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Management of Gender Nonconforming Inmates	ACA Standards: None		
Joe M. Allbaugh, Director Oklahoma Department of Corrections		Signature on File	

Management of Gender Nonconforming Inmates

The purpose of this procedure is to establish processes for the appropriate management of gender nonconforming inmates in the Oklahoma Department of Corrections (ODOC).

I. Definitions

Definitions related to gender nonconforming inmates are outlined in [OP-030601](#) entitled “Oklahoma prison Rape Elimination Act.”

A. Personal Identity Administrative Review Authority (PIARA)

For the purpose of ensuring adherence to PREA standards for the management and care of gender nonconforming inmates, the director will appoint a designee/designees to serve as the Personal Identity Administrative Review Authority (PIARA). The PIARA designee may request assistance from the committee. The committee may include, but is not limited to any or all of the following:

1. Chief mental health officer;
2. Chief medical officer;
3. Agency PREA coordinator;
4. Director, Health Services;

5. Inmate's facility head or designee; and/or
6. Medical and mental health provider at facility level.

II. Determining Gender Nonconformity

When determining whether inmates are gender nonconforming, the following will be taken into consideration:

A. Self-identification as Gender Nonconforming

During intake and upon any intra-system transfer, classification staff will ensure a "Self Report Form" ([OP-030102](#), [Attachment B](#)) is completed privately by the inmate, to include whether or not he or she identifies as lesbian, gay, transgender, bisexual, or intersex. (PREA 115.41/115.241) if the inmate identifies on the "Self Report Form" as transgender, the form will be forwarded to the Correctional Health Services Administrator (CHSA). The CHSA will scan the "Self Report Form" into the inmate's Electronic Health Record and assign the note to the chief medical officer (CMO) and chief mental health officer (CMHO).

B. Medical or Legal Documentation of Gender Nonconformance

Diagnosis of Gender Dysphoria has been confirmed by a qualified mental health professional based on the diagnostic criteria of the *Diagnostic and Statistical Manual of Mental Disorders*.

- C. Inmate's appearance and/or behavior does not match the gender identity on his or her documents. These inmates will be evaluated by health services to clarify gender nonconformity cases, unless waived by the inmate. This assessment will include review of the "Self Report Form." Medical examinations will not be performed solely for the determination of genitalia characteristics, unless requested by the inmate for verification. Examination of the genitalia may be incorporated into a more general routine physical examination, or for other medical purposes such as cancer screening or subjective complaints pertaining to the genitals. (PREA 115.15/ 115.215)

III. Initiating Review by PIARA

Inmates who are, or perceived to be, gender nonconforming may have their housing, clothing, and health care needs specific to their gender nonconformity assessed by PIARA. This committee will consider each gender nonconforming inmate on a case-by-case basis to ensure fair, safe, and appropriate management of their gender associated requests. (PREA 115.42/115.242)

- A. Consideration by PIARA of an inmate's request will be initiated by the inmate through the grievance process established in [OP-090124](#) entitled "Inmate/Offender Grievance Process."

- B. PIARA consideration may be requested by health services staff, a facility's PREA compliance manager, or a facility/unit head, if an exception to policy is needed or to determine consistency of agency practice. The referring staff member will complete a "Referral For Gender Associated Requests" ([DOC 140147A](#), attached). The completed form will be scanned and emailed to PIARA@doc.ok.gov.
- C. Upon receipt of a PIARA review request, the PIARA will convene to review the request within 30 days

IV. Reasonable Accommodations for Gender Nonconforming Inmates

A. Housing

Housing will be in accordance with [OP-030601](#) entitled "Oklahoma Prison Rape Elimination Act." Health services staff may make housing recommendations to the facility head, after any necessary medical and/or mental health assessments have been completed. Complex cases that require a more extensive review will be submitted to PIARA.

B. Inmate Property

Inmates will be provided standard ODOC attire in accordance with [OP-030120](#) entitled "Inmate Property." Gender nonconforming inmates may receive consideration for undergarments or other gender nonconforming property. A "Request for Health Services" form may be submitted for a mental health evaluation regarding these property requests. If the facility's qualified mental health professional approves the property request, the request is forwarded to the Chief Mental Health Officer or designee for approval. Medical and/or mental health staff will forward their recommendations to the facility head for approval or denial. If denied, a grievance may be filed in accordance with [OP-090124](#) entitled "Inmate/Offender Grievance Process." Appeal of the grievance will be made to PIARA, which will make the final determination regarding property requests. If approved, the facility where the inmate is housed will issue the property. The property must be noted on the "Inmate Property Inventory Form" ([DOC 030120A](#)).

Any approved property will be allowed at subsequent facilities should the inmate transfer unless the approval has been revoked. Any authorized undergarments may be worn if not visible when the inmate is out of their cell. At no time will authorized undergarments be worn in a manner that is disruptive or provocative.

Misuse of undergarments or other approved gender nonconforming property may result in revocation of authorization for the property.

C. Hormonal Treatment

1. Hormonal treatment of inmates with Gender Dysphoria may be undertaken only after all the following occurs;
 - a. Diagnosis of Gender Dysphoria has been confirmed by a qualified mental health professional appointed by the Chief Mental Health Officer based on the diagnostic criteria of the most current version of the *Diagnostic and Statistical Manual of Mental Disorders*.
 - b. A “Female to Male Hormonal Therapy Risk and Information Form” ([Attachment B](#), attached) or “Male to Female Hormonal Therapy Risk and Information Form” ([Attachment A](#), attached) is read, signed by the inmate and scanned into the inmate’s electronic health record.
2. Once the above steps have been completed, hormonal treatment may be considered by the qualified medical provider if the following:
 - a. Hormonal treatment was initiated prior to incarceration; or
 - b. Surgical castration has occurred, verified by examination and/or medical records; or
 - c. The facility medical provider determines hormone treatment is medically necessary. The facility medical provider will complete the Gender Dysphoria note entitled, “Request for Hormone Treatment, and assign the note to the chief medical officer (CMO) for approval. The CMO must approve the hormone treatment before the facility medical provider can prescribe the hormone treatment.

D. Surgical Sex Reassignment

Surgical procedures for the initiation, advancement, or maintenance of sex reassignment will not be performed, except in extraordinary circumstances.

In accordance with [OP-140121](#) entitled “Outside Providers for Health Care Management,” the facility’s medical provider will refer an inmate’s request for surgical treatment of gender dysphoria to the Utilization Review Committee (URC) for consideration of approval. If the referral is approved, URC will forward the referral to the director for final review and authorization.

Self-inflicted genital mutilation will not constitute surgical reassignment therapy and will not qualify an inmate for placement in a facility for inmates of the opposite sex from the inmate’s birth sex.

V. References

OP-030102 entitled "Inmate Housing"

OP-030120 entitled "Inmate Property"

OP-030601 entitled "Oklahoma Prison Rape Elimination Act"

OP-090124 entitled "Inmate/Offender Grievance Process"

OP-140121 entitled "Outside Providers for Health Care Management"

Rape Elimination Act of 2003, 42 U.S.C.A. §15601

"Diagnostic and Statistical Manual of Mental Disorders"

PREA 115.15/115.215

PREA 115.41/115.241

PREA 115.42/115.242

VI. Action

The chief medical officer is responsible for compliance with this procedure.

The director of Health Services is responsible for the annual review and revisions.

Any exceptions to this procedure will require prior written approval from the agency director.

This procedure is effective as indicated.

Replaced: Operations Memorandum No. OP-140147 entitled "Management of Gender Nonconforming Offender" dated June 5, 2017

Distribution: Policy and Operations Manual
Agency Website

<u>Referenced Forms</u>	<u>Title</u>	<u>Location</u>
DOC 030120A	“Inmate Property Inventory Form”	OP-030120
DOC 140147A	“Referral for Gender Associated Requests”	Attached

<u>Attachments</u>	<u>Title</u>	<u>Location</u>
Attachment B	“Inmate Housing”	OP-030102
Attachment A	“Male to Female Hormonal Therapy Risk and Information Form”	Attached
Attachment B	“Female to Male Hormonal Therapy Risk and Information Form”	Attached