

FEMALE OFFENDERS
Oklahoma Department of Corrections
Custody Assessment Scale

A. IDENTIFICATION: Facility: _____ Date: ____/____/____
 Offender Name (Last, First, Middle Initial): _____ DOC#: _____
 Reception Date: _____ Race/Sex: _____ Date of Birth: _____
 (assessment and reception center)

B. CUSTODY EVALUATION: Score

1. SEVERITY OF CONVICTION on CURRENT INCARCERATION
 (Use the Offense Severity Scale in Attachment A: rate most serious current charge/conviction, including CC, CS, SS, rebill cases, detainers, and warrants)
 Low= 0 pts. Moderate = 2 pts. High = 5 pts. Highest = 6 pts
 Offense: _____ Case Number: _____ Case Type: _____

2. ESCAPE HISTORY

- No escapes or attempts = 0 pts.
- Escape from community supervision (PPCS, GPS EMP) past two years = 6 pts.
- Escape or attempted escape from minimum custody, community corrections TDU juvenile AWOL, within the past five years = 6 pts.
- Two or more escapes or attempted escapes from minimum, community corrections TDU juvenile AWOL, community supervision within ten years = 6 pts.
- Escapes from any level of security that result in an injury or a felony conviction for a violent crime while on escape status this incarceration or within ten years from a prior incarceration = 7 pts.
- Escape or attempted escape from medium (jails, juvenile institutions, detention centers, shu) or maximum security during this incarceration or within ten years from a prior incarceration = 7 pts.

Facility _____ Security Level _____ Escape Date _____ Apprehension Date _____
 Facility _____ Security Level _____ Escape Date _____ Apprehension Date _____
Subtotal: _____

3. MEDICAL, MENTAL HEALTH, SUBSTANCE ABUSE NEEDS

- No Severe Need = -1pt.
- One Severe Need = 0 pt.
- Two Severe Needs = 1 pt.
- Three Severe Needs = 2 pts.

4. NUMBER OF ACTIVE DISCIPLINARY CONVICTIONS
 (Class A&B – last 6 months, Class X – last two years)

	Code	Class	Date
• None = 0pts.	_____	_____	_____
• One = 1pt.	_____	_____	_____
• Two = 2 pts.	_____	_____	_____
• Three or more = 3 pts.	_____	_____	_____

5. MOST SERIOUS DISCIPLINARY CONVICTION (within last 12 months)
 No expiration on current incarceration or within the past ten yrs using the date of current assessment for the following Class X offenses: 01-4, 04-1, 04-8 (04-3 prior to September 14, 1989)

	Code	Class	Date
• None = 0pts.	_____	_____	_____
• Class B = 0pts.	_____	_____	_____
• Class A = 2 pts.	_____	_____	_____
• Class X = 4 pts.	_____	_____	_____

6. ASSIGNED PROGRAM PARTICIPATION (since last classification)

- None, waiting list, enrolled, participating (or has points in escape section) = 0 pts.
- Completed program within past two years = -1 pt.

Recommended Program: _____ Completion/Failure Date: ____/____/____

7. ADJUSTMENT (indicate earned credit class level assigned)

- Level 1 = 1 pt.
- Level 2 (or has points in the escape section) = 0 pt.
- Level 3 and 4 (unless has points in the escape section) = -1 pt.

8. CURRENT AGE

- Age 20 or younger = 2 pts.
- Age 21 to 38 = 0 pts.
- Age 39 years or older (unless there are points in the escape section) = -1 pt.

C. SCALE SUMMARY AND RECOMMENDATIONS:

Assessed Custody Level: _____

1. CUSTODY LEVEL INDICATED by SCALE

- 6 or fewer points on items 1-8 = Minimum
- 7 or more points 1-8 = Medium

2. MANDATORY OVERRIDES (No lower than medium security) REASON IS REQUIRED

- Time Left to Serve (Highest Crime Category) Restricted Earned Credits
- Life/Life without Parole

3. DISCRETIONARY OVERRIDES FOR HIGHER CUSTODY LEVEL-- REASON IS REQUIRED

- Circumstances of the offense Management Problem
- History of Violence Escapes
- Gang Affiliation Felony Detainer
- Time left to serve Pending Cases
- _____ Other (specify): _____

4. DISCRETIONARY OVERRIDES for LOWER SECURITY LEVEL --REASON IS REQUIRED

- Circumstances of the Offense Outstanding Conduct
- Time Left to Serve Other (specify): _____

5. RECOMMENDED CUSTODY LEVEL

- Minimum Medium

6. Community Placement < 2920 days remaining and eligibility for community placement per OP-060104

- GPS eligible after 30 days at community as outlined in OP-061001

7. Intermediate Revocation Facility

8. Custody Level Assignment: _____

9. Comments: _____

10. SIGNATURES:

Preparer's Signature	_____	CM Code/Badge: _____	Date: _____
Committee Member	_____		Date: _____
Committee Member	_____		Date: _____
Committee Chair	_____		Date: _____
Offender Signature	_____		Date: _____

D. REVIEW AUTHORITY: Concur Do not Concur **Changed to:** Min. Med.

Reason for Change: _____

Routine:	Case Mgr./Coord./Supv:	_____	Date: _____
Non Routine:	Facility Head Signature:	_____	Date: _____
(If Changed)	Offender Signature:	_____	Date: _____

E. DIVISION OFFICE: Concur Do not Concur **Changed to:** Min. Med.

Reason for Change: _____

Division Manager/designee: _____ Date: _____

F. POPULATION OFFICE: Concur Do not Concur **Changed to:** Min. Med.

Reason for Change: _____

Administrator/Population Coordinator or Population Officer: _____ Date: _____

Distribution: White: Population Office
 Pink: Field file before approval
 Canary: Offender before transfer
 Goldenrod: Offender before transfer