard is Not Applicable

Mary Magdalene House maintains a policy applicable to this standard; "Isaiah PREA Policy", Section 10-b, "Corrective Action for Contractors and Volunteers". The policy encompasses all aspects of the standard. The Mary Magdalene House has ten volunteers; contractors are only permitted access to resident occupied areas while under direct staff escort. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115.278 Disciplinary sanctions for residents.

- 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)
- Standard is Not Applicable

Mary Magdalene House accepts inmates exclusively from the CT DOC. All inmates remain under the authority of the CT DOC while residing in the Mary Magdalene House. CTDOC Administrative Directive 9.5, "Code of Penal Discipline" encompasses the pertinent portions of the applicable standard while prohibiting all sexual activity on the part of an inmate, this regardless of the circumstances under which that activity occurs. The Code of Penal Discipline classifies all sexual activity as a Class A offense. A charge of "Sexual Misconduct" would result in immediate removal from the Mary Magdalene House and a return to a CT DOC facility where the disciplinary process would proceed. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115.282 Access to emergency medical and mental health services.

- 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)
- Standard is Not Applicable

“Isaiah PREA Policy” section 11, “Medical and Mental Health Care” mandates that inmates shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services without financial cost. Mary Magdalene House does not maintain on-duty Medical and Mental Health Care staff. Emergency treatment would be handled at either Bridgeport Hospital or UCONN Medical Center at the discretion of the CT DOC. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be **“Meets Standard”** for this standard.

§ 115. 283 Ongoing medical and mental health care for sexual abuse victims and abusers.

- 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)
- Standard is Not Applicable

Mary Magdalene House accepts inmates exclusively from the CT DOC. Inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility will be eligible for medical and mental health evaluation and, as appropriate, treatment from the CT DOC. The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody, this based upon determination by the CMHC (Correctional Managed Health Care) consistent with the community level of care. Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Mary Magdalene House does not accept male inmates. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be **“Meets Standard”** for this standard.

§ 115. 286 Sexual abuse incident reviews.

- 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)
- Standard is Not Applicable

"Isaiah PREA Policy" section 12, "Data Collection and Review" mandates that the PREA Coordinator will conduct a sexual abuse incident review at the conclusion of all sexual abuse investigations, including where the allegation has not been substantiated. The review will be conducted by the PREA Coordinator with input from any staff members with pertinent information. There has never been a sexual abuse incident at the Mary Magdalene House, thus there has never been a sexual abuse incident review conducted. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

§ 115. 287 Data collection.

- 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)
- Standard is Not Applicable

“Isaiah PREA Policy” section 11, “Data Collection and Review” mandates that the Mary Magdalene House will collect accurate, uniform data for every allegation of sexual abuse using the, form “SSV-IA Survey of Sexual Victimization, 2013” published by the Department of Justice, Bureau of Justice Statistics. All sexual abuse data will be aggregated at least annually. Mary Magdalene House will maintain, review, and collect data as needed from all available incident-based documents including reports, investigation files, and sexual abuse incident reviews. To date, there have been no incidents of sexual abuse, thus there has been no data collected. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be “**Meets Standard**” for this standard.

§ 115. 288 Data review for corrective action.

- 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)
- Standard is Not Applicable

Mary Magdalene House to date, has never had an incident of sexual abuse, thus there has been neither data collected nor any data to review nor any data to publish. The lack of data because of an absence of incidents is noted on the Agency website located at, <http://www.newoppinc.org/news/2015/bishop-house-annual-review-data-released>. Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be **“Meets Standard”** for this standard.

§ 115. 289 Data storage, publication, and destruction.

- 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)
- Standard is Not Applicable

Mary Magdalene House to date has never had an incident of sexual abuse, thus there has been no data collected, nor any data aggregated or published. "Isaiah PREA Policy" section 12, "Data Collection and Review" states that they will maintain records of all incidents related to incidents or allegations of sexual assault/abuse or harassment. Records will be maintained for ten years. The lack of data as a result of an absence of incidents is noted on the Agency website located at <http://www.newoppinc.org/news/2015/bishop-house-annual-review-data-released> . Based upon the totality of interviews conducted and reviews of applicable policy and related documentation, it is apparent that Mary Magdalene House achieves substantial compliance in that it complies in all material ways with the standard for the relevant review period. Mary Magdalene House is determined to be "**Meets Standard**" for this standard.

CERTIFICATION:

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



A handwritten signature in black ink, appearing to read "W. Sparks", written over a horizontal line.

AUDITOR SIGNATURE

19 June 15

DATE