MALE INMATES OKLAHOMA DEPARTMENT OF CORRECTIONS CUSTODY ASSESSMENT SCALE

Α.	IDEN	FICATION Fa	cility:	DATE:								
	Inmate	e Name (Last, First, I otion Date:	Viddle):	Race/Gender:		ODOC Number: Date of Birth:						
В.	CUSTODY EVALUATION (Use the Offense Severity Scale in Attachment A: rate most serious current charge/conviction, including CC, CS, active SS, rebill cases, detainers and warrants) (5-ACI-5B-04)											
	1.		VICTIONS CURREN oderate = 1 pts. Hig			Score						
		Offense	Case Number	Discharge	Conviction Date	Case Type						
	2.	ESCAPE HISTORY				Score						
	• • •	No escapes or attempts= 0Escapes from Community Corrections, Juvenile Group Home, Halfway House, PPCS, GPS, EMP and CSP= 0Two or more escapes from minimum, Transit Detention Unit (TDU) or juvenile detention center past ten years= 6Escape or attempted escape from minimum, TDU or juvenile detention center within the past five years= 7Any escape or attempted escape from medium or maximum, county jail/court house, juvenile medium secure= 7										
	·	institution (COJC, S security that resulted unless the inmate re	WOJC and L.E. Rade I in an injury to anoth eceives 0 points for or an escape in this se	er), restricted/segre er or a felony conv age. Inmates at a	egated housing unit iction for a violent c ge 51 or over, who	or escape from any level of crime while on escape status or are within ten years of the for ten years from the date of	F 9					
		Facility	Security Level	Escape D	Date A	Apprehension Date						
	3.		E DISCIPLINARY CO nonths, Class A – pas			Score	_					
		None= 0One= 2Two= 2Three or more= 3	1	Class	Date							
	4.	MOST SERIOUS DISCIPLINARY CONVICTION (5-ACI-5B-04) Score only the most serious within the time frames below) Score (Class B- last six months, Class A - past year, Class X Non-Predatory – past year, Class X Predatory-last two years) Score										
		None Class B Class A Class X Non-Predate	= 0 = 0 = 2 ory = 3	Offense Code _		assDate of Offense assDate of Offense assDate of Offense						
		Class X Predatory (X2 through X-10) (past two years) $= 4$ Class X X-2, X-3, X-4 this incarceration (01-4, 04-1 or 04-8 prior to 11/1/15)(04-3 prior to 9/14/89) = 4										
	5.	ASSIGNED PROGI (5-ACI-5E-15, 4-AC	RAM PARTICIPATIO RS-5A-01)	N (during this incare	ceration)	Score	-					
		None, waiting list, enrolled, participating = 0 pts. Completed program (education, career tech, cognitive behavior, = -1 pt. re-entry (CIMC Life skills/Principle Life Skills) or substance abuse treatment this incarceration.										
		Recommended Pro	gram:		Co	ompletion/Failure Date:/	/					
	6.	ADJUSTMENT Level 1 = Level 2 = Level 3 or 4 = -	0			Score	_					
	7.	CURRENT AGE				Score						

		Age 28 or younger Ages 29 to 36		= 4 = 3										
		Ages 37 to 42 Ages 43 to 50		= 2 = 1										
		Ages 51 and over		= 0										
	8.	COMPREHENSIVE C	JSTODY S	CORE (A	dd ite	ems 1-7)			То	tal Sco	ore			
C.	SCALE	LE SUMMARY AND RECOMMENDATIONS					ASSESSED CUSTODY LEVEL							
	 CUSTODY LEVEL INDICATED BY SCALE 8 or fewer points on items 1-7 9 to 16 points on items 1-7 17 or more points on items 1-7 						= Minimum = Medium = Maximum							
	 MANDATORY OVERRIDES (No lower than medium securi • Restricted Earned Credits with excessive days • Life/Life without Parole /100 years or more • ICE Detainer (High and Highest Crime Category) • Life w/ Determinant Time/Excessive Days 						y) (check all that apply) °Time left to serve (Highest crime category) ° Escape Points Greater than 6							
 DISCRETIONARY OVERRIDES FOR HIGHER SECURITY (check all that apply) Circumstances of the Offense Distory of Violence Other (specify) Time Left to Serve 								olence						
	4.	DISCRETIONARY OV • Circumstances of Off • Time Left to Serve			° Pr	ECURITY (chec ogram Completi her (specify)	on							
	5.	RECOMMENDED CUS	STODY LE º Medi			° Maximur	ı							
	6.	 COMMUNITY PLACEMENT – eligible per OP-060104 (5-ACI-5F-03, 4-ACRS-6A-11) 												
	7.	• GPS eligible per OP-	061001											
	8.	COMMENTS:											_	
	9. S	GIGNATURES:												
Preparer's Signature Committee Member Committee Member Committee Chair Inmate Signature						CM	I Code/Badge:			Date	:			
										Date	-			
										Date Date	-			
										Date				
		AUTHORITY:		Concur		Do not Concur	Changed to:		Min.		Med.		Max.	
Routin	e:	Case Mgr./Coord./	Supv:							Date	•			
Non Ro		Facility Head Signa								Date				
(If Cha		Inmate Signature:		_						Date				
	n for Ch	NOFFICE: hange:					Changed to:		Min		Med.		Max.	
Chief A	Adminis	trator of Institutions/de	esignee:							Date	<u> </u>			
	OPULA n for Ch	TION OFFICE:		Concur		Do not Concur	Changed to:		Min.		Med.		Max.	
		of Classification and I	Population	n, Popula	tion					Dat	e:			