** Virginia Department of Criminal Justice Services**

|  |
| --- |
| **CCCA/PSA Status Report Narrative** |

**DESCRIBE ANY NEW PROGRESS, CHANGES OR UPDATES SINCE THE LAST QUARTER.**

 **Training**

1. List **external** (outside the agency and locality) professional development, skill-based trainings, and/or conferences that agency staff attended during this reporting period by topic. List ONLY training topic. Use the training function in PTCC or an in-house equivalent to track and report training and number of hours for individual staff. Individual hours should not be included in the Status Report but be available upon request.

1. List **internal** (within the agency and locality) professional development and/or skill-based training to include staff supervision, coaching, and mentoring activities to support and strengthen knowledge, skills and abilities critical to sustain, promote, and advance evidence based practices. Use the training function in PTCC or an in-house equivalent to track and report training and number of hours for individual staff. Individual hours should not be included in the Status Report but be available upon request.

1. Describe current training needs and how the agency is addressing these needs.

 **Pretrial Services Strategies and Activities**

1. Describe new activities, programs, or initiatives in place (in-house or in the community) to advance Legal and Evidence Based Practices (LEBP) to address criminogenic needs, provide support services, improve pretrial court appearance rates, or promote public safety.

1. Describe any barriers that prevent staff from conducting or completing investigations.

1. Explain the steps taken to overcome the barriers identified above.

1. Explain the trends observed related to pretrial services. Provide data to support the trends observed and the analysis related to the trends. Include strategies to enhance and/or improve in the areas noted.

1. Describe staff ability to use LEBP related skills: pretrial risk assessment with fidelity, PRAXIS concurrence for making release recommendations, supervision level assignment, etc.

 **Local Probation Strategies and Activities**

1. Describe new activities, programs, support services, and initiatives in place (in-house or in the community) to advance Evidence Based Practices (EBP) and address criminogenic risk/needs.

1. Describe any new practices, processes, or procedures the agency has put into place to verify and support fidelity in risk/need assessment.

1. Describe Learning team(s) structure, schedule and topics.

1. Explain the trends observed related to local probation. Provide data to support the trends observed and the analysis related to the trends. Include strategies to enhance and/or improve in the areas noted.

1. Describe any barriers that prevent the completion of MOST/OST assessments. What internal steps and measures is the agency using to improve completion rates?

1. Describe reasons success plans (case plans) were not completed.

1. Describe staff ability to use EBP related skills: motivational interviewing, relationship building, risks/needs assessment, success planning, etc.

1. Describe the status of the agency’s **4-Step Action Plan** for success plan completion:

**Step 1: Culture**

* 1. Describe how the agency is working to enhance healthy communications between levels of management staff and front-line staff. This includes identifying areas of improvement and strengths using evidence-based approaches internally.

* 1. List other things done to enhance the agency’s work culture.

**Step 2: Staff Readiness**

* 1. Describe the agency’s process for assessing the readiness of staff to support the buy-in of evidence based practices and vision of leadership.

* 1. Describe the steps or processes the agency has taken to work with staff individually to enhance readiness.

**Step 3: Data-Entry–PTCC**

* 1. Describe the agency process to inform staff of the need to improve PTCC data entry. This includes any training or expectations involving communication between the probation officer and individual on supervision, case-notes, documentation, and timing of data entry in the system, etc.

**Step 4: Internal Processes**

* 1. Describe enhancements to processes and/or management checks and balances to further support staff and work towards higher rates of success planning.

 **Staffing**

1. Total number of staff positions allocated to the agency on July 1, 2022:
2. Total number of staff positions allocated to the agency on the last day of this quarter:
3. Total number of staff vacancies on the last day of this quarter:
4. Total number of filled staff positions on the last day of this quarter:
5. Agency vacancy rate (year-to-date):
6. Average length of employment (year-to-date):       Note: (Report this on the first and fourth quarter status report)
7. Number of staff that have not completed CORE:
	1. Number of CORE required staff registered in LMS:
	2. Number of CORE eligible staff registered to attend CORE:

**Total Staff Positions Available**

Total staff positions available means the number of full or part time positions available to the agency regardless of the funding source. This includes positions that are filled and vacant.

**Agency Vacancy Rate:**

Agency vacancy rate measures the percentage of agency vacancies over a given period calculated by dividing the total number of staff vacancies on the last day of this quarter by the total number of staff positions allocated on the last day of the quarter. For example, if an agency has 15 staff positions available on the last day of this quarter and there are a total of 3 staff vacancies on the last day of the quarter, the calculation is:

 3 / 15 X 100 = 20%

**Average length of employment:**

The average length of employment is calculated by taking the total number of years of employment for all employees divided by the total number of employees. If an agency has 10 employees who have worked at the agency for a combined total of 52 years, the calculation is:

52 / 10 = 5.2

 **Local Initiatives**

List all new projects and initiatives related to agency operation or services and funding source, if not already reported above. Examples might include the creation of a sanctions and incentives program, a new specialty dockets or drug court, new community service program, a cooperative project with your stakeholders, etc. Upload all reports, documents, and deliverables associated with the projects and initiatives as attachments.

1. Is the agency involved with any local initiatives? [ ]  Yes [ ]  No

If yes, please describe:

1. Did CCCA/PSA grant funds support local initiatives activities? [ ]  Yes [ ]  No

If yes, how:

 **Community Criminal Justice Board (CCJB)**

1. Did the CCJB meet during this reporting period? [ ]  Yes [ ]  No

If yes, list the meeting date(s) and list the primary agenda issues below. Upload CCJB agenda, minutes, and handouts in OGMS as separate documents.

If no, what barriers prevented the meeting (s) and the steps taken to overcome these barriers?

1. Did the CCJB advise on the development or operation of the pretrial services or local community-based probation agency? [ ]  Yes [ ]  No

If yes, describe.

1. Did the CCJB evaluate the pretrial services and/or local community-based probation agency?

[ ]  Yes [ ]  No

If yes, describe.

1. Does the CCJB represent the minimum membership positions (*Code of Virginia* § 9.1-178)? [ ]  Yes [ ]  No

If no, indicate the steps taken to sustain and increase membership.

1. List the criminal justice grants the CCJB reviewed during this quarter.

1. Has a Community Based Correction Plan for new jail construction or expansion been submitted (*Code of Virginia* § 53.1-82.1)? [ ]  Yes [ ]  No

If yes, at what stage in the process is the plan?

1. What are the current top three priorities of the CCJB?

1.

2.

3.

 **Compliance Issues**

* + - 1. Does the agency have any barriers to complying with DCJS minimum standards, policy, grant guidelines, and/or the grant program special conditions? [ ]  Yes [ ]  No

If yes, describe.

 **Variance to Minimum Standards**

1. Has the agency submitted a variance to DCJS? [ ]  Yes [ ]  No
2. If yes, what is the status of the variance? [ ]  Pending [ ]  Approved

 **Corrective Action Plan (CAP)**

Is the agency required to complete a Corrective Action Plan? [ ]  Yes [ ]  No

If the CAP is in progress, please upload the CAP form to OGMS.

 **Funding**

1. Does the agency receive additional funding, not previously reported to DCJS? [ ]  Yes [ ]  No

If yes, what for and what is the source? (Office of the Executive Secretary, Federal funds, etc.)

1. Describe actions taken to increase local support from localities receiving services.

 **Probation Monitoring Cases (Locally Funded)**

1. Number of Individuals on monitoring only on the last day of the quarter:

1. Number of Individuals on monitoring only longer than 365 days at the end of the quarter:

 **OTHER**

Additional information: