

**OKLAHOMA DEPARTMENT OF CORRECTIONS
FEMALE INITIAL CUSTODY ASSESSMENT SCALE**

A. Identification

Facility: XXXXXXXXXXXX	Date: 99/99/9999	
Name (Last, First, Middle): XXXX, XXX	DOC #: 9999999	
Reception Date: 99/99/9999	Race/Sex: X/X	DOB: 99/99/9999

B. Custody Evaluation

- 1. Crime Institutional Behavioral Rating –** Using the Crime Institutional Behavioral Scale to rate the current commitment offenses. (See Attachment A.) Points:
- | | |
|----------|---|
| Low | 1 |
| Moderate | 3 |
| High | 5 |
- 2. Escape History** Points:
- | | |
|---|----|
| No escapes or attempted escapes | 3 |
| Escape from GPS, Halfway House or Community Corrections within the past 2 Years | 7 |
| Escape from Minimum Custody, County Jail, TDU, or Juvenile Detention within the past 5 Years | 10 |
| Escape from Medium or Maximum Security, Juvenile Secure Institutions (COJC, SWOJC and OKC4G) restricted/special management housing or escape from any level of security that resulted in a felony conviction within the past 10 Years | |
| Escape Facility: Security Level: Apprehension Date: | |
- 3. Institutional Violence within 5 Years** Points:
- | | |
|---|---|
| None | |
| Predatory X Disciplinary Conviction within the past 5 Years | 2 |
| Predatory X Disciplinary Conviction within the past 4 Years | 3 |
| Predatory X Disciplinary Conviction within the past 3 Years | 4 |
| Predatory X Disciplinary Conviction within the past 2 Years | 5 |
| Predatory X Disciplinary Conviction within the past Year | 6 |
- 4. Number of High Institutional Behavioral Crimes within the past 10 Years** Points:
- Count prior and current convictions. Counts Count! Not the number of cases.
- | | |
|-----------|---|
| None | 0 |
| 1 - 2 | 2 |
| 3 - 5 | 4 |
| 6 or more | 6 |
- 5. Disciplinary History** Points:
- | | |
|---|---|
| None or All Class B misconducts | 0 |
| 1 Class A misconduct within the past 2 Years | 1 |
| 2 or more Class A misconducts within the past 3 Years | 2 |
| 1 or more Non-Predatory X misconduct | 3 |

6. Current Age

- 60+
- 46 – 59
- 33 – 45
- 23 – 32
- 22 or younger

Points:

- 1
- 0
- 1
- 2
- 3

Comprehensive Custody Score (Add factors 1 – 6.)

Total
Score

C. Scale Summary and Recommendations

1. Custody Scale Indicated by Scale

Score:

- Minimum = 0 – 8 Points
- Medium = 9 – 12 Points
- High Medium = 13+ Points

2. Mandatory Overrides (No Lower than **Medium** Custody. Check all that apply.)

- | | |
|--|---|
| <input type="checkbox"/> Restricted Earned Credits with Excessive Days | <input type="checkbox"/> Life Sentence with Determinant Time to Serve |
| <input type="checkbox"/> Life/Life without Parole/Death | <input type="checkbox"/> Time Left to Serve (Attachment A) |
| <input type="checkbox"/> ICE Detainer (Attachment A) | <input type="checkbox"/> Escape points of 7 or greater |

3. Discretionary Overrides for Higher Custody (Check all that apply.)

- | | |
|--|--|
| <input type="checkbox"/> Circumstances of the Offense | <input type="checkbox"/> Time Left to Serve |
| <input type="checkbox"/> History of Violence | <input type="checkbox"/> Felony Detainer/Pending Case(s) |
| <input type="checkbox"/> Documented STG leader and/or perpetrator
of STG related violence | <input type="checkbox"/> Education/Employment |
| <input type="checkbox"/> Other (specify): | <input type="checkbox"/> Medical Reasons |
| <input type="checkbox"/> Program Completion | <input type="checkbox"/> Mental Health Reasons |

4. Discretionary Overrides for Lower Custody (Check all that apply.)

- | | |
|---|---|
| <input type="checkbox"/> Circumstances of the Offense | <input type="checkbox"/> Time Left to Serve |
| <input type="checkbox"/> Intermediate Revocation Facility | <input type="checkbox"/> Other (specify): |
| <input type="checkbox"/> Program Completion | <input type="checkbox"/> Delayed Sentence |
| <input type="checkbox"/> PPB Stipulation | |

5. Recommended Custody Level

- Minimum Medium High Medium

6. Placement Eligibility

- Community Placement – Eligible per OP-0601 GPS Placement – Eligible per OP-061001

7. Comments:

D. SIGNATURES

Custody Level Concur Do Not Concur **Change to:** Min Med High Med
Reason(s) for Change: XXXXXXXXXXXXXXXXXXXXXXX
Comment: XXXXXXXXXXXXX
Classification Review Date: 99/99/9999
Case Manager: XXXXXXXX, XXXX

Custody Level Concur Do Not Concur **Change to:** Min Med High Med
Reason(s) for Change: XXXXXXXXXXXXXXXXXXXXXXX
Comment: XXXXXXXXXXXXX
Classification Review Date: 99/99/9999
Unit Classification Chairperson: XXXXXXXX, XXXX

E. REVIEW AUTHORITY

Custody Level Concur Do Not Concur **Change to:** Min Med High Med
° Routine: ° Non-Routine
Reason(s) for Change: XXXXXXXXXXXXXXXXXXXXXXX
Comment: XXXXXXXXXXXXX
Classification Review Date: 99/99/9999
Facility Classification Coordinator: XXXXXXXX, XXXX

Custody Level Concur Do Not Concur **Change to:** Min Med High Med
Reason for Change: XXXXXXXXXXXXXXXXXXXXXXX
Comment: XXXXXXXXXXXXX
Classification Review Date: 99/99/9999
Facility Head Signature: XXXXXXXX, XXXX

Inmate Signature

Add Digital Signature

Date: 99/99/9999