

## CASE MANAGEMENT AUDIT

Inmate Name:	ODOC#:
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Facility:	Case Manager:	Security Level:
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Auditor Name:	Date of Audit:
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<b>Audit Type: CUSTODY ASSESSMENT</b> <input type="checkbox"/>
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<b>Question #1:</b> Are CHRONOLOGICAL ENTRIES completed monthly as required, to include inmate contact?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	NA <input type="checkbox"/>
<b>Comments:</b>			

<b>Question #2:</b> Is the required content included in each CHRONOLOGICAL ENTRY, to include referrals to programs, participation in programs and completion of programs?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	NA <input type="checkbox"/>
<b>Comments:</b>			

<b>Question #3:</b> Is the INMATE PROFILE FORM completed accurately?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	NA <input type="checkbox"/>
<b>Comments:</b>			

<b>Question #4:</b> Are ADJUSTMENT REVIEWS completed timely?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	NA <input type="checkbox"/>
<b>Comments:</b>			

<b>Question #5:</b> By using the OFFENSE SEVERITY SCALE, is the most recent serious current charge/ conviction, including any CC, CS, rebill cases and detainers/warrants, accurately assessed and points awarded?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	NA <input type="checkbox"/>
<b>Comments:</b>			

<b>Question #6:</b> By considering the stipulated time period, is the most serious ESCAPE or ATTEMPTED ESCAPE correctly assessed?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	NA <input type="checkbox"/>
<b>Comments:</b>			

<b>Question #7:</b> Is the NUMBER of ACTIVE DISCIPLINARY CONVICTIONS scored and recorded? (CUSTODY ASSESSMENT ONLY)	YES <input type="checkbox"/>	NO <input type="checkbox"/>	NA <input type="checkbox"/>
<b>Comments:</b>			

<b>Question #8:</b> By considering the stipulated time periods, have the correct points for the inmate's DISCIPLINARY HISTORY or MOST SERIOUS DISCIPLINARY CONVICTION been assessed? (INITIAL and CUSTODY ASSESSMENT) YES <input type="checkbox"/> NO <input type="checkbox"/> NA <input type="checkbox"/>
<b>Comments:</b>

<b>Question #9:</b> Has the correct points been awarded for the inmate's ASSIGNED PROGRAM PARTICIPATION? (CUSTODY ASSESSMENT ONLY) YES <input type="checkbox"/> NO <input type="checkbox"/> NA <input type="checkbox"/>
<b>Comments:</b>

<b>Question #10:</b> Has the appropriate points been awarded for the inmate's ADJUSTMENT? (CUSTODY ASSESSMENT ONLY) YES <input type="checkbox"/> NO <input type="checkbox"/> NA <input type="checkbox"/>
<b>Comments:</b>

<b>Question #11:</b> Are points accurately awarded for the INMATE'S AGE? YES <input type="checkbox"/> NO <input type="checkbox"/> NA <input type="checkbox"/>
<b>Comments:</b>

<b>Question #12:</b> Has all DISCRETIONARY OVERRIDES been identified? YES <input type="checkbox"/> NO <input type="checkbox"/> NA <input type="checkbox"/>
<b>Comments:</b>

<b>Question #13:</b> Has all MANDATORY OVERRIDES been identified? YES <input type="checkbox"/> NO <input type="checkbox"/> NA <input type="checkbox"/>
<b>Comments:</b>

<b>Question #14:</b> Is the RECOMMENDED CUSTODY LEVEL appropriate and are the comments completed, if needed? YES <input type="checkbox"/> NO <input type="checkbox"/> NA <input type="checkbox"/>
<b>Comments:</b>

<b>Question #15:</b> Has the inmate's TRANSFER PACKET, to include GPS packet, been completed and submitted in a timely manner? YES <input type="checkbox"/> NO <input type="checkbox"/> NA <input type="checkbox"/>
<b>Comments:</b>

<b>Question #16:</b> Does the CASE PLAN reflect the inmate's assessed needs and is it being followed? YES <input type="checkbox"/> NO <input type="checkbox"/> NA <input type="checkbox"/>
<b>Comments:</b>

<b>Question #17:</b> Has the custody assessment been completed annually as required (unless circumstances dictate an earlier review)? YES <input type="checkbox"/> NO <input type="checkbox"/> NA <input type="checkbox"/>
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Community:	Minimum:	Medium:	Maximum
Corrective Action:			

<p><b>Question #18:</b> Has pre-release planning been addressed in accordance with OP-060901 entitled "Pre-Release Planning"?</p> <p style="text-align: right;">YES <input type="checkbox"/>      NO <input type="checkbox"/>      NA <input type="checkbox"/></p>
<p><b>Comments:</b></p>

(R 01/22)