



Sentencing Guidelines Compliance

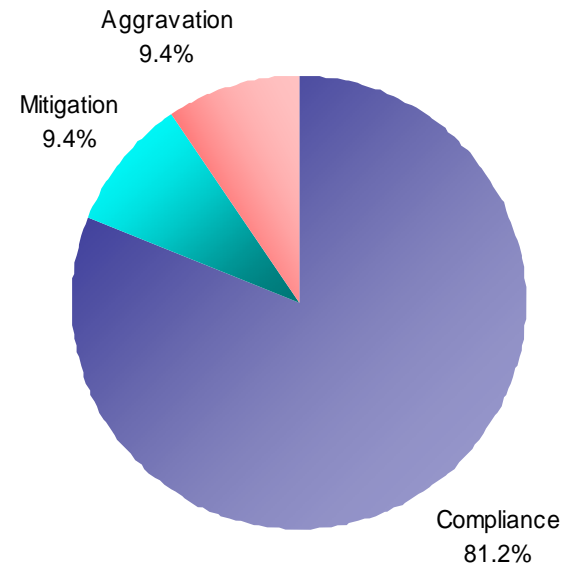
FY2005

FY2005 General Compliance

July 1, 2004 – June 30, 2005

N=22,028

- All FY2005 cases
 - Coded & keyed
- Final Compliance Report
 - No significant differences since Sept meeting
 - Annual Report chapter mailed to Commission members





Probation Violation Guidelines

Preliminary FY2006

July 1, 2005 – October 31, 2005



Sentencing Revocation Report

◆ OFFENDER

First: _____ Middle: _____

Last: _____ Suffix: [][][][]

Date of Birth: [][] / [][] / [][][][] Social Security Number: [][][] - [][][] - [][][][][]

SID/CCRE: _____

◆ COURT

Judicial Circuit: [][] City/County: _____ FIPS Code: [][][]

Judge's Name: _____ [][][][][]
Office Use Only

◆ MOST SERIOUS ORIGINAL FELONY OFFENSE INFORMATION

Primary Offense _____ VCC _____ Sentencing Date (Original) [][] / [][] / [][][][]

PSI NUMBER: _____

◆ ORIGINAL DISPOSITION INFORMATION

No Incarceration Detention or Diversion Center Incarceration (no active incarceration) Jail or Prison

◆ TYPE OF REVOCATION (check all that apply)

Probation Post-Release Good Behavior Suspended Sentence Community-Based Program

◆ CONDITIONS CITED IN VIOLATION (check all that apply)

- 1. Fail to obey all Federal, State, and local laws and ordinances
- 2. Fail to report any arrests within 3 days to probation officer
- 3. Fail to maintain employment or to report changes in employment
- 4. Fail to report as instructed
- 5. Fail to allow probation officer to visit home or place of employment
- 6. Fail to follow instructions and be truthful and cooperative
- 7. Use alcoholic beverages
- 8. Use, possess, distribute controlled substances or paraphernalia
- 9. Use, own, possess, transport or carry firearm
- 10. Change residence or leave State of Virginia without permission
- 11. Abscond from supervision
- Fail to follow special conditions (specify) _____

Complete if there are any new law or ordinance violations:
VCCs for most serious conviction

[][][][] / [][][][]

[][][][] / [][][][]

Location of Arrest:
 Virginia Out of State or Federal

◆ VIOLATION GUIDELINES RECOMMENDATION

Probation/No Incarceration Probation Violation Guidelines Do Not Apply

Incarceration (Enter Range Below)

Sentence Range [][] Years [][] Months [][] Days to [][] Years [][] Months [][] Days

Recommendation Exceeds Revocable Time of [][] Years [][] Months [][] Days

**Probation
Conditions 2-11
& Special
Conditions**



Final Decision/Disposition

To be completed by the sentencing judge or judge's designee.

◆ DECISION OF THE COURT

Found in Violation **OR** →
of Conditions Cited

Taken Under Advisement
 Not in Violation

Found in Violation of the Following Conditions: (check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> Fail to obey all laws and ordinances | <input type="checkbox"/> Use alcoholic beverages |
| <input type="checkbox"/> Fail to report any arrests within 3 days | <input type="checkbox"/> Use, possess, distribute drugs or paraphernalia |
| <input type="checkbox"/> Fail to maintain employment/report changes | <input type="checkbox"/> Use, own, possess firearm |
| <input type="checkbox"/> Fail to report as instructed | <input type="checkbox"/> Change residence/leave State without permission |
| <input type="checkbox"/> Fail to allow probation officer to visit | <input type="checkbox"/> Abscond from supervision |
| <input type="checkbox"/> Fail to follow instructions and be truthful | <input type="checkbox"/> Fail to follow special conditions _____ |

◆ SENTENCE FOR REVOCATION

Amount of Revocable Time at Hearing/Sentencing.....	Years <input type="text"/>	Months <input type="text"/>	Days <input type="text"/>	
Amount of Time to Serve for Violation.....	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Sentenced to Time Served
Placed on Supervised Probation For:	<input type="checkbox"/> Indefinite	<input type="text"/>	<input type="text"/>	<input type="checkbox"/> Continued on Same Period of Supervision
<input type="checkbox"/> Continued Under Same Conditions		<input type="checkbox"/> Released from Supervision/Restrictions		

◆ SANCTIONS IMPOSED FOR REVOCATION (Check all that apply)

Office Use Only	
Other <input type="text"/>	CSF <input type="text"/>

- Electronic Monitoring
- Day Reporting Intensive Probation Other _____
Specify type or name of program
- Detention Center Incarceration Diversion Center Incarceration
- Community-Based Program _____
Specify type or name of program

◆ REASON FOR DEPARTURE FROM GUIDELINES

Office Use Only		
<input type="text"/>	<input type="text"/>	<input type="text"/>

◆ DATE OF REVOCATION DECISION

<input type="text"/>	/	<input type="text"/>	/	<input type="text"/>
<small>Month</small>		<small>Day</small>		<small>Year</small>

Judge's Signature

Probation Violation Guidelines **Section A** Offender Name: _____

◆ **Original Felony Offense Type** *select the type of most serious original felony offense* _____

A. Drug	10	Score ▼ <input style="width: 40px; height: 20px;" type="text"/>
B. Person	14	
C. Traffic/Weapon	24	
D. Other	0	

◆ **Previous Capias/Revocation Requests** _____

Number: 1	7	<input style="width: 40px; height: 20px;" type="text"/>
2 or more	9	

◆ **New Felony Arrests** _____

Number: 1 - 3	2	<input style="width: 40px; height: 20px;" type="text"/>
4 or more	16	

◆ **Never Reported to following Programs/Unsuccessful Discharge from:** – If YES, add 13 →

Community service, Day Reporting, Detention and/or Diversion Center, Boot Camp, Employment and/or Residential programs

◆ **Condition(s) Violated:** _____ If YES, add 15 →

- Fail to report any arrests within 3 days to probation officer
- Fail to maintain employment/report changes in employment
- Fail to report as instructed
- Fail to allow probation officer to visit home or place of employment
- Fail to follow instructions and be truthful and cooperative
- Use alcoholic beverages to excess
- Use, possess, distribute controlled substances or paraphernalia
- Use, own, possess, transport or carry firearm
- Abscond from supervision
- Fail to follow special conditions

◆ **Used, Possessed, Distributed Controlled Substances or Paraphernalia** - If YES, add 15 →

◆ **Absconded from supervision** _____ If YES, add 16 →

◆ **Time Absconded** _____

..... months or less	0	<input style="width: 40px; height: 20px;" type="text"/>
..... months to 12 months	11	
..... 12 months or more	18	

Score →

If total is 30 or less, the recommendation is **Probation/No Incarceration**.
 If total is 31 or more, go to **Section C Worksheet**.

More Points for
Conditions Violated

More Defendants
go over to Section C

Probation Violation Guidelines **Section C** Offender Name: _____

◆ **Original Felony Offense Type** *select the type of most serious original felony offense*

A. DWI or Habitual Offender	3	Score <div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> </div>
B. Property	4	
C. Drug	5	
D. Person	13	
E. Weapon	16	
F. Other	1	

◆ **Previous Adult Probation Revocation Events**

Events: 1 - 2	4	<div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> </div>
3 or more	16	

◆ **New Arrests for Crimes Against Person**

Number: 0	0	<div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> </div>
1	4	
2	15	
3 - 4	30	
5 or more	38	

◆ **New Arrests for Nonperson Crimes**

Number: 0 - 1	0	<div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> </div>
2	9	
3 - 4	12	
5 or more	19	

◆ **Months until First Noncompliant Incident**

10 months or less	28	<div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> </div>
11 months to 22 months	22	
23 months or more	0	

◆ **Unsuccessful Discharge from Detention Center Program** If YES, add 30 →

|
|

◆ **Never Reported to Drug Treatment/Drug Education Program**

Number: 1 - 2	9	<div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> </div>
3 or more	16	

◆ **Positive Drug Test or** Signed Admissions If YES, add 10 →

|
|

◆ **Violated Sex Offender Restrictions** If YES, add 40 →

|
|

◆ **Time Absconded**

2 months or less	0	<div style="border: 1px solid black; width: 40px; height: 40px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> </div>
3 months to 24 months	9	
25 months or more	12	

Total Score →

|
|
|

See Probation Violation Guidelines Section C Recommendation Table for guidelines sentence range.



COMMONWEALTH of VIRGINIA

PROBATION AND PAROLE
District Address

TELEPHONE

Department of Corrections

SUBSTANCE ABUSE ADMISSION FORM

Any admission recorded below was given voluntarily and without duress. I understand that this admission may be used in violation proceedings.

voluntarily admit to using the substances checked below within the last 30 days:

Cocaine, including Crack

Barbiturates

Marijuana

Heroin

Alcohol

Phencyclidine (PCP)

Amphetamines, including Ice

By: _____
Signature of Client

Witnessed by: _____
Signature of Staff

Date: _____

District/Unit: _____

II. I, _____ VSP # _____
Name on Conditions/Agreements If parolee or inmate

voluntarily confirm that the positive (dirty) on-site test findings for the substances checked below are based on test samples provided by me:

Cocaine, including Crack

Barbiturates

Marijuana

Heroin

Alcohol

Phencyclidine (PCP)

Amphetamines, including Ice

By: _____
Signature of Client

Witnessed by: _____
Signature of Staff

Date: _____

District/Unit: _____

Probation Violation Guidelines ❖ Section C

❖ RECOMMENDATION TABLE

FY05

Up to 33

Score	Guideline Sentence Range
Up to 36	Incarceration 1 Day to 3 Months
37 - 42	3 Months to 6 Months
43 - 45	6 Months to 12 Months
46 - 50	1 Year to 1 Year 3 Months
51 - 52	1 Year 3 Months to 1 Year 6 Months
53 - 57	1 Year 6 Months to 2 Years
58 - 65	2 Years to 3 Years
66 - 69	3 Years to 4 Years
70 - 82	4 Years to 5 Years
83 - 89	5 Years to 6 Years
90 +	6 Years or more



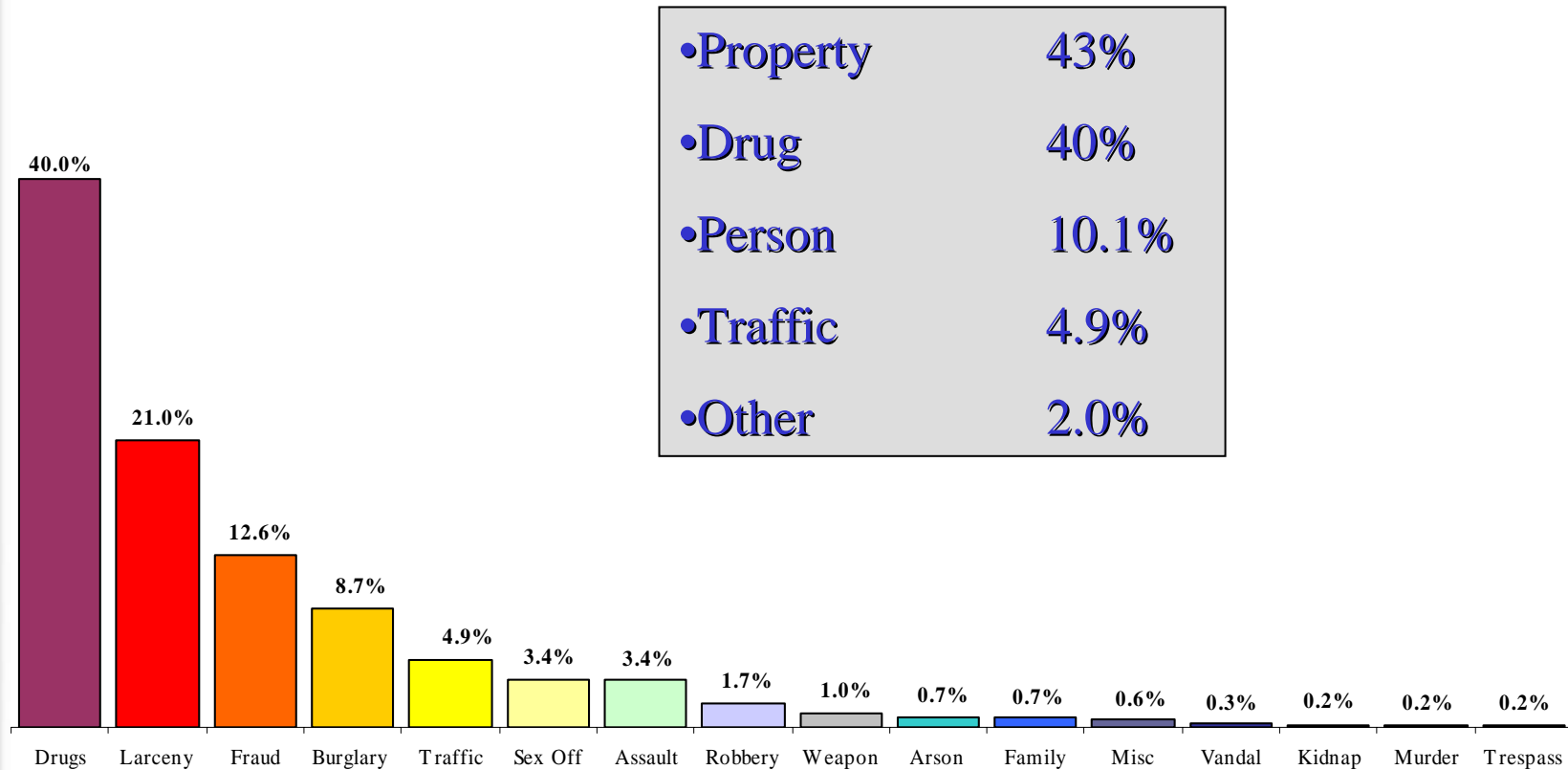
Technical Violation Worksheets Received

July 1, 2005 – October 31, 2005


FY06 Technical Violation Worksheets Received as of 10/31/05

By Type of Most Serious Original Offense

(N=1,211)*



* Only FY06 forms regardless of disposition (violation, not in violation, etc),



Probation Conditions Cited on Revocation Report

Excluding Condition 1—New Law Violations



To: _____ VACCIS # _____
Last First Middle VSP # _____

Under the provisions of the Code of Virginia, the Court has placed you on probation/post release supervision this date _____ for a period of _____ by the Honorable _____, Judge, presiding in the _____ Court at _____.

Special conditions ordered by the Court are:

Offense & Sentence:

Probation/Post Release Supervision conditions are as follows:

1. I will obey all Federal, State and local laws and ordinances.
2. I will report any arrest, including traffic tickets, within 3 days to the Probation and Parole Officer.
3. I will maintain regular employment and notify my Probation and Parole Officer promptly of any changes in my employment.
4. I will report in person, by telephone, and as otherwise instructed by my Probation and Parole Officer.
5. I will permit my Probation and Parole Officer to visit my home and place of employment.
6. I will follow my Probation and Parole Officer's instructions and be truthful, cooperative, and report as instructed.
7. I will not use alcoholic beverages to the extent that it disrupts or interferes with my employment or orderly conduct.
8. I will not unlawfully use, possess, or distribute controlled substances, or related paraphernalia.
9. I will not use, own, possess, transport or carry a firearm.
10. I will not change my residence without permission of my Probation and Parole Officer. I will not leave the State of Virginia or travel outside of a designated area without permission of my Probation and Parole Officer.
11. I will not abscond from supervision. I understand I will be considered an absconder when my whereabouts are no longer known to my supervising officer.

Your minimum date of release from supervision is _____ but you will remain under supervision until you receive a final release.

You are being placed on probation/post release supervision subject to the conditions listed above. The Court or Parole Board may revoke or extend your probation/post release supervision and you are subject to arrest upon cause shown by the Court, the Parole Board and/or by the Probation and Parole Officer.

You will report as follows:

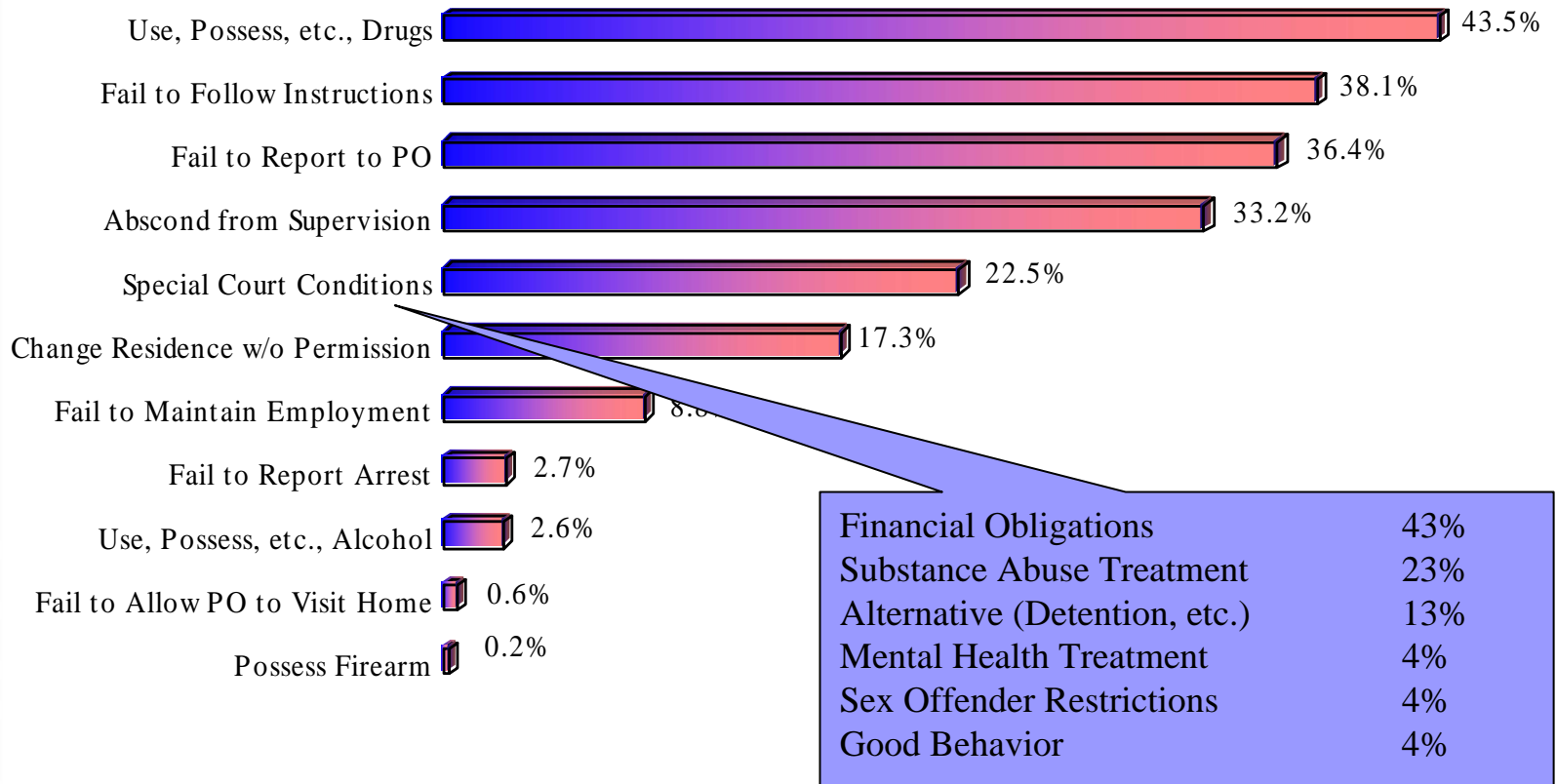
I have read the above, and/or had the above read and explained to me, and by my signature or mark below, acknowledge receipt of these Conditions and agree to the Conditions set forth.

Signed: _____ Probation and Parole Officer

Date: _____ Date: _____


Conditions of Probation

Conditions Cited by Probation Officer FY06 Violations Received as of 10/31/05 (N=1,211)*



*Only FY06 forms regardless of disposition (violation, not in violation, etc)

Note: More than one condition of probation may be cited in each report. Therefore, percentages do not add to 100%.



Judicial Concurrence with Probation Violation Guidelines

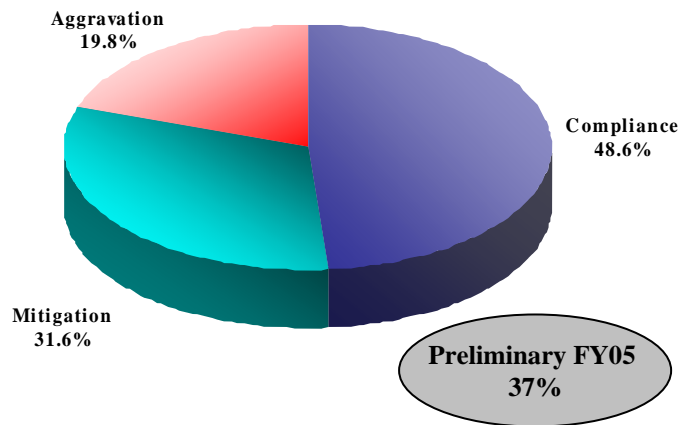
*Applicable to Probation Violations
(except Condition 1 New Law Violation)*

Judicial Concurrence with Guideline Recommendations FY06 Preliminary (N=1,162)*

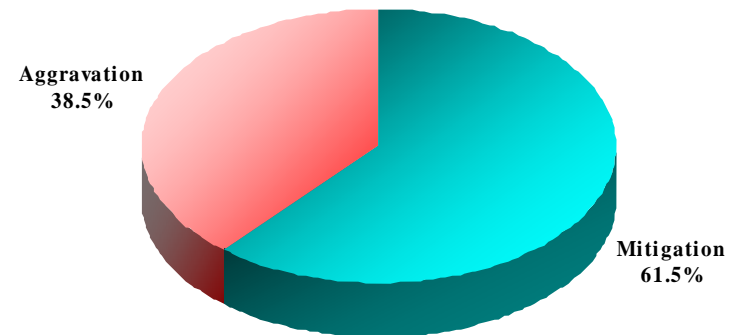
General Compliance:

The degree to which judges agree with the **overall guidelines recommendation**.

Overall Compliance Rate



Direction of Departures

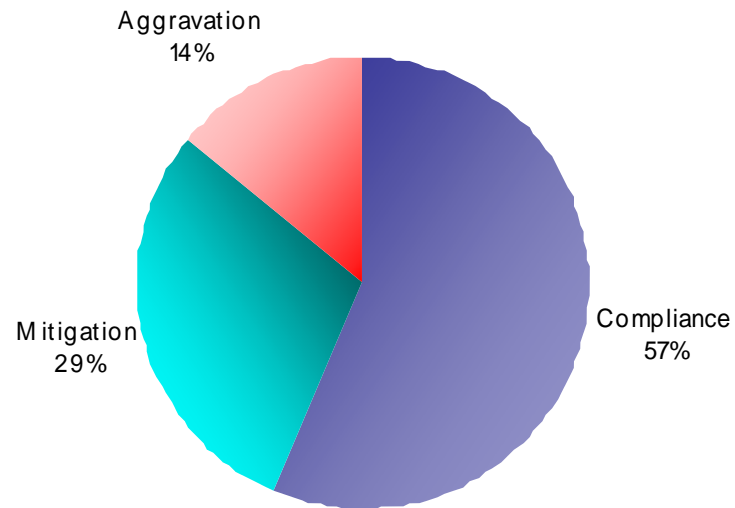


* Only FY06 cases found in violation of probation conditions (except Condition 1 new law violation)

Judicial Agreement with Type of Sanction FY06 Preliminary (N=1,162)*

Dispositional Compliance:

The degree to which judges agree with the **type of sanction** recommended by the guidelines.



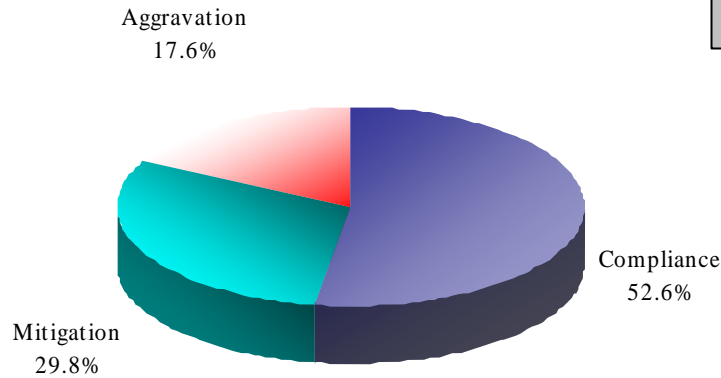
* Only FY06 cases found in violation of probation conditions (except Condition 1 new law violation)

Judicial Agreement with Sentence Length FY06 Preliminary (n=711)

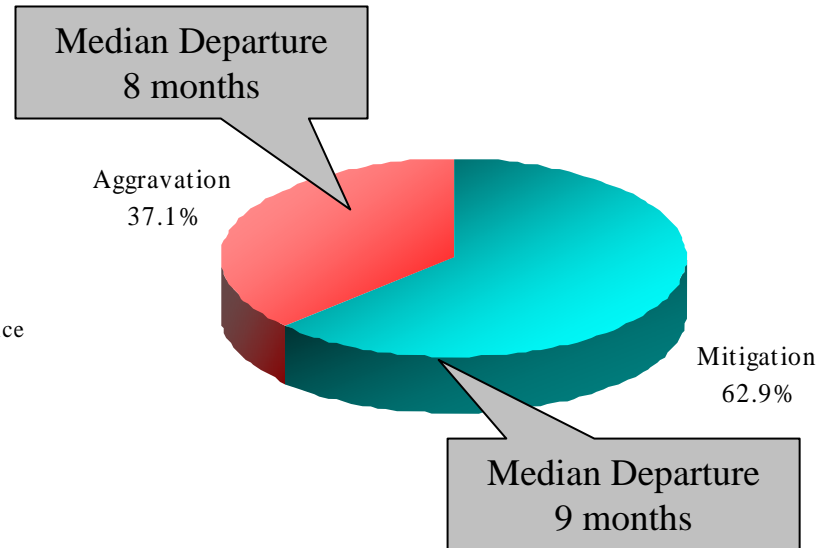
Durational compliance:

The degree to which judges agree with the **sentence length** recommended in jail/prison cases.

Durational Compliance



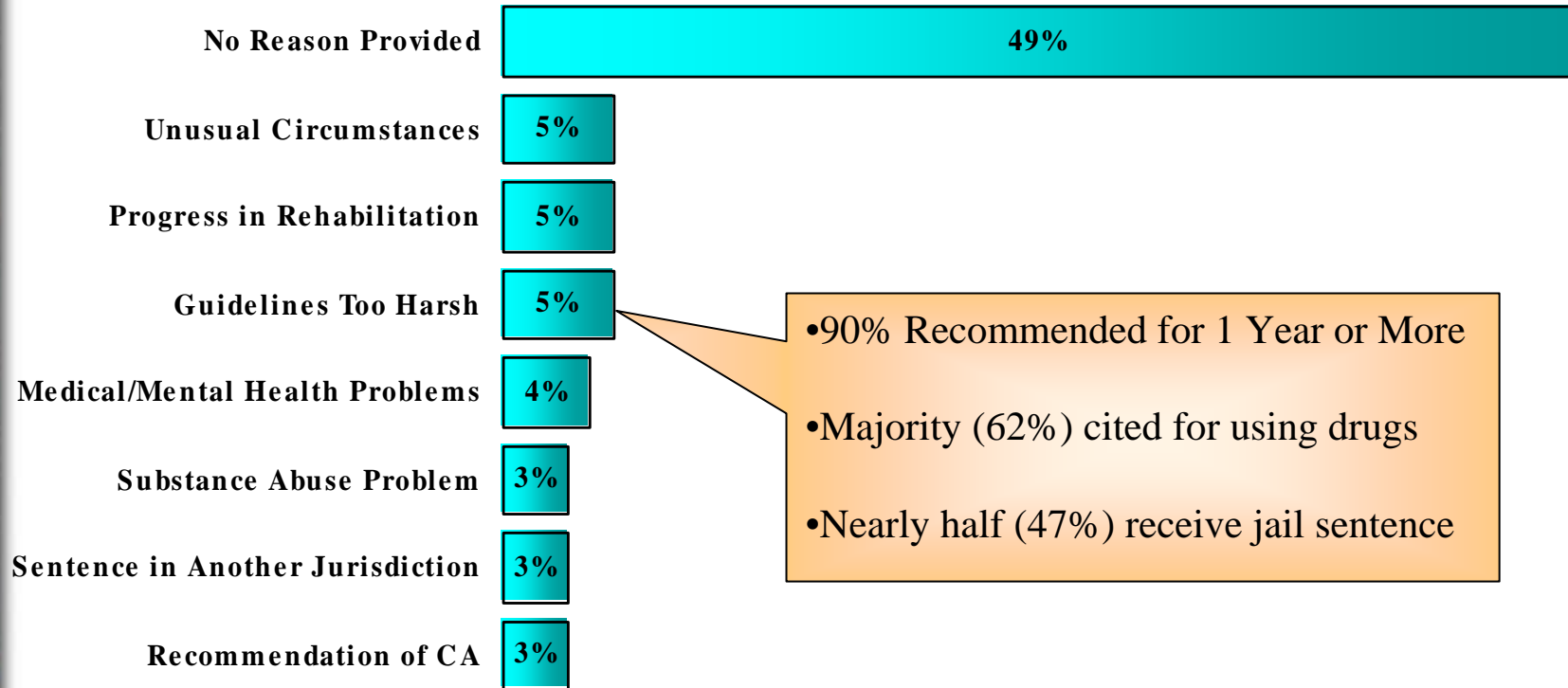
Direction of Departures



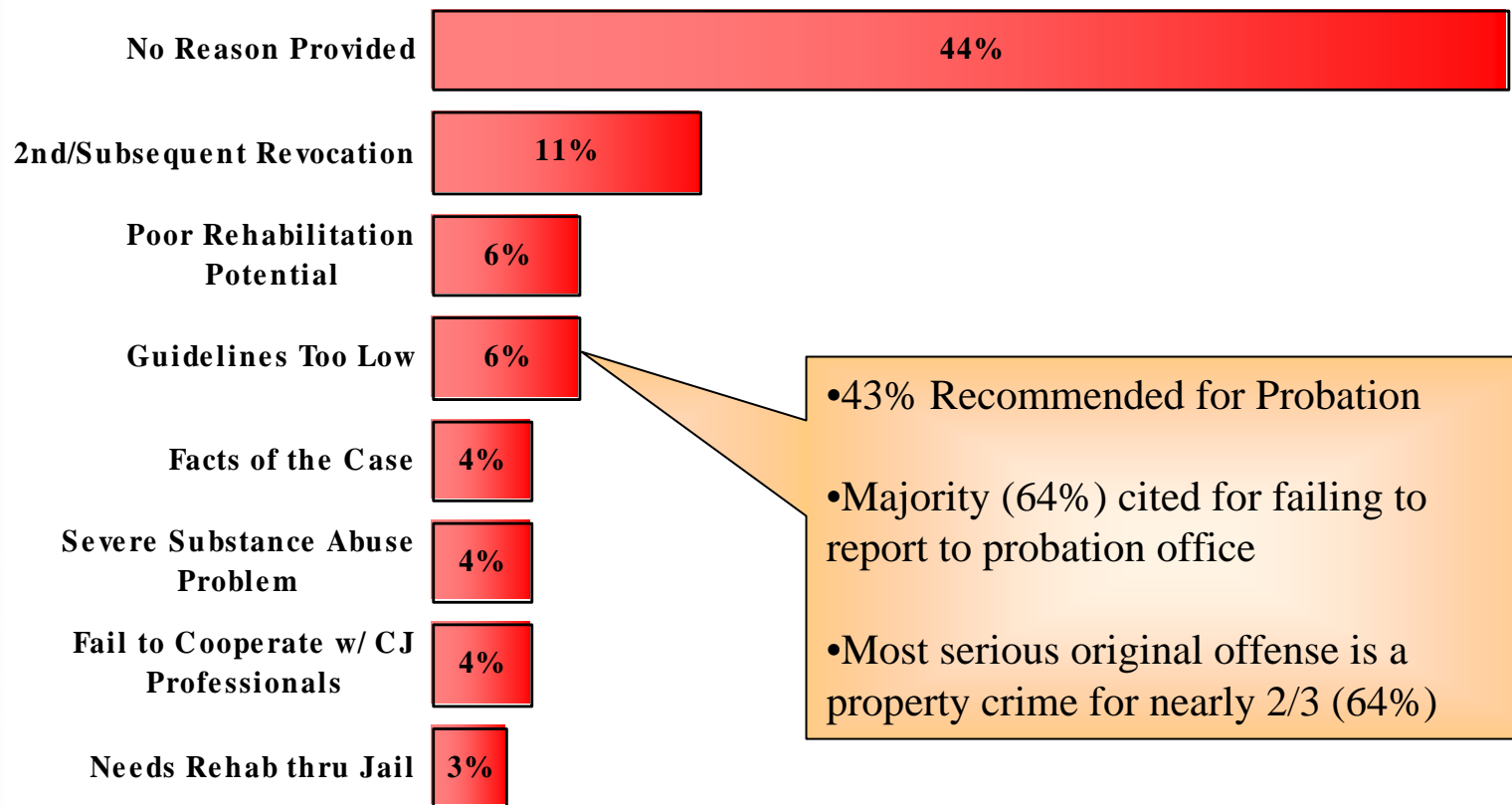


Reasons for Departure


Most Frequently Cited Mitigating Reasons for Departure Preliminary FY2006 (N=367)



Most Frequently Cited Aggravating Reasons for Departure Preliminary FY2006 (N=230)



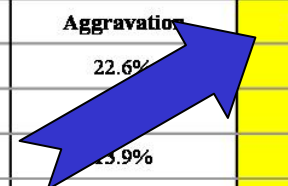
•43% Recommended for Probation
•Majority (64%) cited for failing to report to probation office
•Most serious original offense is a property crime for nearly 2/3 (64%)



Judicial Concurrence Rates &
Number of Cases Received
by Circuit

July 1, 2005 – October 31, 2005

Circuit Name	Circuit Number	Compliance	Mitigation	Aggravation	Number of Cases
Chesapeake	1	40.9%	36.6%	22.6%	93
Virginia Beach	2	37.5%	45.8%	16.2%	24
Portsmouth	3	68.4%	17.7%	13.9%	79
Norfolk	4	50.0%	50.0%	0.0%	2
Suffolk Area	5	48.5%	39.4%	12.1%	33
Sussex Area	6	75.0%	0.0%	25.0%	8
Newport News	7	50.6%	32.1%	17.3%	81
Hampton	8	47.8%	31.9%	20.3%	69
Williamsburg Area	9	52.9%	20.6%	26.5%	34
South Boston Area	10	40.9%	36.4%	22.7%	22
Petersburg Area	11	33.3%	0.0%	66.7%	3
Chesterfield Area	12	52.6%	26.3%	21.1%	19
Richmond City	13	50.7%	37.7%	11.6%	69
Henrico	14	28.9%	57.9%	13.2%	38
Fredericksburg Area	15	44.4%	29.6%	25.9%	27
Charlottesville Area	16	51.9%	25.9%	22.2%	27
Arlington Area	17	50.0%	33.3%	16.7%	6
Alexandria	18	42.9%	40.5%	16.7%	42
Fairfax	19	46.4%	37.5%	16.1%	56
Loudoun Area	20	73.3%	16.7%	10.0%	30
Martinsville Area	21	50.0%	31.0%	19.0%	42
Danville Area	22	43.9%	30.3%	25.8%	66
Roanoke Area	23	26.1%	26.1%	47.8%	23
Lynchburg Area	24	44.4%	27.8%	27.8%	36
Staunton Area	25	40.0%	36.7%	23.3%	30
Harrisonburg Area	26	44.6%	43.1%	12.3%	65
Radford Area	27	51.7%	34.5%	13.8%	29
Bristol Area	28	47.4%	21.1%	31.6%	19
Buchanan Area	29	58.1%	11.6%	30.2%	43
Lee Area	30	12.5%	50.0%	37.5%	8
Prince William Area	31	64.1%	17.9%	17.9%	39



TECHNICAL VIOLATIONS

No Condition 1 Violation
No Parole Eligible Cases
No Misdemeanor Violations
New FY06 Forms Only

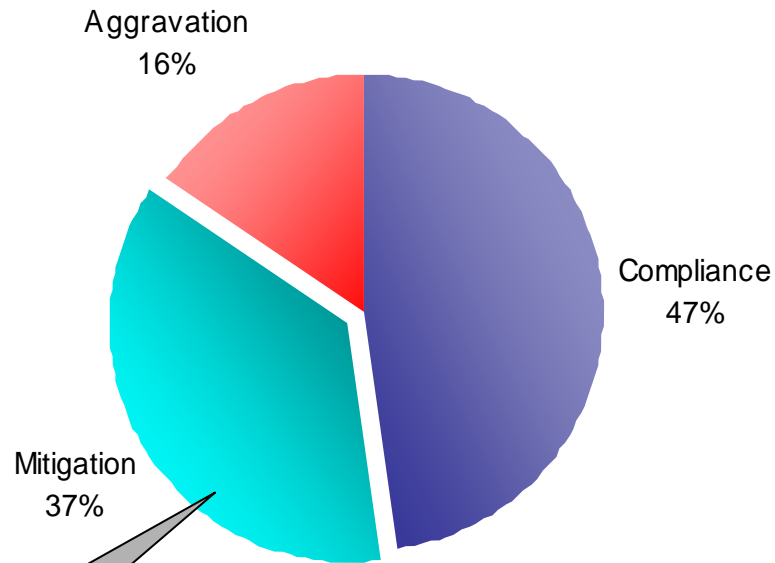


Judicial Concurrence by Type of Original Offense

Felony Drug Crimes

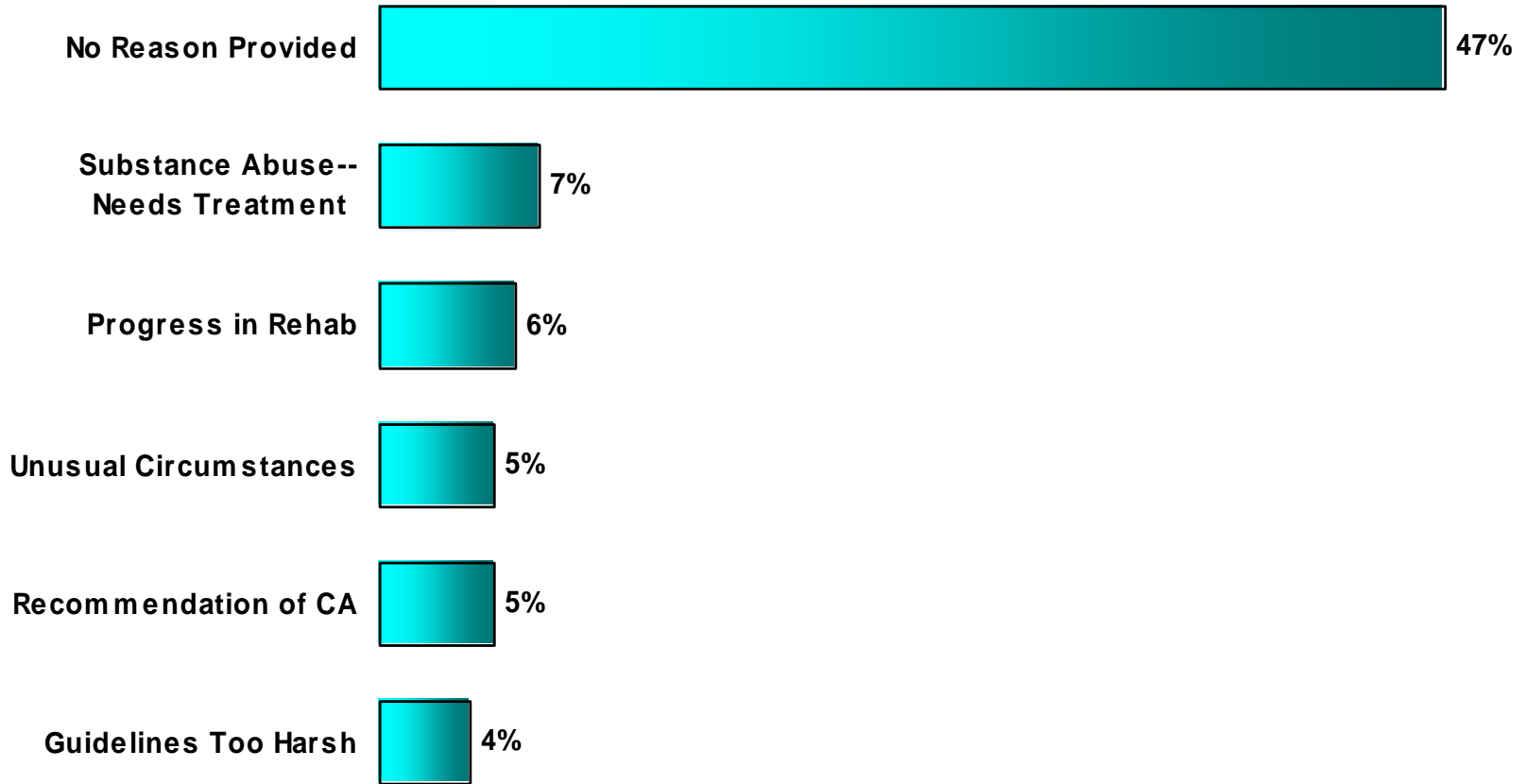
FY06 Preliminary Judicial Concurrence Original Offense Drug Crime (N=440)

Compliance--Original Offense Drug Crime



**Average (median) 6 months
below low end of
recommendation**

Most Frequently Cited Mitigating Reasons for Departure Original Offense is a Drug Crime (n=161)



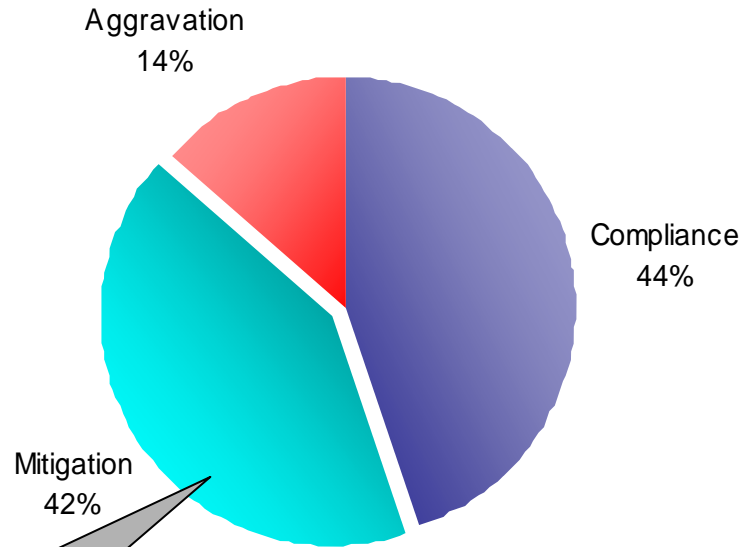


Judicial Concurrence by Type of Original Offense

Person Crimes

FY06 Preliminary Judicial Concurrence Original Offense Person Crime (N=125)

Compliance--Original Offense Person Crime



**Average (median) 12 months
below low end of
recommendation**

Most Frequently Cited Mitigating Reasons for Departure Original Offense is a Person Crime (n=52)

