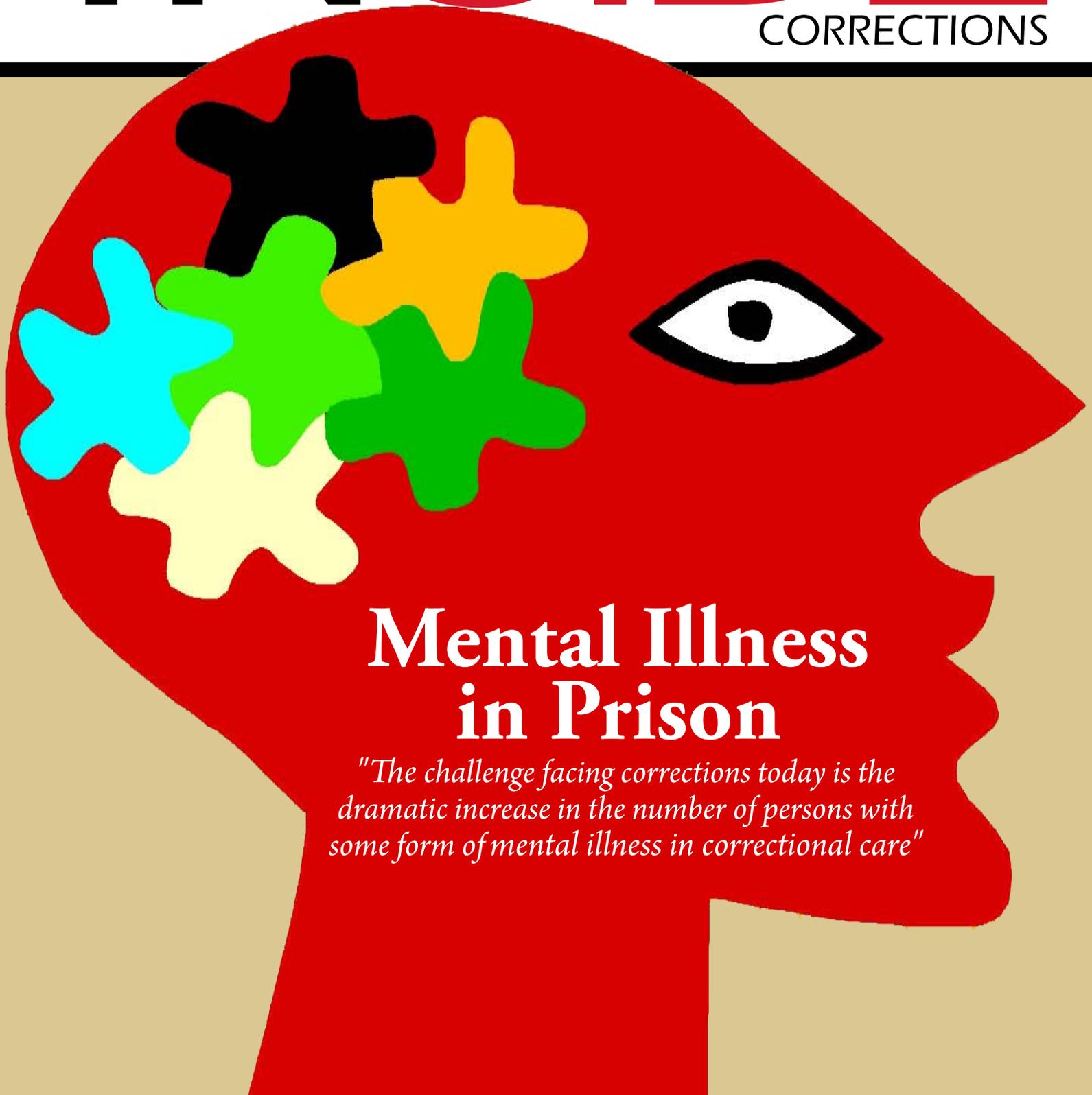


JANUARY/FEBRUARY 2012

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INSIDE

CORRECTIONS



Mental Illness in Prison

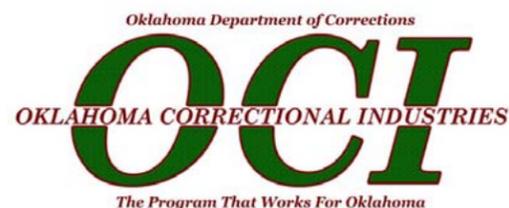
"The challenge facing corrections today is the dramatic increase in the number of persons with some form of mental illness in correctional care"



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Inside Corrections is an Oklahoma Department of Corrections bi-monthly publication distributed to employees, retirees and friends of criminal justice, to enhance communications and provide information on the development and achievements of this agency.

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On the Cover

Mental Illness in Prison

INSIDE CORRECTIONS

January/February 2012 • Volume 24, Issue 1

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OKLAHOMA DEPARTMENT OF CORRECTIONS

MISSION:

**TO PROTECT THE PUBLIC, THE EMPLOYEES,
AND THE OFFENDERS**

All readers are encouraged to submit articles, letters, comments and ideas for future issues. Copy should be submitted by e-mail to marcella.reed@doc.state.ok.us or CD. All articles are subject to editing, with every effort made to preserve the integrity of the submission.

This publication is issued by the Oklahoma Department of Corrections as authorized by the Executive Communications Administrator. Starting with the July 2010 issue, this document will no longer be printed, but will be posted to the Oklahoma Department of Corrections website. Due to the cost of printing, this publication will be issued in an electronic format only. Access to copies can be made from the Oklahoma Department of Corrections website (www.doc.state.ok.us).

Welcome to Inside Corrections



This edition of Inside Corrections focuses on mental health issues in our system. You do not have to have much tenure in this business to recognize the expanding issues of mental health in corrections. This includes the gambit from a higher percentage of offenders coming into the system with mental health issues and a growing elderly population and the mental health challenges that accompanies it. Surveys have indicated that the public generally believes that offenders become mentally ill once they enter the correctional system but data says otherwise and for those of us who work in corrections, we can speak to the realities of this issue. As with other areas of health, many of our offenders have spent their lives with an undiagnosed mental illness. This is probably exasperated by the fact that most offenders coming into our system have never had health insurance.

However, the issue is more than just mental illness when studying the complexity of what drives prison growth in this area. Mental illness is a major factor but most offenders with a diagnosed mental illness also have many other criminogenic factors that require being addressed. Criminal life style, associates, employment, and a host of other areas that is not unique to those receiving mental health services. Certainly we have focused on maintaining a higher level of filled mental health employee positions as the prevalence of mental illness must be addressed before other criminogenic factors can be successfully addressed.

Mental illness and other health issues among the offender population coupled with an array of unaddressed social issues in our communities will continue to be major contributors to offender net growth in years to come. Several cost models indicate that even if Oklahoma were to have sustained offender population decline, the incarceration cost would increase due to mental health and other health issues. Much like the research-driven approach that demonstrates evidence-based policing in high risk neighborhoods will actually reduce violent crime rates and thereby is a prevention program for future prison growth... addressing social, health and mental health issues, which are all criminogenic in some form or fashion in high risk community populations, will also reduce future prison receptions. Of course, the latter will never be as politically popular.

Justin Jones

Justin Jones
Director
Oklahoma Department of Corrections

Dr. Spector,
(excerpt)

My apologies for the tardiness of this letter to thank you for the opportunity to observe your HIV peer-education, chronic-disease self-management program, and the remarkable women's alcohol and drug program that the Oklahoma Department of Corrections maintains at several of your facilities. Dialogue with and observation of your peer educators in-action will support program development and implementation here at the Oregon Department of Corrections.

The HIV peer-education program is truly exceptional and has an incredibly solid evidence-based foundation. The materials that you have developed and are implementing are completely on target with state-of-the-art peer-education materials used by the most highly grant funded program that I know of to date; prison-based reach-one-teach one (ROTO) out of Centerforce in California. Your program is clearly much more feasible than ROTO and has the added bonus of being truly peer-run. As you well know, the literature shows that peer-based interventions among highly marginalized individuals is truly the best approach regarding topics such as HIV, viral hepatitis and other sensitive issues. Your peer-education do an excellent job engaging their colleagues and answering difficult questions that serve to de-mythologize HIV and other blood-borne pathodgens. I am excited and anxious to incorporate some of your HIV peer-education tools into our wook with the Hepatitis-HIV-AIDS Awareness Program (HHAAP), our blood-borne

pathogen peer-education program in Oregon DOC.

Your parternership with the Oklahoma State Public Health Department regarding implementation of the Stanford-based Chronic Disease Self-Management Program is also highly commendable. Not only have you successfully tailored and adapted the Standford model within the boundaries of fidelity, you are ensuring the integrity of the peer-leader aspect of the program; a feat not easy in institutions and incarceration.

Dr. Spector, again, I cannot thank you enough for sharing Oklahoma DOC's program materials with me in my work to expand and implement communicable and chronic disease programs within Oregon's DOC. We have a good foundation with HHAAP and your materials will support that effort to be more comprehensive. Your graciousness, kindness, and professionalism were appreciated during my visit. If and when I have the opportunity to do so, I would very much like to bring you out to Oregon to see our programs and have you speak to our peer-educators and uplift them in their work the way you seem to do with your peers. If there is ever anything I can do for you or the Oklahoma DOC, please do not hesitate to call upon me.

Sincerely,

Ann Shindo
Ph.D., MSW, MPH, MS
HIV-HEPATITIS PREVENTION
COORDINATOR, OREGON
DEPARTMENT OF
CORRECTIONS, HEALTH
SERVICES ADMINISTRATION

Mr. Wortham,
(Faith and Character Program Coordinator,
Oklahoma State Reformatory)

Thank you so much for OSR's F&C program member's generous donation of handmade gifts for our Children's Ministry which we call JAM Club (Jesus and Me). The ministry is an open outreach to any child, attending Blair School. We were so pleased with the quality of the hand work and so were the children. This is the second year the men at OSR have provided Christmas gifts for the kids attending.

At the midweek of every school week, we prepare a program that includes a hot snack, supper, a Bible story, and a handcraft project for the children who attend. In a regular week we have about 35 to 40 school kids. As you know, some needy families and individuals in our community go without proper food. We have also been blessed by the men of OSR with donations that totaled \$228.04 in 2011 to help us buy the food used for the hot meals for these great kids.

With this generous support, we will be able to help many of these kids.

Sincerely,

Mrs Edward Johnson
DIRECTOR
JAM CLUB
BLAIR UNITED METHODIST
CHURCH, BLAIR , OKLAHOMA

Director Jones,
On behalf of *Special Olympics Oklahoma* and the *Law Enforcement Torch Run*, I would like to thank the Department of Corrections for assisting us with our Cops on Doughnut Shops fundraiser again this year. The event was a success. Twenty agencies from across Oklahoma raised a total of more than \$19,000 for Special Olympics. We could not have done this without your help. Thank you for allowing staff from your agency to participate in this event.

The success of the event is due to all of the officers that take time out of their busy schedules. We appreciate the support of Milt Gilliam.

Thank you again for your support. We hope that you will participate in *Cops on Doughnut Shops* next year.

Sincerely,

Jennifer Lightle
SPECIAL OLYMPICS
LAW ENFORCEMENT TORCH
RUN FOR SPECIAL OLYMPICS

Director Jones,
What a life-saving difference you've made by hosting a blood drive on Tuesday, September 20, 2011! Thank you on behalf of those directly

impacted and their friends and families. Oklahoma Blood Institute donors, like those with Department of Corrections - Administration, support the ongoing needs of patients in more than 135 medical facilities in our area.

While it was great fun to celebrate the Bedlam rivalry through Cynthia King's leadership, all who donated are winners - no matter what their school loyalty. At the blood drive, 21 caring people participated, and 16 were able to make a donation that day.

Department of Corrections - Administration can be proud of this partnership with Oklahoma Blood Institute and our community in such a tangible, life-giving effort. With recognition of our mission together to meet the need for blood among those in our area, we commend you.

Sincerely,

Suzanne Bourgeois
BLOOD PROGRAM CONSULTANT
OKLAHOMA BLOOD INSTITUTE

Darla Cowen,
The Christmas Party for the men at Joseph Harp has been an exceptional opportunity to fulfill the mission of our

NAMI Affiliate. It is obvious that the men appreciate this special event and we are honored to be part of the planning and preparation. Our desire to share in making this possible would not be possible without your commitment to providing meaningful holiday activities that motivate and inspire hope.

Your dedication and hard work were above and beyond your responsibility as an employee. It was an act of kindness that will not be soon forgotten. Many will remember you for making the party possible. We believe it was the best party yet and look forward to helping with future events. Words do not express how deeply we are touched by your effort and willingness to serve.

Please accept our sincere gratitude for you and the other staff members who worked tirelessly on this occasion that provides months of anticipation and excitement for the very vulnerable population on your Unit. In many ways it is a miracle. And you are Angels of Mercy.

Sincerely,

Bonita Little
PRESIDENT
NAMI OKC METRO AFFILIATE



James Rudek, Administrator, Community Corrections/Work Centers
Effective December 1, 2011

Mr. Rudek began his career in Corrections in 1988 as a correctional officer at Mabel Bassett Correctional Center. While at Mabel Bassett, he promoted to correctional counselor, and then to case manager. In 1994, he was hired as senior probation/parole officer, and then team supervisor at Central District. In September 2004, he served as GPS coordinator for the Division of Community Corrections, until his departure from the division to become deputy warden at Lexington Assessment and Reception Center. Mr. Rudek then served as warden at Oklahoma State Reformatory from 2009 until his current position.

Mr. Rudek received his B.A. from Southern Nazarene University in 1992, and is an active member of ACA, OCA and OCP.

Rickey Moham, Warden, Dr. Eddie Warrior Correctional Center
Effective January 13, 2012

Mr. Moham began his career with the Oklahoma Department of Corrections in 1987 as a correctional officer at the Jess Dunn Correctional Center. He has also served in the capacity of sergeant, team commander for CERT, correctional case manager, records officer, and unit manager. He then promoted to deputy warden and has served in that capacity at Jackie Brannon Correctional Center since 2001.

Mr. Moham has a Bachelors of Science Technology from Northeastern State University and he graduated Magna Cum Laude with a Master's of Science in Management from Southern Nazarene University.



Terry Martin, Warden, Dick Conner Correctional Center
Effective January 13, 2012

Mr. Martin began his career with the Oklahoma Department of corrections as a correctional officer at the Oklahoma State Reformatory in June of 1984. He has also served in the capacity of sergeant, correctional counselor, senior case manager and case manager supervisor. He then promoted to deputy warden and has served in that capacity at William S. Key Correctional Center, Eddie Warrior Correctional Center and Jess Dunn Correctional Center. He has served as the Interim Warden at Dick Conner Correctional Center since October 1, 2011.

Mr. Martin has an Associate Degree in Corrections from Western Oklahoma State College and a Bachelor of Science in Criminal Justice & Ethics from Mid America University.



Inside Corrections welcomes your comments. Letters must include name and contact information. We reserve the right to edit all submissions. Send letters to Inside Corrections, Attn: Editor, 3400 Martin Luther King Avenue, Oklahoma City, OK 73111, or fax to (405) 425-2578. Address electronic mail to marcella.reed@doc.state.ok.us.



Back row (L-R): Dana McEnulty, Sabrina Stevenson, Renine Stansloski, Greg Palmer, Jin Song Chen, Kimberly Castro, and Bob Mann. Front row (L-R): Greg Cooley, Robert Scott, Diana Givens, Rodney Rowland, Donna Bond, Lindsey Horn, Robin Wong, Jackie Shipp, and Linda Mattia.

Mental Health Services in the Oklahoma Department of Corrections

New Challenge for Corrections

by Robert J. Powitzky, Ph.D., Chief Mental Health Officer

If you started working in corrections in the last 12 years, you may not know that the Oklahoma Department of Corrections has a new challenge. With a proud history of facing formidable challenges such as prison gangs, irrational psychopathic violence, prison litigation, and ever-changing sentencing guidelines, corrections has evolved into a

proud profession with the development of sophisticated management tools including management strategies for prison gangs, effective supermax technology/procedures, professional accreditation standards, quantitative custody/security classification systems, and the unit management model, to name a few. The new challenge facing corrections today that will require that

same professional ingenuity is the recent phenomenon of a dramatic increase of the number and percentages of persons with some form of mental illness in correctional care and custody that directly correlates with a decrease in community-based mental health services and psychiatric hospital beds. This new social phenomenon is an accepted fact nationally by professionals working in

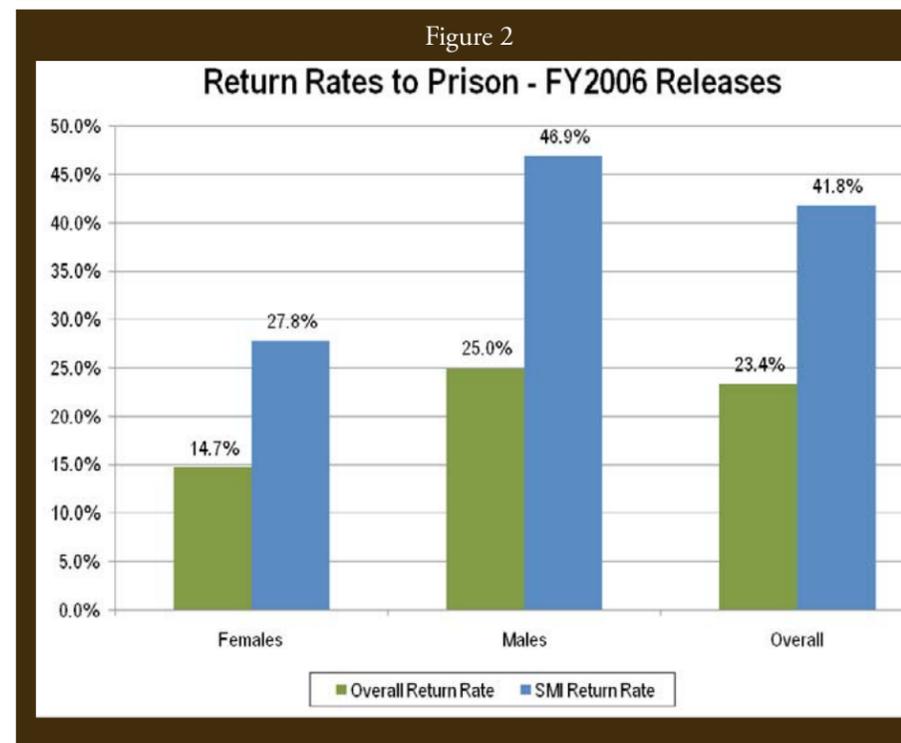
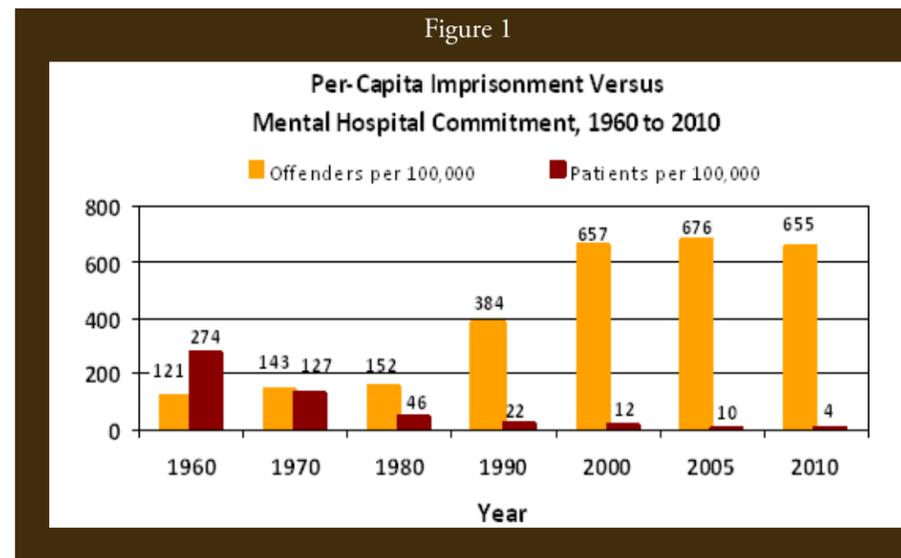
jails, courts, community corrections, probation, parole, and prisons. In Oklahoma, this increase can be clearly documented in many ways. For example, while the ODOC general population has increased 19% since 1998, the number of inmates prescribed psychotropic medications increased 300%. *Figure 1* also dramatically demonstrates and shows how the changes in psychiatric hospitalization rates and incarceration

rates have been inversely proportionate. Today, approximately 13,000 (50%) out of 25,600 incarcerated offenders have a history of, or are currently exhibiting, some form of mental illness. Of the 2,650 female offenders, 1,840 (69%), and of the 22,950 male offenders, 11,070 (48%), fall in that category. Approximately 6,500 (26%) of the total population, 1,400 (52%) females and 5,175 (23%) males, currently exhibit

symptoms of a serious mental illness, given the most conservative definition. Moreover, approximately 50% of those with mental illnesses also have histories of substance abuse.

Until 2000, Oklahoma state law permitted the Department of Corrections to commit offenders who, due to a serious mental illness, were a danger to self or others. The 2000 Oklahoma state legislature repealed that law, leaving the DOC responsible for the full range of mental health care, from outpatient to acute and long-term inpatient care. To address this new challenge, Mental Health Units (MHUs) and Intermediate Care Housing Units (ICHUs) were established at MBCC, JHCC, and OSP. Today, these units are kept at capacity, often with waiting lists.

All DOC professionals are encouraged to visit one or more of the MHUs to get a clear picture of the types of mental health problems that our offenders suffer from.



REENTRY COLLABORATION

In fiscal year 2010, about 8,300 DOC offenders discharged from custody to either probation/parole supervision or directly to the street without supervision. Approximately 2,000 of these offenders had a mental illness. *Figure 2* shows the percentages of offenders with a serious mental illness who were released between July 1, 2005, and June 30, 2006 (the year prior to implementation of the Interagency Mental Health Reentry Program), and who were again incarcerated in the Oklahoma DOC by July 1, 2009, compared with recidivism of the general population

For the first time in state history, during the 2006 legislative session,

the Oklahoma Department of Mental Health and Substance Abuse Services (ODMHSAS) and the DOC together requested and received funding for new ODMHSAS staff positions to be located in the correctional facilities that housed offenders with the most serious mental illnesses.

In January 2007, both state agencies created a collaborative reentry program to improve the transition of incarcerated offenders with serious mental illness to ensure entry into appropriate community-based mental health services upon release. Integrated services discharge managers, employed through ODMHSAS, function out of offices located on the mental health units at Mabel Bassett Correctional Center, Joseph Harp Correctional Center and the Oklahoma State Penitentiary. The discharge managers, as part of the DOC treatment team, coordinate the mental health discharge planning. In addition, four Reentry Intensive Care Coordination Teams (RICCT) (two in Tulsa and two in the Oklahoma City area) are under ODMHSAS contracts to provide assertive community treatment by engaging with the offenders/consumers prior to discharge and then working with them in the community

until they are fully participating in the appropriate community-based mental health and substance abuse services. The RICCTs are comprised of two staff members; one is certified mental health case manager and the other a peer recovery support specialist. This specialist is an individual with a history of recovery with a mental illness and/or a substance abuse disorder who has completed ODMHSAS training to provide peer support.

Many of the incarcerated individuals with a serious mental illness who return to prison have a co-occurring substance abuse disorder. Therefore, ODMHSAS further funded three co-occurring treatment specialists who have training and experience in delivering integrated substance abuse and mental health services. These specialists provide services to offenders near release to promote integrated mental health and substance abuse recovery skills.

The following is an excerpt from an article by Bob Mann and Donna Bond in the December *Corrections Today*, which provides a detailed description of the reentry program:

“Walter” was 8 years old when he started injecting heroin. By age 11, he was living

in a boys ranch, and then was placed in a long-term boys home until he was 18. After a short period on the street, Walter said he “hooked up with my best friend, heroin” and shortly began his first prison term. After his release, Walter was again incarcerated after a brief period of time on the street. Prior to his last incarceration (that began at the age of 35), Walter was sent for a psychiatric evaluation and was diagnosed with schizophrenia, paranoid type. “I remember my kindergarten teacher telling my mother that there’s something wrong with me; if she only knew how right she really was.”

Walter’s last incarceration was different. During that time, he started taking medications for his mental illness and started to think more clearly. Walter also made the decision to stop using drugs. “I just snapped and realized that dope wasn’t my friend after all and that if I ever did get out of prison again I was going to have to leave the dope alone, or I’d be back and never get out again,” he said.

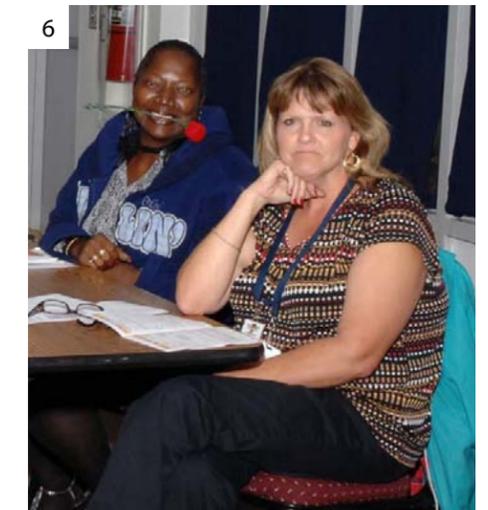
From the age of 11 until he was 53, Walter only lived outside of correctional institutions for 5.5 years. As Walter approached his discharge from prison in 2009, his case manager asked him if he would like to participate in a new mental health reentry program that would provide continuity of mental health services and much needed recovery support in the community. Walter told the case manager that he had never heard of a reentry intensive care coordination team (RICCT) before, but that “No one has ever helped me before, and if they will help me get my psych meds, then I’m willing to give them a try.” Walter admits that he was scared and leery of meeting the team members prior to their meetings to develop a comprehensive reentry plan before he discharged from prison.

(continued on page 33)



Pictured left: (L-R) Rodney Roland, RICCT consumer, Jin Chen Song, and Donna Bond, LPC, Oklahoma Department of Mental Health and Substance Abuse Services.

National Hispanic Heritage Month Diversity Lunch & Learn Series September 22, 2011 • Hillside Visitation Room



1. Christopher Zamudio, Master of Ceremony, Oklahoma City Community Corrections Center
2. Isabel Chancellor, President, IngenuitE, Guest Speaker
3. Tiffany Schall and Lance Cullen, Union City Community Corrections Center
4. Wilfredo Santos Rivera, CLARA President, Guest Speaker
5. Patricia Fennell, National Council of La Raza, Guest Speaker
6. Michelle Nolen, Training, and Donna Burkhalter (retired), William S. Key Correctional Center

The Crabtree Perspective

by James A. Smash, Ph.D.



When I made the decision to return to Oklahoma and work for the Department of Corrections I had a good idea what to expect from the experience of my previous stint during my APA internship at NEOCC and Oklahoma Forensic Center. I understood the system and the general climate that probably would exist, but also anticipated the possibility of change. When I arrived for the interview at James Crabtree my first impression was this is an old prison, “Shaw-shank!” Where is Andy?” Most of my preconceived notions and prior experiences held true to form. However, the differences in the day-to-day functioning of offenders and staff at this facility proved to be an education undoing, as well as, redefining many well-worn prison myths uttered over time.

Myth: Prisons have to be dismal, difficult, conflict ridden environments, rife with hardship, turmoil and dysfunction. I found out that...

JCCC has a unique prison environment because of several distinct variables; mainly age requirements and housing. Historically, the facility used to be a boys home. Currently, the facility structure at JCCC is a mixture of partly modern and partly

*Is the TREE a therapeutic milieu, or merely a space time anomaly?
There is a sign up ahead. You have entered the CrabTREE Zone!*



older buildings. Medium security offenders are housed in open dormitory style with approximately 180 per building. All other medium security offenders housed at other facilities have one and two man cells. It is because of the mission parameters and facility structure that staff and offenders alike coexist in a manner not expected at most medium security facilities.

JCCC has a mission to house the 35-years-old and older offender population. There seems to be an increased maturity factor collectively adhered to by these offenders. This maturity factor has a moderating effect on mood and temperament around the yard. The older offenders seem to set the pace and minimize the opportunities for major disruptive behaviors or full scale conflict. This is not to say that there are not bumps and bruises along the way, disciplinary write-ups and offender being sent to the segregated housing unit, or offenders being transferred to more restrictive environments. What can be readily noticed to anyone familiar with the penal system is the climate and general atmosphere.

Is the TREE a therapeutic milieu, or merely a space time anomaly? There is a sign up ahead. You have entered the Crabtree Zone!

One of the realities that cannot be ignored is the synergistic effect of an open-yard, open dormitory, middle-aged offender population acting in unison creating a therapeutic milieu. There is a sense of calm, peace, and a relaxed atmosphere. Offenders like the idea of doing time and not being locked down or sprayed. The closed-door, double cell here is a privilege where in most places it is a restrictive measure. In addition, the offender population seems more sensitive to the mental health needs of other offenders. At times, they are the first to point out issues of mental health and other offenders to staff. What a neat idea, looking out for someone else. As the offenders say “the script has been flipped here at the TREE.” It is counterintuitive so to speak, that medium security offenders would actually prefer cells (more restriction) than open dormitory housing.

For some offenders, the TREE is not a proper fit. These offenders

will make passing statements, easily within earshot, as intended, “I need to go to a real yard. This place ain’t right. Offenders are hanging out and talking to security, better known as the ‘police’ or the ‘PO-PO’ in the vernacular. Everybody tells on each other. This is like Camp Fluffy or Camp Cupcake.” This ain’t a real prison.”

As can be expected the offenders who espouse these types of statements have not yet decided to just do their time peacefully. They want excitement, conflict and the free reign to continue the convict games. For them, the easy, laid back style of the TREE is more than they can bear. They get into trouble and eventually get their wish; a real prison! I did not know I worked at a fake prison so to speak. Most conflicts are resolved through talking and obeying staff orders when situations or events escalate.

Myth: Mental Health and Medical do not get along! Oil and water do mix, sorta! I have found that...

As sure as the sun rises and sets, I am certain you have a story or two about medical and mental health and perhaps not having their best of days. Unfortunately, too many exist to be a totally untrue or unfair assessment of the on-again-off again relationships between the professions. However, there are other stories not often told. The truth of the matter when you get past the politics and power is a story of a symbiotic relationship. Siamese twins, if you will, joined at the hip in the delivery of prison health care. Mental health and medical are intertwined in the many of the same struggles that continually plague health care and consumer relationships within any prison system.

Medication compliance, “cheeking” medications and discontinuing treatment against medical advice seem to present a

unique set of problems. For example, medication compliance at pill line can be affected by outside temperature, holidays, and time of day for dosing and time of day for evening medications. Issues that continually present as problematic are if it is too cold an offender may miss morning medications. Conversely, if it is too hot at midday some may opt to not be compliant. Then there are issues of “cheeking” medications to either take it at a time later than or different than prescribed, or “cheeking/cheating” back on doses to sell or barter. These problems are not rare and represent medication issues for the mentally ill offender as well as the normal mentally functioning offender perhaps managing pain. Nevertheless patient medication and care compliance continues to plague both professions. Lastly, one of the more difficult problems is motivating an offender who has decided “...I don’t want these meds anymore! I feel good right now!”

After I get past the, “people should know themselves and what they need better than anyone else” musings, I pretty much know what will happen eventually. As a psychologist, I also know that past behaviors when on or off meds are good predictors of future behaviors. My musings change to, “How is this going to probably look in a couple of days or weeks?” Is it motivational interviewing time, or smock and safety blanket time? How do I minimize or eliminate the potential for trouble becomes the question of the day. In reality, these spurious patient “against medical advice” choices can result in death or emergency hospitalization. For mental health, against medical advice choices may result in a major mental health crisis, suicide watch or a trip to JHCC MHU or possible death as well. At the end of most days we laugh, vent, pout, whine, process, fuss and cuss, but somehow make it back the next day. There is always a listening and there is always more than enough to listen to or talk about. Physicians heal themselves here! Oil and water mixing; sorta.

Myth: Staff does not care about mental health until they need you! Out of sight, out of mind, or out of sight until they are out of their minds? I found that...

Although prison staff have generally been exposed to a multi-
(continued on page 35)

As the offenders say “the script has been flipped here at the TREE.”

BOARD OF CORRECTIONS

Strategic Planning Session • January 12, 2012



Pictured left: Kris Steele, Speaker of the House; Pictured above (L-R): Laura Pitman, Deputy Director, Female Offender Operations; Ed Evans, Associate Director, Field Operations; Neville Massie, Legislative Liaison; Anetta Bullock, Executive Assistant; Director's Office; David Henneke; Earnest Ware; and Ted Logan, members, Board of Corrections.

On January 12, 2012, Board of Corrections members, Director Jones and staff participated in the Board’s annual strategic planning session.

The morning session focused on the Council of State Governments (CSG) Justice Reinvestment Initiative (JRI). CSG/JRI team members Marshal Clement, JRI Project Director, Anne Bettsworth, Policy Analyst, and Robert Coombs, Senior Policy Analyst and Public Affairs Manager, were all in attendance. Kris Steele, Speaker, Oklahoma House of Representatives, and John Estus, Speaker’s Press Secretary, also were present.

Mr. Clement outlined the broad scope of this project: over eight months of effort; analysis of 700,000 data records; over 100 meetings with criminal justice stakeholders; and five meetings with the JRI Working Group.

This chart, included in the comprehensive report released in January 2012 by CSG, outlines the three major strategies identified by the researchers that have potential to enhance public safety in Oklahoma.

Following CSG’s presentation, Speaker Steele told the group of his plans to introduce legislation based on the
(continued on page 36)

Spotlight - Representative Lisa J. Billy



REPRESENTATIVE LISA J. BILLY DISTRICT 42

Vital Statistics

Leadership

Assistant Majority Floor Leader

County(s) Represented in District

Cleveland, Garvin, Grady, McClain

Personal

Chickasaw Indian

Married with three children

One brother

When Representative Lisa Billy graduated from Madill High School, running for a state office was probably the last thing on her mind. Even though there are people who make it their life's work, Representative Billy said it was not something she set out to do. However, after watching her father, who was a natural leader in their community, and seeing the things he did played a major part in what she does today.

L.B.: When I was a little girl my dad started the Indian education program at our school in Bristow. I always saw him step up in leadership. My dad was a lineman for OG&E so he was not the man walking in a suit and tie organizing people. He was the man climbing poles and feeding cows. He wanted to get all of our Indian families together and start coordinating meetings and make sure the kids had opportunities to pursue education. He was a stalwart in leading that program and getting it organized. I'm real grateful for that. That has always been a part of who I am and my family. My dad is a Chickasaw Indian and my mother is a Choctaw Indian.

How did you get into politics?

L.B.: It was really an accident. I don't have family members who served in the Oklahoma legislature but growing up I saw my dad being an activist for good causes for Native American issues. I was active in high school with our Indian club and wanted to bring in different speakers. Then kind of stumbled into it when I was in college through the Native American Student Association. They really encouraged me to get involved in the student senate at NSU, which I really didn't want to do but our members felt like they needed a voice and they thought I would be a good voice to represent our views. So I kind of stumbled into it in the sense of just wanting to do some good things on campus. At the time, Roger Webb was our president and I'm very thankful that he provided some direction for me. He took my passion for activism, toned it down a little bit and helped me a lot. From there I started a small business called Peace Makers, Inc., completely by accident because I worked at a boarding school in Tahlequah and saw a lot of the Indian kids struggling. I just thought wow I know a lot of other

people that struggle and thought if you could hear their stories I think it would help you so I started the business by accident and had a lot of help from my friends from college. We started traveling all over Oklahoma doing these workshops and at that time it was just because we felt like we didn't feel like the other kids would listen to it so we actually discovered all the kids were listening to it. Before we knew it our group of young people we were Native American, African American, White American, Hispanic American we had quite a few different listeners.

Why do you think Oklahoma doesn't have more Indians holding office or running for office?

L.B.: Really in the last few years I think we've probably seen a host of people who are Native Americans running but, I don't know, I wish I knew the whole answer to that. I think culturally sometimes there are a lot of differences in how we govern as a tribe and how we govern as a state and I know for me personally it

was a little challenging and I did come across people who felt like I could not represent them because I'm Native American. They felt like, well you'll only represent your race. I found that to be somewhat perplexing because I thought I helped knock on doors for people who are non-Indian and it never occurred to me that they won't represent me as a native person. Of the people that I've helped campaign for over the last two years I never thought, well they are white so they won't represent me. That's never come across my mind but it did come across a lot of people's mind. I have seen more Native American people run for office. Some have been successful...some have not been successful. But I think money is the big issue and not having somebody who has served in office. A lot of times that does make a difference if you have an uncle, grandfather, brother, cousin...some type of relative who has served and sort of knows their way around politics to help you, I think that does put you a step ahead and it does open some doors for you. I didn't have that. I just believe very strongly what my family taught me; that you don't look at what you don't have, you look

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at what you do have. I do think that financially sometimes native people are at a disadvantage. I always tell young people don't look at that...you focus on who you are and what you can do and you get out there and you give it your best shot. Never be held back because you don't have the money or you don't have the political connections. My husband and I had none of that and my husband worked four part time jobs plus one full time job. It was us...it was my family and even now when we do fundraisers or any events for my campaign it's us doing it. My oldest son developed the invitations. He's very skilled with technology. He used his own photos. It's my kids and my friends. We line up at my kitchen table and we lick envelopes and send out cards. I guess we are sort of old fashioned in that sense. That's what I have available to me. I have a lot of great friends that are willing to help me.

Sounds like the old fashioned way is really the best way.

L.B.: I think it is. That's why I'll continue to serve. I think social media is good but I still think people like that door-to-door, or face-to-face contact. So I try not to focus on why there are not more women or minorities running. It just takes time. It takes people to step up to make those things happen. It doesn't happen overnight.

Who would you say had the greatest influence on you?

L.B.: I tell you God knows that I needed a lot of people to give guidance. There is really not enough room on paper to tell you everyone that has influenced me but certainly my mother was a huge help to me. My mom has always been a quiet person. She was never out in the front leading the pack. My dad is much more vocal. My mom was always the quiet one in the back when I would come home from school saying I can't do this she'd be saying, "You can do this...yes, you can. Who told you that lie?" I'm grateful. Politically speaking I've had several mentors that have really helped me. One is Neal McCaleb, a Chickasaw Indian. He really encouraged me and started taking me to political events. In more recent years...the last 10 years...it was a woman who has now passed on, Helen Cole. She was the one that reiterated to me what my Grandpa had always said, "Don't focus on what you don't have, focus on what you do have." She said I heard you used to run track so if you don't wear out three good pair of tennis shoes then

you didn't knock on enough doors and you didn't talk to enough people. So that's what I did. Helen always said, "You help make things happen, don't sit back and let those things happen to you." So politically Helen was ultimately the one who got me into the Oklahoma House of Representatives and encouraged me to run. She passed away before we actually won the election. She was a huge help to me.

What do you consider your next steps? Where would you like to go from this?

L.B.: I have had so many people ask me that and I'll be honest I really don't know. I will tell you that I am very passionate for people who are disabled. I'm very passionate for people who don't have a voice at the state capital from the unborn to those who are disabled to pockets of people who don't have the financial or political know-how. I probably see myself being some type of an advocate, a voice for those that haven't had all those kind of opportunities. That's the kind of stuff that keeps me going. That's the kind of stuff that gets me to the valleys when people come against me or say things that are untruthful or unkind. It's those issues that keep me going. But I have three children so my first and foremost goal is to make sure I give them their wings and make sure I give them the courage and determination and perseverance to accomplish their goals. So I'm starting my eighth year and believe it or not I have four years...I'm counting down four years and then I'll term out of office. I just pray...I ask the Lord to show me what you want me to do next and if that's staying at home and maybe getting my laundry conquered that's fine.

What would you consider your greatest accomplishments since you've been in office?

L.B.: I'm probably still waiting on that one. I really think I've been a part of a neat team and have been able to author some strong pro-life, pro-woman legislation that has been passed into law that protects the woman as well as her unborn child and allows her to have the information that she needs if she were considering abortion. For me that's very important and then on the policy side I'm very proud of some of our legislation. I've worked with Speaker Chris Steele on our Justice Reinvestment and the high incarceration rate among women. When I was in graduate school I helped publish a book with one of my mentors, Dr. Beverly Fletcher, a professor at the University of Oklahoma who is now at

(continued on page 37)

NORTHEAST OKLAHOMA CORRECTIONAL CENTER

Retiree Brings Home Championship Belt



Pictured above (R-L): Warden Rodney Redman, Henry Ellick, Chief of Security Anthony Clayton, Food Service Manager Lee Fiedler and Deputy Warden Mike Wade.

Northeast Oklahoma Correctional Center retiree Henry Ellick brings home a world championship belt. Henry Ellick began his career with DOC in February 2000 as a Correctional Activities Officer I and retired in July 2010. Retirement didn't slow Ellick down as he continued his passion of boxing by being an active judge in professional boxing and Mixed Martial Arts. Ellick triumphed after suffering a knock down to win a decision over his competitor in the men's master's boxing division of the 11th Annual Ringside World Championships in Kansas City, Missouri on August 6, 2011. The

tournament drew nearly 1,500 fighters from around the world. Henry learned of the Ringside World Championship from a past contestant. "I went up and watched them train and box," he said. "I said 'I can do this...I can win this.' That was a Saturday and I came back on Sunday. Every day since then, for a year, I trained hard, really hard. The last two months, I did 1,000 crunches a day, in the heat in the garage." In spite of being a diabetic with high blood pressure and a metal hip replacement, the 64 year old trained by himself and sparred only twice prior to the tournament.

He drew a first round bye, then stopped Richard Harp of Ohio in the semifinals. That set up the Saturday final with Adler, who knocked down Ellick in the second round. "I got back up and finished out the fight," said Ellick, who admitted that being a boxing judge worked to his benefit. "I outscored him. I know the scoring system and that is only a tenth of a point. Three jabs count one point. I know the knockdown is just the same as a jab." "I just want people to know, if I can do this, in spite of diabetes and high blood pressure, anyone can," Ellick said.

In spite of being a diabetic with high blood pressure and a metal hip replacement, the 64 year old trained by himself and sparred only twice prior to the tournament.

NABCJ, OCA, & OCP 2nd Annual Employee Conference "All About You II"

October 14, 2011 • Embassy Suites Hotel and Conference Center • Norman, Oklahoma



1. Ted Logan, member, and Linda Neal, Vice Chair, Board of Corrections
2. Karl Willett, Oklahoma City Community Corrections Center, Joyce Jackson, Executive Communications, and Samuel Terry, Personnel
3. Representative Anastasia Pitmann, District 99
4. Nancy Howard, Pat Montgomery, Betty Mason, and Tonita Taylor
5. Crystal Durfey, Shelly Bear, and Becky Guffy, James Crabtree CC
6. Ruth Littlejohn, Union City CCC, and LaDonna Anderson, Kate Barnard CCC

1. Deanna Dixon, Anita Alford, and Ann Toyer
2. Stephanie Abell, Janet Dowling, Debbie Morton, and Cathy Wilkerson
3. Linda Evans and Dr. James Smash
4. Haskell Higgins and Kristen Sanders
5. Eric Franklin, and Heather Harrison
6. Sgt. Benjamin J. Williams, Headquarters, Travis Ary, Personnel, JHCC. Sgt. Nate Pahukoa, NOCC, and Corporal Richard Vanvorst, JHCC



MABEL BASSETT CORRECTIONAL CENTER

Mental Health Peer Recovery Support Specialist Graduation

by Shola Shopeyin, Unit Manager, Mabel Bassett Correctional Center

On November 10, 2010, the first graduation of the Mabel Bassett Correctional Center Peer Recovery Support Specialists was held. Six graduates, in the presence of several of their family members, Mabel Bassett Correctional Center staff and other guests, demonstrated their pride in this accomplishment.



In a collaboration between the Oklahoma Department of Corrections, Oklahoma Department of Mental Health and Substance Abuse Services, and the National Alliance on Mental Illness (NAMI Oklahoma Inc.), the Peer Recovery Support Specialist program offers offenders who are both past and present mental health consumers an opportunity to assist others diagnosed with mental health illness and substance abuse. As a peer specialist; the offenders will help instill hope and courage in other mental health consumers. They will also assist other offenders with learning how to

keep themselves healthy and understand the value of the recovery experience.

The graduation was attended by Marva Crawford Williamson, Transition Agent, Innovation Center, Oklahoma Department of Mental Health and Substance Abuse Services, and Oklahoma Department of Corrections staff Kenny Holloway, Deputy Director of Treatment & Rehabilitation Services, Dr. Robert

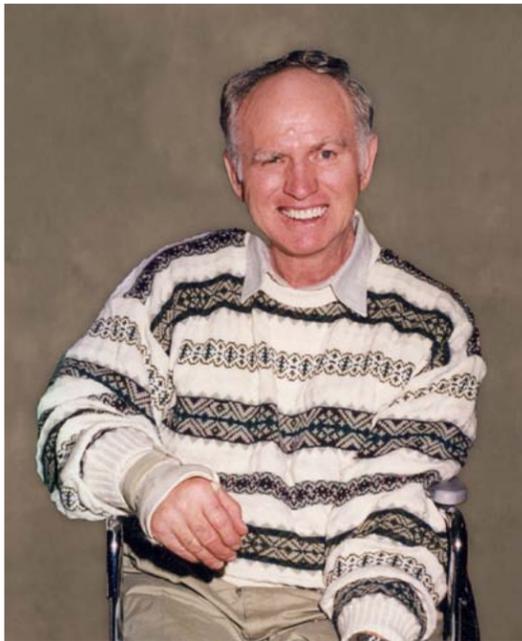
Powitzky, Chief Mental Health Officer and Bob Mann, Coordinator of Clinical Social Work Services.

Guest speaker, Dr. Wayne McGuire, an Oklahoma Department of Corrections/ Mabel Bassett Correctional Center volunteer, of the National Alliance of Mental Illness – Oklahoma, was the peer specialist training instructor. His comments at the graduation spoke of
(continued on page 37)

National Disability Employment Awareness Month Diversity Lunch & Learn Series October 20, 2011 • Hillside Visitation Room



1. Prosthetics with beautiful artwork
2. Phillip Baker, Private Prisons, and Shirley Cole, Information Technology
3. The interworkings of a prosthetic on display
4. Debbie Martinez, PPO III, and Angela York, PPO III, Central District Community Corrections
5. Mike Oakley, General Counsel
6. Jerry Kucera and Blake Goodwin, Scott Sabolich Prosthetics & Research



Someone You Should Know

- Johnny J. Barrier -

By Dan M. Reynolds

In 1986, a former correctional officer Sammy Koontz gave me a book he had penned entitled, "The Saga of Oklahoma State Penitentiary." In one chapter, Sammy describes the July 27, 1973 riot, "The convict's confiscated needles from the drug room and in short order, the convicts were high on dope, and also they were on a combination of pills and homemade beer. Hostages had been taken; some had been attacked, with one guard, John Barrier, being disabled for life. I have talked to Mr. Barrier on many occasions. There is no doubt but that he has endured torture, needlessly."

I wondered if John Barrier was still living, so I contacted Jerry Holt, who had started his career at the Oklahoma State Penitentiary in 1965 and retired during my tenure at the penitentiary. Jerry knew John Barrier, but did not know whether or not he was still living. His last recollection was that Barrier lived in the local McAlester area, but that was over 20 years ago.

As luck and fate would have it, I made a phone call and a lady answered the phone. I told her who I was and that I was looking for the family of John Barrier. The lady said, "hold on," that is my husband's brother; let me have you talk to him." His name was Ralph. I told Ralph who I was and that I had been warden

at the penitentiary in the early 90's. He recognized my name and was willing to talk to me. To make a long story short, Ralph put me in contact with his sister-in-law, Dolly, John Barrier's wife.

When Dolly and I finally connected, I explained to her who I was and that I was inquiring if John was still living and how he was doing. She didn't ask me to repeat my name or question me as to my motives, but anxiously the first thing she said to me was, "Can you help me?" I was taken back and said, "Help you with what?" She said they quit paying his (John's) medical bills. I asked her who quit paying his medical bills and she replied the State Insurance Workers Compensation. What I gathered from our

brief conversation, was that John, a causality of the 1973 riot was no longer having his work related medical bills paid. She was unable to get anyone to help her with the bills and as a result the hospitals had turned her over to a collection agency, seeking payment of outstanding bills the insurance companies declined to pay. With the assistance and resolve of our General Counsel, Mike Oakley and Human Resource Benefits Manger, Patti Ormerod, they were able to facilitate the payment of all but \$11.90. When I told Dolly in person that she still owed some money, she had a discouraging look on her face, that is until I told her the amount of money owed was now only, \$11.90. It was like a stack of bricks were

lifted from her shoulders. Mr. Oakley and Ms. Ormerod went beyond the call of duty and their efforts were sincerely appreciated.

John Barrier was known to others at the penitentiary as "007". According to Jerry Holt, John was really good at finding contraband during shakedown and loved to prowl around; often finding cleverly concealed contraband.

I later had the privilege and honor to meet and visit with John. During our conversation, I learned of the following events of that fateful day. John was working in the library the day of the riot. A group of inmates came and escorted him to the gate for safe passage to escape the contempt of the rioting inmates. Unfortunately, an officer who was at the gate would not open it because of strict orders from his supervisors with no exceptions. While at the gate, another group of inmates took control of him and hit him over the head with a piece of lumber or a base ball bat. He was dragged into the barbershop and was forced to lay face down and spread-eagle while inmates got on top of a barber chair and/or table and jumped on his back, kicked and stomped him repeatedly until he was rendered disabled and incapacitated. Ironically, an offender John had shot at previously while working on a tower, was able to drag him to a safe and secure location protecting him from further injury. Offenders, believing he was dead, dumped his body below Tower 8. John laid there for a long time until staff could safely enter the area and rescue him. When he finally got out and was taken to the hospital through the rotunda, his

brother thought they had castrated him because of the amount of blood in his groin area. Upon closer observation of John's injuries, the amount of blood he had lost, primarily from facial fractures, had ran down his chest and pooled in between his legs.

Today, John has not recovered from his injuries he acquired some 37 years ago. John is 73 years old. He wore a brace on one of his legs after the riot. He started to suffer from seizures which eventually led to having a shunt placed in his brain in 1980, to allow the spinal fluid to properly drain. Without the shunt, his brain continued to swell inside the cranium. In 1981, another surgery was necessary to allow the shunt to properly drain the spinal fluid. Several months later, John experienced a serious stroke in 1981, resulting in paralysis to the left side of his body. John is currently confined to a wheelchair. John states it feels like he is the one in prison. Whenever

he talks about the riot, he weeps uncontrollably. John told me he still has nightmares of the beating. Dolly said after John came home, he would sleep with an ax handle or steel bar under his pillow. His long term memory is better than his short term memory. I asked him what advice he had for new correctional officers today and he said, "Have faith in the man upstairs, do a good job and be honest." His wife Dolly remains with him and ensures all his needs are being met. They are both devout Christians. Dolly told me that, "God said he will stand over his word to perform it. God will perform all your needs." She has found solace in those words through their difficult times.

In 1989, a monument was dedicated to John, former and current employees. Inscribed on the monument, inside an emblem representing the State of Oklahoma reads, "Dedicated to the Correctional Employees Killed, Injured or (continued on page 27)



Pictured above (L-R): Dan Reynolds, former employee, Johnny J. Barrier, former employee, and Randall Workman, Warden Oklahoma State Penitentiary.

Sgt. Johnny Joe Barrier Recognition Ceremony

November 4, 2011 • McAlester, Oklahoma



Sgt. Johnny Joe Barrier

Oklahoma State Penitentiary
1963 - 1973

Your loyalty, dedication and service to the Oklahoma Department of Corrections is recognized and sincerely appreciated.

You are missed, but not forgotten.



1. Johnny Joe Barrier, former Department of Corrections employee, and family.
2. Dan Reynolds, former Department of Corrections employee
3. Randall Workman, Warden, Oklahoma State Penitentiary
4. Justin Jones, Director, Department of Corrections

(Barrett, continued from page 25)
Taken Hostage in the Line of Duty.”

When I met John, I was wearing a lapel pin on my coat that resembled the Department of Corrections badge, similar to what officers wear today. I told John I wanted him to have it. I took it off my coat and put it in his hand. He looked at it for a long time. I asked him if he wanted me to sit on a nearby table while we talked. He nodded in the affirmative. After about 30 minutes, he asked me if I would do him a favor and I said sure what it is. He asked if I would pin the badge on his shirt. I knew right then, that John was not bitter towards anyone or persons involved in the riot. John was very proud to wear the badge, and I could sense the pride still resonating within him. Before me, I believed; sat a once dedicated, loyal and faithful employee of the Department of Corrections.

I recently introduced John to Randy Workman, current warden at the Oklahoma State Penitentiary. Warden Workman provided gifts to John and Dolly. I discussed with Warden Workman of an upcoming training session for four of his correctional officers who were to be trained as chaplains would be able to assist John and his family of any needed support and/or resources. He agreed we need to take care of our own.

The Correctional Peace Officers Foundation recently recognized John for his service and provided him and his family assistance. ■

TELEPHONE ETIQUETTE

Presenting a professional image, both in person and on the telephone, is very important in the office. Taking care of your customers over the telephone and making them feel well informed and appreciated is essential. Whether you are the front office receptionist or an executive secretary, the following phone tips should always be followed.

- **SPEAK CLEARLY.** A picture paints a thousand words but the caller on the other end of the phone can only hear you. They cannot see your face or body language. Therefore, taking the time to speak clearly, slowly and in a cheerful, professional voice is very important.
- **USE YOUR NORMAL TONE OF VOICE** when answering a call. If you have a tendency to speak loud or shout, avoid doing so on the telephone.
- **DO NOT EAT OR DRINK** while you are on telephone duty. Only eat or drink during your coffee break or lunch break.
- **DO NOT USE SLANG WORDS OR POOR LANGUAGE.** Respond clearly with “yes” or “no” when speaking. Never use swear words.
- **ADDRESS THE CALLER PROPERLY BY HIS OR HER TITLE.** (i.e. Good morning Mr. Brown, Good afternoon Ms. Sanders). Never address an unfamiliar caller by his or her first name.
- **LISTEN TO THE CALLER** and what they have to say. The ability to listen is a problem in general but it is very important to listen to what the caller has to say. It is always a good habit to repeat the information back to the client when you are taking a message. Verify that you have heard and transcribed the message accurately.
- **BE PATIENT AND HELPFUL.** If a caller is irate or upset, listen to what they have to say and then refer them to the appropriate resource. Never snap back or act rude to the caller.
- **ALWAYS ASK IF YOU CAN PUT THE CALLER ON HOLD.** If you are responsible for answering multiple calls at once, always ask the caller politely if you may put them on hold. Remember that the caller could have already waited several minutes before getting connected to you and may not take lightly to being put on hold. Never leave the person on hold for more than a few seconds or they may become upset and hang up.
- **ALWAYS FOCUS ON THE CALL.** Try not to get distracted by people around you. If someone tries to interrupt you while you are on a call, politely remind them that you are on a customer call and that you will be with them as soon as you are finished.



This is Larry (pictured left), he used to be a pretty bad actor. He was always fighting or trying to jump on somebody and basically had a bad attitude. But that was before he went to prison.

Larry's doing good these days, since he's settled down.

The word is his family was just about ready to give up. They couldn't handle him so he moved around quite a bit. In fact, they didn't know what to do, they even thought about adopting him out. But he's changed, since he's been out. He is no longer biting and snapping at everyone he meets; and those that knew him are surprised by his new attitude. Not to say that going to prison is a cure all, it doesn't work for everyone. However, you could say Larry 's rehabilitation is the direct result of his participation in a special program called "Friends for Folks."

The Friends for Folks (FFF) Program has been around for quite awhile and Larry is just one of many who have gone through

The Friends for Folks (FFF) Program, which trains dogs for placement with senior citizens, handicapped persons and private individuals has been in operation since 1990 at the medium-security prison, Lexington Assessment and Reception Center, in Lexington, Oklahoma. FFF has gained national and international recognition for the effectiveness of the program and has been featured on television programs such as Animal Planet. Visitors have come from as far away as China and Norway to view the program operation. The Oklahoma

Department of Corrections provides staff supervision, training facilities and minimum funding. Most funding required for program operation comes from donations from grateful dog recipients and other sources such as Oklahoma State University. Dr. James Otto and Dr. Aaron Cline both practicing Veterinary Medicine in Norman, Oklahoma, generously donate veterinary care and/or basic animal health care instruction for Friends for Folks dog trainers as needed.



Dogs learning the "stay" command (above) and a border collie (bottom) on the obstacle course at the Friend for Folks program.



TRAINING PROGRAM

Training mainly consists of basic obedience. Here is an example of some of the basic commands.

HEEL - Teaches the dog to walk on the left side of the handler without leading or lagging.

SIT - Teaches the dog to sit on command.

DOWN - Teaches the dog to lay down on command.

STAY - Teaches the dog to stay in position until a release command is given.

If time permits, some are taught tricks and other commands such as "Off" or "Go to Bed."

There are currently two primary aspects to the program.

The first type of dog is received from Second Chance Sanctuary, a non-kill animal sanctuary in Norman, Oklahoma (www.secondchancenorman.com), Dogs as Family (www.dogsasfamily.com) and various other rescue organizations throughout Oklahoma. These dogs have typically been victims of abuse or neglect and require substantial patience, care, and training in order to become suitable for placement with senior citizens or nursing homes. When training is complete and the animal passes rigorous testing, they are matched with the person(s) most compatible with the dog. By providing a senior citizen with a "friend", we believe that it increases their desire to live, helps them cope with loneliness, and gives them

a conduit to express affection. The dog becomes a companion to be petted, pampered and cared for which oftentimes eases feelings of grief over the loss of spouses, family members or friends.

The second type of dog is received from private citizens who want to have their personal dog trained in basic on-leash and off-leash obedience. This training is for short periods of time, most often one month, and is called "High Intensity Training"(HIT). When the training is complete, the dog-owners are amazed at the transformation accomplished in their dog. They are very appreciative of the training which would cost upwards of \$300.00 or more at a private dog training facility.

OTHER BENEFITS OF THE PROGRAM

In addition to the benefits for senior citizens, servicemen and women, hearing impaired persons, mentally handicapped individuals as well as animals rescued from neglect and abuse, there is also a tremendous benefit to the offender population.

Currently there are eleven long-term offenders actively involved with the FFF Program. By training the dogs, the "friend" changes the offender's outlook on life and the way he does time. The human-animal bond develops a more caring attitude and improved self image which translates into a more positive and caring attitude toward staff, other offenders and society as a whole. In addition, it gives them a sense of accomplishment and responsibility which could help them transition to society and become a productive citizen if eventually released from custody.

In addition to the offenders directly involved with the program, there are additional benefits to the offender population. It has long been noted that the housing unit where the FFF Program has been in operation has been the most peaceful and calmest unit at the facility. The presence of the dogs on the unit allows the men an opportunity to express affection and experience an increased sense of normalcy. As noted previously, therapy dogs also visit units where men are in the infirmary or long term assisted daily living.

CONCLUSION

Friends for Folks has been a tremendous asset to the citizens of Oklahoma, particularly some of the most needy and vulnerable members of society: the elderly and handicapped. The program also has a beneficial effect for the offender population, both the trainers and the population as a whole. Last but not least, the program helps our "friends," the dogs themselves, live a happier life. ■

CONTACT INFORMATION

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Dogs and their trainers.



LEE FAIRCHILD is a Correctional Case Manager, Dog Trainer/Program Coordinator and Crisis Negotiator at the Lexington Assessment and Reception Center in Lexington, Oklahoma. I know that sounds like a lot, but he happens to know what he's doing. Fairchild has worked for the Oklahoma Department of Corrections for a little over 15 years. He's the case manager to approximately 120 offenders and the Dog Trainer and Program Coordinator to 11 offenders in the Friends for Folks Program. He's also an 11 year member of the Crisis Negotiation team.

When he's not working, Lee can probably be found somewhere in a park working out with one or all five of his dogs practicing for one of the State or World Disc Dog Championships. He and his dog Gracie (pictured above), won the 2010 World Championship in the Micro Dog competition...and he and his dog, General, won 3 state titles in 05, 07 and in 09.

Medical Symposium November 9, 2011 Redlands Community College



1. Pat Loyd, Debbie Elledge, Jane Kirby, Joe McDonald, and Shari Jones
2. Norma Howard, Lisa Davis and Brianne Bray (Lindsay Municipal Hospital staff)
3. Michele Minietta, General Counsel's office
4. Devyn Denton, President/Founder, Emerging Nurses (presenter)
5. David Killebrew, LPN, Nurse of the Year; Finalists: Tina Sutton, LPN, Heather Knight, RN, and Alicia Pfaff, RN.
6. Gary Bailey, DDS, Airway Management, Inc. presenter)
7. Kenny Holloway, Deputy Director, Treatment and Rehabilitative Services

*(Mental Health, continued from page 10)
Immediately after Walter was released from prison, the RICCT staff worked to connect him to federal benefits and to address his immediate needs. Walter was enrolled in a mental health recovery group designed to help individuals with a serious mental illness develop skills for managing their recovery. At first, Walter had difficulty working in a group. "I still didn't like being around people and walked out of group at first, but I kept coming back," he said. Walter was discharged from prison in 2009. In April 2011, he told his story of recovery at the ODMHSAS board meeting. "I know in my heart that had it not been for the RICCT staff I would be back in prison," he said, "but instead I'm doing better than I've ever done in my life."*

Walter's story is not unique.

Reentry Program Outcomes

A recent outcome analysis of the program that was performed by ODMHSAS showed promising results. Outcomes of offenders served during the first 24 months of the program were compared with a baseline group comprised of similar individuals. Here are the results:

- Inpatient hospitalizations decreased from 8.7 percent to 2.4 percent;
- Outpatient service utilization increased from 55.1 percent to 89.1 percent;
- The median days from release to first day of service decreased from 15 days to three days;
- The rate of service engagement (receiving at least four services in 44 days from release from DOC) increased from 11.7 percent to 64.8 percent;
- Enrollment in Medicaid within 90 days of release from DOC increased

from 12 percent to 53 percent;

- Social Security benefit allowance rate increased from the Oklahoma average of 39 percent to 92 percent; and
- Return to the DOC decreased from 32.1 percent to 16.5 percent.

Suicide Prevention

Probably one of the most challenging responsibilities of all correctional staff is preventing incarcerated offenders from committing suicide. The reader may notice that the previous sentence did not limit responsibilities to only "correctional mental health professionals." That is because preventing suicide is everyone's responsibility – secretaries, wardens, correctional officers, etc., as well as mental health professionals.

Some of you may say, "Why should we stop someone from killing themselves, if they have decided that is what they want?" There are many good reasons, from general moral values to established case law. The Oklahoma Department of Corrections values the preservation of life wherever possible. To do otherwise would be to support lesser human values that would eventually infect all areas of our morals and our job performance.

On a more practical level, the courts have determined that the rate of suicides in a correctional system is indicative of the level of mental health care – or lack thereof – in that system. Therefore, when the DOC experiences a rate of suicide completions that exceeds the national average rate of prison suicide completions, serious problems exist in the suicide prevention program. That is the situation facing the Oklahoma Department of Corrections this fiscal year. Since July 1, 2011, there were six

completed suicides, which translates to approximately 24 suicides out of 100,000 compared to the national average of 16/100,000 prison suicides.

Steps have already been taken to analyze the current situation and to propose solutions. A review of the 8 most recent suicides (2010-2011) reveals significant change in the characteristics of suicide completions. In the past, most of the offenders who completed suicides were seriously mentally ill (MH-B or C1) and were housed on MHUs. In contrast, 5 of the last 8 suicides were MH-O (one was a MH-A and two were MH-B) and were either housed on H-Unit or an SHU and/or were anxious about upcoming transfers to other facilities. This implies a need for renewed efforts at communication with and training for security and unit management professionals.

In addition, a work group has been formed to refine and standardize the training curriculum. Moreover, advanced trainings will have been delivered during December 2011.

You are the key to a successful suicide prevention program. Please be sure to thoroughly review OP-140129, "Suicide Prevention." More importantly, please send any suggestions or concerns about how to improve our suicide prevention policies and procedures to Dr. Robert Powitzky, the Chief Mental Health Officer, at robert.powitzky@doc.state.ok.us. ■

Native American Heritage Month Diversity Lunch & Learn Series November 10, 2011 • Hillside Visitation Room



1. Kathy Davis, Finance and Accounting, and Stacy Morey, Central District Probation and Parole
2. Judy Harris, Finance and Accounting, and Pam Anderson, Sentence Administration
3. Chris Whipple, Information Technology
4. Grace Moreno
5. Wanda Whiteman, Cheyenne/Arapaho Department of Education
6. Debra Leistner, Mistress of Ceremony
7. Joan Candy-Fire, Certified Alcohol & Drug Counselor
8. David Toahty, Chief Finance Officer at the OKC Indian Clinic

(Crabtree, continued from page 14)

tude of experiences and interactions involving mentally ill offenders, in general many (perhaps leaning toward most) simply prefer the situation to go away. Poof! Like out of sight out of mind. However, our role as psychologists requires management of the crisis, stabilization and eventually return of the offender to the original unit or facility from whence he came.

“Offender So and So is off his meds and acting crazy.” The call goes out to mental health and then, I am, “Back in sight, back in mind.” For staff and the offending population, it is comforting to know that someone can make the instability issues of others go away. But with it comes that pesky, policy driven, too pro-offender, let’s look-at-this-way-too-many-more-ways-than-I-care-to-right-now, mental health person, I mean psychologist. When dealing with staff, my role vacillates between, save the moment or day to, “who is that guy and what is he talking about.” Staff and administration comments or perspectives run the gamut from, “I want to know, but not really that much,” to a softly muted “thanks,” to he probably should be taking his own medications. Yes, we (mental health people) are a rare breed and should probably try our own meds, but why ruin all the fun we have with others?

The most important lesson for me perhaps has come in the realization that I have to be many things to many different disciplines in order to conduct the business of mental health. With that comes a roller coaster ride of satisfaction to disappointment, favor and sometimes sudden disfavor, calm and storm all at once or at times almost never. At the end of the day, the true motivation is to have done it all with the offender being safe, progress in restoring mental health stability, stability for those who do not really understand or necessarily care that

much or who care a lot, and peace within for my OWN effort. This is the true nature of the discipline within corrections. It is not for everyone and many cannot do it well. Most don’t truly understand psychology and frankly are not supposed to. It is at times very lonely!

Myth: When I look at you, I don’t see color!” If you don’t see color, then you really don’t see ME! Race, Psychology and Mental Health: The Nexus. I have found that...

It is of importance to recognize that the one constant throughout all of the aforementioned interactions is that I am an African-American psychologist and professional staff member. Any communications dynamics between staff and offenders will always be tempered to a greater or lesser degree through the prism of my racial presence. In addition, it should also be noted that other factors such as gender, education, personality and culture are also in effect as would be in any situation, but are nevertheless tempered by my racial presence and differences. In any event, a delicate balance exist in this cultural soup that all in it are conscious of during communications and interactions. The subtle differences in the degree of difficulty it takes to get some things done, the lingering perceptions and misperceptions about tone, attitude, intent, the feeling that something may be slightly at a kilter but I can not place my finger on it or the serenity, or sometimes volatility of emotions when conducting business make all of us, but especially me, aware that much work remains to be done when at the nexus of mental health, psychology and race. I am certain that it has been a learning journey as well as a challenge and eye-opener for all.

AFTERWORD

“Prison is a state of mind”

Offenders live how they choose to live. They can be in relative peace or constant conflict anywhere. it is not the facility as we sometimes believe, it is their state of mind at a facility. As it goes for them, so it goes for us. What is your state of mind?

Previous correctional experiences include, Lovelock Correctional Center, Lovelock, NV, Oklahoma Forensic Center, Vinita, OK, Northeast Oklahoma CC, Vinita, Ok, Special management Unit II, Eyman Complex, Florence AZ ■



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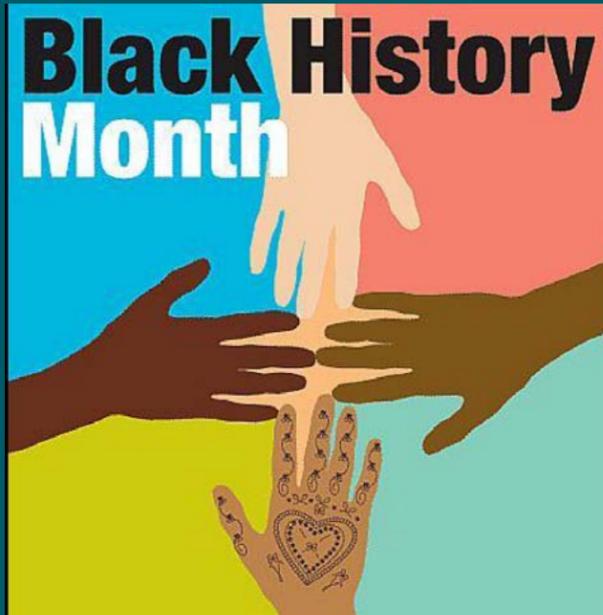
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OKLAHOMA Department of Corrections

Celebrates National Black History Month



(continued from page 15)
findings and recommendations of the JRI Working Group. House Bill 3052 was filed and includes the strategies recommended by the JRI Working Group. The bill's progress will be monitored during the upcoming legislative session beginning February 6, 2012.

During the afternoon session of the strategic planning meeting, Board members discussed their plans to identify how best to support the JRI priorities.

If this legislation is successful, Oklahoma will become one of eighteen states that have implemented strategies to address improving public safety, reducing recidivism, and cost containment using CSG's Justice Reinvestment model. ■

(Mabel Bassett, continued from page 22)
the program as a win/win situation for both Mabel Bassett and the offenders, as the training showed these offenders the benefits of helping other offenders through their past experiences in addressing and conquering their own

past mental health challenges.

Many of the program graduates stated, helping others is a great way to help themselves and increase their self-esteem. They also said it brings more meaning to their lives and the lives of other offenders.

At the graduation ceremony, both Warden Newton-Embry and Dr. McGuire congratulated the offenders for their accomplishments and thanked them for their willingness to give something back to their facility community. ■

FEBRUARY IS AMERICAN HEART MONTH

Live Well!

Know the facts about heart conditions and plan for good health!



(continued from page 18)
Howard University. When we published our book on the female incarceration rate of Oklahoma women we were unsuccessful in getting the Oklahoma legislature to listen to our suggestions on policies but Speaker Steele came to me a couple of years ago and said I know that you have a passion for recidivism and incarceration would you consider working alongside me on this issue. I want to start with the females and I said I would love to. So I pulled my dusty book off the shelf and I went this is for you Dr. Fletcher... we're fixing to get it done. So that's exciting for me. That's very rewarding. Especially to get to meet some of those women that our legislation impacted. That's very exciting.

What is the one thing that you think the public needs to know about you?

L.B.: Oh gosh! I don't know...I'm just a regular person. I'm just a mom who is very dedicated to serving the state of Oklahoma and I'll continue that as it's an honor to serve. Considering that my Grandmother worked the cotton fields and my Grandfather went to boarding schools and they were not very successful financially or any other way, so I think just telling people, "You know what...it doesn't matter where you come from...you can do it." ■

Tired of being tired? Try drinking cherry juice. There is growing evidence that it actually helps in warding off insomnia. With so many workers feeling the effects of lack of sleep, it can create problems with excessive fatigue and more serious consequences. Insufficient sleep is associated with a number of chronic diseases, such as diabetes, cardiovascular disease, obesity, depression, as well as motor vehicle and machinery related accidents.

In a study published by the Journal of Medicinal Food, scientists tested the effects of tart cherry juice on the sleep habits of 15 adults. The research subjects drank 8 ounces of the beverage every morning and night for two weeks. After a 'wash out' period of no juice, the participants were switched to another juice containing no cherry juice. The results showed that during the weeks they drank the cherry juice, there were significant reductions in insomnia severity compared to the period before consuming the juice. Overall, it was found the group averaged 34 more minutes of sleep than they had previously averaged. Researchers believe the reason may be due to the relatively high content of melatonin- a natural antioxidant that helps induce sleepiness.

According to one biomedical scientist and a leading authority on melatonin, cherries (frozen or juice) may be a better alternative for boosting the body's own supply of melatonin. Consumed regularly, cherries may help regulate the body's natural sleep cycle and increase sleep efficiency, including decreasing the time it takes to fall asleep.

In addition to normalizing sleep, scientists have discovered other health benefits from cherry juice. Research from the Journal of Medicinal Food suggests cherries may help to control weight and to prevent metabolic syndrome, which is defined as a cluster of symptoms including high blood pressure and high cholesterol that increases the risk of type 2 diabetes and heart disease.



JANUARY

40 Years
Theodore Limke Priv Pris/Jail Adm

37 Years
Joe Johnson JEHCC

36 Years
Leonard Wright Agri-Svcs/JBCC

34 Years
Robert Howard HMCC

33 Years
Marty Sirmons Institutions Division III

32 Years
Cynthia Pate OSP
Marian Calabretta TCDC

31 Years
Anthony Hunter CDCC
Joe Harwick Fem Off CC/RS
Bessie Greenway OSP

30 Years
Alice Turner JLCC
Carl Sellers DCCC
John Ferguson Altus CWC
Edward Evans Field Operations
Ingrid Bennett Personnel Unit

27 Years
David Wiley IT
Richard Waldon DCCC
Terry Martin DCCC
Sharon Harrison Fem Off CC/RS
Delores Farmer Institutions Division III
Doug Byrd DCCC

26 Years
Randall Workman OSP
Danny Williams IT
Gregory Sawyer Dept Svcs
Gretchen Samuels CDCC
Mary Morris BJCC
Alan McDonald Med Admin/LARC
Tommy Mariano NEDCC
Jerry Johnson HMCC
Jill Hinkston Div Comm Corr
Thelmita Davis EWCC
Gregory Brooks OSR

23 Years
Maurice Warrior JDCC
Brian Thomas IT
Richard Tate EWCC
Jeff Spaulding Priv Pris/Jail Adm
Shellye Sourie NEDCC
Gregory Sheik BJCC
John Montgomery MACC
Rance McKee JCCC
Wayne McClure NEDCC
Kazuko Kovarik IT
Gail Jackson Comm Sent/Off Info Svcs
Nancy Howard Proc/Accred
William Honaker Med Admin/MBCC
Haskell Higgins JEHCC
James Haynes OSR
Helen Greer EWCC
Michael Carpenter LARC
Terry Branch Institutions Division III

22 Years
David Thomas WKCC
Chris Payne JCCC
Leon Neal JLCC
Jearld Custar, Jr. NWDCC
Rickey Caywood JBCC

21 Years
Larry Sutton JBCC
Connie Riley Div Comm Corr
Rodney Redman NOCC
Gary Reading Trans Unit/JBCC
Robert Oldham OKC CCC
Shirley Newman SEDCC
James McNutt SWDCC
Warren McDoulett SEDCC
Rex Lasater JCCC
Stanley Klutts JLCC
Terry Jantz NWDCC
Randy Hicks ECCC
John Davis Sent Admin
Arthur Cook JBCC
Gregory Bull Mangum CWC
Ben Beede NOCC

20 Years
Bob Tomlinson OCI Mfg/LARC
John Rupert DCCC
Adam Hutchison NWDCC
Shonda Benedict Medical/MBCC

19 Years
Todd Welsh JBCC
Edmond Shropshire Agri-Svcs/JBCC
Steven Jean JBCC
Jay Hodges Programs Unit
Nancy Helms HMCC
Kenneth Goss Hobart CWC
Billy Gilbert NEDCC
Arden Espe JDCC
Richard Edminster Altus CWC

18 Years
James Trenton WKCC
Michael Shelite HMCC
Kathleen Phillips MBCC
Billy Howell JBCC
Randy Harding BJCC
Jeffrey Franks BJCC
Raymond Evelyn MBCC
Anita Donley BJCC

17 Years
Justin Reeves DCCC
Willa Newberry Medical/JBCC
Carla King MBCC
Fawnie Jones SEDCC
Janet Cannaday NOCC

16 Years
Kenneth Prigmore JCCC
Sarah Phillips Medical/OSP
Kristi Olzawski NEDCC
Jamie Means JEHCC
Mark Lester ECCC
Phillis Hughes NOCC

15 Years
Gerald Wilson, Jr. JBCC
Owen Vanorden EWCC
Daniel Praytor HMCC
David Pilgrim OSP
Kevin Nunnelee TCDC
Deveshia Natt Idabel CWC
Tommy Morrison OKC CCC
Stacy Lovins Fac Class/MBCC
Mary John NEDCC
Patricia Ferrell JDCC
Philip Densmore IT
Sherry Clickner DCCC
Brenda Camp JBCC

14 Years
Norma Wright JBCC
Jackie West TCDC
Danyal Wessel EWCC
Bradley Thomas MACC
Kristie Phillips CDCC
Daryl Morgan MACC
Lewis Layton MACC
Stephen Keeler MACC
Matthew Jarvis NOCC
Darren Guthrie JCCC
Carmelita Dela Cruz CDCC
Gerald David OCI Mfg/JCCC
Cherie Collins EWCC
Jack Boling, Jr. CDCC

13 Years
Alexander Wallace TCDC
Wendy Veech JCCC
Steven Longmire Sayre CWC
Vickie Lewis WKCC
Timothy Kirkpatrick JCCC

12 Years
Charity Zamorano Institutions Division I
Douglas Williamson Agri-Svcs/JBCC
Bankim Shah Female Off CC/RS
Theresa Settlemire HMCC
Ouida Nickell OSR
Joe Mills Education/LARC
Kathryn McCollum EWCC
Kimberly May LARC
Gregory James Trans Unit/JBCC
Samuel Jackson MACC
Jan Harkins JEHCC

21 Years
David Wortham TX/Rehab Svcs
Diana Pecha JCCC
Jeffrey Palmer, Sr. JEHCC
Stacey Morey CDCC
Christina Jones EWCC
David Huffman DCCC
Gil Gilbert ECCC
Randy Been JLCC
Leland Allison OSR

20 Years
Bob Tomlinson OCI Mfg/LARC
John Rupert DCCC
Adam Hutchison NWDCC
Shonda Benedict Medical/MBCC

19 Years
Todd Welsh JBCC
Edmond Shropshire Agri-Svcs/JBCC
Steven Jean JBCC
Jay Hodges Programs Unit
Nancy Helms HMCC
Kenneth Goss Hobart CWC
Billy Gilbert NEDCC
Arden Espe JDCC
Richard Edminster Altus CWC

18 Years
James Trenton WKCC
Michael Shelite HMCC
Kathleen Phillips MBCC
Billy Howell JBCC
Randy Harding BJCC
Jeffrey Franks BJCC
Raymond Evelyn MBCC
Anita Donley BJCC

17 Years
Justin Reeves DCCC
Willa Newberry Medical/JBCC
Carla King MBCC
Fawnie Jones SEDCC
Janet Cannaday NOCC

16 Years
Kenneth Prigmore JCCC
Sarah Phillips Medical/OSP
Kristi Olzawski NEDCC
Jamie Means JEHCC
Mark Lester ECCC
Phillis Hughes NOCC

15 Years
Gerald Wilson, Jr. JBCC
Owen Vanorden EWCC
Daniel Praytor HMCC
David Pilgrim OSP
Kevin Nunnelee TCDC
Deveshia Natt Idabel CWC
Tommy Morrison OKC CCC
Stacy Lovins Fac Class/MBCC
Mary John NEDCC
Patricia Ferrell JDCC
Philip Densmore IT
Sherry Clickner DCCC
Brenda Camp JBCC

14 Years
Norma Wright JBCC
Jackie West TCDC
Danyal Wessel EWCC
Bradley Thomas MACC
Kristie Phillips CDCC
Daryl Morgan MACC
Lewis Layton MACC
Stephen Keeler MACC
Matthew Jarvis NOCC
Darren Guthrie JCCC
Carmelita Dela Cruz CDCC
Gerald David OCI Mfg/JCCC
Cherie Collins EWCC
Jack Boling, Jr. CDCC

13 Years
Alexander Wallace TCDC
Wendy Veech JCCC
Steven Longmire Sayre CWC
Vickie Lewis WKCC
Timothy Kirkpatrick JCCC

12 Years
Charity Zamorano Institutions Division I
Douglas Williamson Agri-Svcs/JBCC
Bankim Shah Female Off CC/RS
Theresa Settlemire HMCC
Ouida Nickell OSR
Joe Mills Education/LARC
Kathryn McCollum EWCC
Kimberly May LARC
Gregory James Trans Unit/JBCC
Samuel Jackson MACC
Jan Harkins JEHCC

11 Years
Frank Harback OCI Mfg
Buffy Guthrie JDCC
Harold Brown JEHCC
Charles Brewer Institutions Division III

10 Years
Gerald Wilson, Jr. JBCC
Owen Vanorden EWCC
Daniel Praytor HMCC
David Pilgrim OSP
Kevin Nunnelee TCDC
Deveshia Natt Idabel CWC
Tommy Morrison OKC CCC
Stacy Lovins Fac Class/MBCC
Mary John NEDCC
Patricia Ferrell JDCC
Philip Densmore IT
Sherry Clickner DCCC
Brenda Camp JBCC

9 Years
Norma Wright JBCC
Jackie West TCDC
Danyal Wessel EWCC
Bradley Thomas MACC
Kristie Phillips CDCC
Daryl Morgan MACC
Lewis Layton MACC
Stephen Keeler MACC
Matthew Jarvis NOCC
Darren Guthrie JCCC
Carmelita Dela Cruz CDCC
Gerald David OCI Mfg/JCCC
Cherie Collins EWCC
Jack Boling, Jr. CDCC

8 Years
Alexander Wallace TCDC
Wendy Veech JCCC
Steven Longmire Sayre CWC
Vickie Lewis WKCC
Timothy Kirkpatrick JCCC

7 Years
Charity Zamorano Institutions Division I
Douglas Williamson Agri-Svcs/JBCC
Bankim Shah Female Off CC/RS
Theresa Settlemire HMCC
Ouida Nickell OSR
Joe Mills Education/LARC
Kathryn McCollum EWCC
Kimberly May LARC
Gregory James Trans Unit/JBCC
Samuel Jackson MACC
Jan Harkins JEHCC

6 Years
Frank Harback OCI Mfg
Buffy Guthrie JDCC
Harold Brown JEHCC
Charles Brewer Institutions Division III

5 Years
Gerald Wilson, Jr. JBCC
Owen Vanorden EWCC
Daniel Praytor HMCC
David Pilgrim OSP
Kevin Nunnelee TCDC
Deveshia Natt Idabel CWC
Tommy Morrison OKC CCC
Stacy Lovins Fac Class/MBCC
Mary John NEDCC
Patricia Ferrell JDCC
Philip Densmore IT
Sherry Clickner DCCC
Brenda Camp JBCC

4 Years
Norma Wright JBCC
Jackie West TCDC
Danyal Wessel EWCC
Bradley Thomas MACC
Kristie Phillips CDCC
Daryl Morgan MACC
Lewis Layton MACC
Stephen Keeler MACC
Matthew Jarvis NOCC
Darren Guthrie JCCC
Carmelita Dela Cruz CDCC
Gerald David OCI Mfg/JCCC
Cherie Collins EWCC
Jack Boling, Jr. CDCC

3 Years
Alexander Wallace TCDC
Wendy Veech JCCC
Steven Longmire Sayre CWC
Vickie Lewis WKCC
Timothy Kirkpatrick JCCC

2 Years
Charity Zamorano Institutions Division I
Douglas Williamson Agri-Svcs/JBCC
Bankim Shah Female Off CC/RS
Theresa Settlemire HMCC
Ouida Nickell OSR
Joe Mills Education/LARC
Kathryn McCollum EWCC
Kimberly May LARC
Gregory James Trans Unit/JBCC
Samuel Jackson MACC
Jan Harkins JEHCC

Anniversaries

David Hansen	HMCC			Tessie Jackson	Medical/JBCC	Freddie Mills	DCCC
Timothy Gilbert	JBCC	29 Years		Thomas Gann	NOCC	Shirley Mayhue	CDCC
Susan Fullerton	Female Off CC/RS	Donna Burkhalter	Training	Nancy Copple	Medical/OSP	Michael Elkins	MACC
Nathan Feehan	MBCC			Donna Carter	Medical/Admin	Ronald Davee	HMCC
David Evans	HMCC	28 Years				Terry Crenshaw	OSP
Kenneth Degraffenried	Agri-Svcs/JBCC	John Lewis	WKCC	19 Years		Jane Brown	DCCC
Victoria Chase	JBCC	Lori Evans-Wilson	Legal	Cathy Pattison	DCCC	Carla Barto	TCDDC
Jeremy Callahan	Hobart CWC	Ted Durfey	BJCC	Glenn Franklin, Jr.	ECCC		
Kelly Austin	TCDDC			Toni Brown	HMCC	13 Years	
Orville Aldridge	DCCC	27 Years				Zandra Stanfill	EWCC
		Phillip Wilson	DCCC	18 Years		Peter Richardson	JDCC
11 Years		Linda Haines	Medical/JCCC	David Young	OSR	Mary Reasnor	Medical/OSP
Eugean Shields	MACC	Ray Aldridge	SWDCC	Sherry Graham	Waurika CWC	Ben Peabody	CDCC
Jasinta Otubu	DCCC			Sherry DeCamp	JHCC	Rita Hyden	Medical/JBCC
David Mealer	JDCC	26 Years				Noami Gwinn	Ok County RS North
Robert Locklear	OSR	Debra Elledge	Medical/Admin	17 Years		Tonya Green	JHCC
Mary Lamb	JHCC			Darlene Robison	ECCC	Harold Collins	Training
Judy Ketchum	JHCC	25 Years		Darwin Roberts	MACC	Chet Chase	MBCC
Malcolm Hooley	Education/OSR	Millicent Newton-Embry	MBCC	Glenna Frawner	Trans Unit/LARC		
Stephen Farrell	DCCC	Kenny Holloway	TX/Rehab Svcs			12 Years	
Lisa Camp	Institutions Division III	Glenda Bradley	CDCC	16 Years		Janie Wade	WKCC
Nicole Cable	SEDCC	Pat Blankenship	Facility Class	Patricia Wytch	EWCC	Chad Reid	LARC
Ade Bajulaiye	MBCC			Patrick Wray	Institutions Division III	Dustin Quinton	CDCC
Mellonie Almaguer	OSR	24 Years		Jeffery Weldon	Ardmore CWC	Brandon Powell	LARC
		James Rudek	OSR	Jason Ward	JLCC	James Luman	JEHCC
10 Years		Kathleen Pittman	SWDCC	Josh Lee	LARC	Rickey Kelley	OSP
Don Wallace	Education/OSR	Richard Blann	SWDCC	Linda Eike	WKCC	David Jenkins	NOCC
Juan Pantoja	OSR			Deborah Cox	Com Sent/Off Info Svc	Susie Higgins	EWCC
Nick Collett	JLCC	23 Years				Heather Harrison	NOCC
Sharla Campbell	Facility Classification	Jennifer Wells	JLCC	15 Years		Christy Goodyear	EWCC
Jeanetta Boyd	OSP	John Somers	JHCC	James Williams	Medical Admin/HMCC	Brian Andrews	LARC
Donald Baird	OSP	Rita Salmon	WKCC	Nakia Whetstone-Cox	TCDDC		
		Russell Littlejohn	JLCC	Henry Tipken	EWCC	11 Years	
FEBRUARY		Jimmy Lane	Training	David Sipple	JHCC	Amanda Workman	Medical/OSP
37 Years		Kenneth Keith	ECCC	Veryl Shields	LARC	Tonya Waldman	Medical/Hillside CCC
Kathy Moore	CDCC	Dave Fullbright	Agri-Svcs/JLCC	Deborah Owens	Education/JLCC	Tameron Session	Altus CWC
		Denise Feltnor	Div Comm Corr	Kerry Minyard	Legal	Gerald Morris	JDCC
		Christopher Crouch	JEHCC	Brenda Jinks	NOCC	James Holland	Medical Admin/HMCC
		Carrie Bridges	WKCC	Charles Jackson	JEHCC	Julie Free	TCDDC
35 Years				Linda Herrington	Medical/MACC	Helen Bell	JCCC
Frank Mesarick	Div Comm Corr	22 Years		Brian Franklin	JBCC	Harry Abercrombie	Union City CCC
		Bret Tustin	SEDCC	Vernon Doyle	JEHCC		
34 Years		Ronald Shipman	NWDCC	Jarrold Day	JDCC	10 Years	
Robert Vaughan	Agri-Svcs/HMCC	Virlin Hearod	EWCC	Herman Blackward	Trans Unit/JLCC	Christine Triplett	Medical/MACC
		Richetta Brown	CDCC	Westley Baugh	Trans Unit/JBCC	Carrie Teel	NEDCC
32 Years		Carmelia Brossett	NEDCC	Curtis Ayers	Earl A. Davis CWC	Rita Slife	TCDDC
Mance Morris	JHCC			Diane Adams	Education/JEHCC	Patricia Rowell	OSP
		21 Years				Donald Reibert	DCCC
31 Years		Christie Kornele	Com Sent/Off Info Svc	14 Years		Terry Morgan	JCCC
Shon Bruesch	JEHCC	James Keithley	Mental Health/JHCC	Derrick Van Winkle	Trans Unit/JLCC	Jennifer Lehr	Madill CWC
		Lavella Jackson	Com Sent/Off Info Svc	Michael Stout	Education/WKCC	Jeffrey Johns	DCCC
30 Years				Billy Sommerfeld	NOCC	Kenneth Genzer, Jr.	Oklahoma City CCC
James Rabon, III	Sent Admin	20 Years		Elizabeth Raines	TX/Rehab Svcs	William Francis	LARC
Patricia Davis	Class/Pop	Lea Klingler	Field Operations	Sherry Pickens	OSP	Carl Fite	JLCC

CALENDAR

FEBRUARY

Black History Month

2	Groundhog Day
14	Valentine's Day
20	President's Day
21-24	Pardon and Parole Board Hearing Hillside CCC
23	Board of Corrections Clara Waters CCC
24	Flag Day

MARCH

National Women's History Month

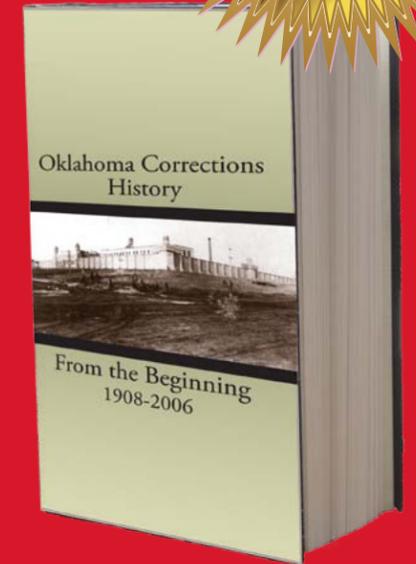
11	Daylight Saving Time Begins
20	Spring Begins
20-23	Pardon and Parole Board Hearing Hillside CCC
29	Board of Corrections DOC Administration Building

APRIL

16	Board of Corrections Hillside CCC
17-20	Pardon and Parole Board Hearing Hillside CCC

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Read about how a prison system started by a woman, before statehood, became the Oklahoma Department of Corrections in **Corrections History- from the Beginning 1908-2006**. This history compiled from the departmental archives, research, criminal justice scholars and employees represents the most accurate information available on and about the second largest agency in Oklahoma.

Visit www.doc.state.ok.us to order your book.

DEMOGRAPHICS

(as of December 30, 2011)

OFFENDER INFORMATION			PROBATION CLIENT INFORMATION			PAROLE CLIENT INFORMATION											
Total Offenders			25,387			Total Probation Clients			21,154			Total Parole Clients			3,192		
Gender	Count	Percentage	Gender	Count	Percentage	Gender	Count	Percentage									
Male	22,835	89.9%	Male	16,256	76.8%	Male	2,674	83.8%									
Female	2,552	10.1%	Female	4,898	23.2%	Female	518	16.2%									
Ethnicity	Count	Percentage	Ethnicity	Count	Percentage	Ethnicity	Count	Percentage									
Caucasian	13,558	53.4%	Caucasian	13,247	62.6%	Caucasian	1,753	54.9%									
African American	7,452	29.4%	African American	4,060	19.2%	African American	993	31.1%									
Native American	2,297	9.0%	Native American	1,733	8.2%	Native American	151	4.7%									
Hispanic	1,940	7.6%	Hispanic	1,687	8.0%	Hispanic	260	8.1%									
Other	140	0.6%	Other	427	2.0%	Other	35	1.1%									
Crime Type	Count	Percentage	Crime Type	Count	Percentage	Crime Type	Count	Percentage									
Violent	12,342	48.6%	Violent	4,941	23.4%	Violent	721	22.6%									
Non-Violent	13,052	51.4%	Non-Violent	16,213	76.6%	Non-Violent	2,471	77.4%									
Average Age	37.7		Average Age	35.9		Average Age	44.8										

SYSTEM SUMMARY		DEATH ROW			COST OF INCARCERATION (FY 2010 Actual Expenditures)			INFORMATION ON OFFENDERS ASSIGNED TO WORK PROGRAMS	
Type	Count	Ethnicity	Male	Female	Type	Daily	Annual	Type of Work	Count
Facility Total	17,655	Caucasian	32	1	Maximum	\$75.87	\$27,693	OCI Production	986
Contract Facilities	6,413	Black	27	0	Medium	\$42.41	\$15,480	Agri-Services	303
Out Count	1,304	Hispanic	2	0	Minimum	\$40.43	\$14,758	Wardens Crews	8
Probation	21,154	Native American	5	0	Community	\$41.55	\$15,167	PPW Crews	1,552
Parole	3,192	Other	0	0	Work Centers	\$36.31	\$13,253	Institutional Gardens	307
System Total	49,718	Total	66	1	Probation and Parole	\$2.81	\$1,026	Institutional Support	9,719
OFFENDER RECEPTIONS					FY2011 Appropriated Budget: \$462,141,777			Work Releases	1,029
Offender Reception during the Month of December								Total Count	13,904
Offenders Received for Fiscal Year to Date									
Recidivism Rate (within 3 years)									

Retirements

MARCH	
James Carr	Gregory Paris
Michael Hancock	Musibau Shopeyin
Anthony Hunter	Alice Turner
APRIL	
Sharon Dale	Waverly Merriweather
Patricia Davis	Susan Nicholson
Thomas Gleese	Warner Pitchford
Jill Hinkston	Freddie Stevenson
Lynn Killian	Glenda Walker
Jon Lemmond	

NEXT ISSUE

Prison Chaplains Alternatives to Prison

Oklahoma Department of Corrections

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