

SCALE SUMMARY & RECOMMENDATIONS

8 or More Points on Items 1-3
12 or More Points on Items 1-7
7-11 Points on Items 1-7
6 or Fewer Points on Items 1-7

Maximum
Maximum
Medium
Minimum

CUSTODY LEVEL INDICATED BY SCALE

1 - Minimum

2 - Medium

3 - Maximum

SCORE _____

CUSTODY LEVEL OVERRIDE FACTORS

MANDATORY OVERRIDE: An offender cannot be reclassified to minimum if current offense is: (Unless approved by an Administrator)

____ Murder – First Degree ____ Homicide by Abuse ____ Murder – Second Degree
____ Assault – First Degree ____ Kidnapping – First Degree ____ Rape – First Degree

DISCRETIONARY OVERRIDES – TO INCREASE CUSTODY LEVEL

____ Current Charge or Previous Conviction for Sex Crime ____ Weapons Charges
____ Current Charge or Previous Conviction of Domestic Violence ____ Known Gang Affiliation
____ Known Management Problems ____ Suspected/Known Drug Trafficker
____ Nature of Offense More Severe Than Charge Would Indicate ____ Serious Violence Threat
____ Severe Felony Arrest History Beyond 5 Years (Cumulative) ____ Substance Abuse Problem
____ Previous Prison Time ____ Suspected Escape Threat
____ Warrant/Detainer USM'INS

DISCRETIONARY OVERRIDES – TO LOWER CUSTODY LEVEL

____ Description of Offense Not as Severe as Scale Would Indicate ____ Good Institutional Behavior
____ Prior Record Not as Severe as Scale Would Indicate ____ Short Time Remaining to Serve
____ Sentenced / Short Term

SPECIAL HOUSING FACTORS

____ Medical Problem(s) ____ Sexual Orientation
____ Psychological Impairment ____ Protective Custody
____ Suicide Risk ____ Physical Impairment
____ Cannot be Housed with Co-Defendant(s) ____ Developmentally Disabled
____ Previous Law Enforcement Employment
____ Other (Explain) _____

RECOMMEND CUSTODY / HOUSING PLACEMENT LEVEL

Custody

Housing

1 – Minimum 1 – General Population 4 – Administrative Segregation
2 – Medium 2 – Protective Custody 5 – Mental Health
3 – Maximum 3 – Medical 6 – Other _____

OFFICER'S SIGNATURE: _____ DATE: _____

FINAL CUSTODY AND HOUSING LEVEL

Custody

Housing

1 – Minimum 1 – General Population 4 – Administrative Segregation
2 – Medium 2 – Protective Custody 5 – Mental Health
3 – Maximum 3 – Medical 6 – Other _____

REASON(S) FOR PLACEMENT IF THIS DEPARTS FROM RECOMMENDED LEVELS:

SUPERVISOR'S REVIEW / APPROVAL: _____ DATE: _____