

Agency Name:	Department Of Corrections		
Agency Code:	N040	Section:	65



**Fiscal Year FY 2021-2022**

**Agency Budget Plan**

**FORM A - BUDGET PLAN SUMMARY**

**OPERATING  
REQUESTS  
(FORM B1)**

For FY 2021-2022, my agency is (mark "X"):	
<input checked="" type="checkbox"/>	Requesting General Fund Appropriations.
<input type="checkbox"/>	Requesting Federal/Other Authorization.
<input type="checkbox"/>	Not requesting any changes.

**NON-RECURRING  
REQUESTS  
(FORM B2)**

For FY 2021-2022, my agency is (mark "X"):	
<input checked="" type="checkbox"/>	Requesting Non-Recurring Appropriations.
<input type="checkbox"/>	Requesting Non-Recurring Federal/Other Authorization.
<input type="checkbox"/>	Not requesting any changes.

**CAPITAL  
REQUESTS  
(FORM C)**

For FY 2021-2022, my agency is (mark "X"):	
<input checked="" type="checkbox"/>	Requesting funding for Capital Projects.
<input type="checkbox"/>	Not requesting any changes.

**PROVISOS  
(FORM D)**

For FY 2021-2022, my agency is (mark "X"):	
<input type="checkbox"/>	Requesting a new proviso and/or substantive changes to existing provisos.
<input type="checkbox"/>	Only requesting technical proviso changes (such as date references).
<input checked="" type="checkbox"/>	Not requesting any proviso changes.

Please identify your agency's preferred contacts for this year's budget process.

	<u>Name</u>	<u>Phone</u>	<u>Email</u>
<b>PRIMARY CONTACT:</b>	John Morgan	(803) 896-2250	morgan.john@doc.sc.gov
<b>SECONDARY CONTACT:</b>	Tom Osmer	(803) 896-1743	osmer.tom@doc.sc.gov

I have reviewed and approved the enclosed FY 2021-2022 Agency Budget Plan, which is complete and accurate to the extent of my knowledge.

**SIGN/DATE:  
TYPE/PRINT  
NAME:**

<u>Agency Director</u>	<u>Board or Commission Chair</u>
Bryan P. Stirling	

*This form must be signed by the agency head – not a delegate.*

Agency Name:	Department Of Corrections
Agency Code:	N040
Section:	65

BUDGET REQUESTS			FUNDING					FTEs				
Priority	Request Type	Request Title	State	Federal	Earmarked	Restricted	Total	State	Federal	Earmarked	Restricted	Total
1	B1 • Recurring	Retention Increases for Health Services, Institutional Correctional Officers/Food Services and LEO Police Services Officers	14,071,752	0	0	0	14,071,752	0,00	0,00	0,00	0,00	0,00
2	B1 • Recurring	New Positions for Health Services for the Continuation of Hepatitis "C" and Addiction Recovery Services, Medical and Mental Health Services, Phase I of III	14,153,594	0	0	0	14,153,594	82,50	0,00	0,00	0,00	82,50
3	B1 • Recurring	Critical Medical and Hepatitis "C" Treatment, Supplies and Equipment	5,000,000	0	0	0	5,000,000	0,00	0,00	0,00	0,00	0,00
4	B1 • Recurring	Expansion of Gang Enforcement Security Team	4,606,491	0	0	0	4,606,491	43,00	0,00	0,00	0,00	43,00
5	B1 • Recurring	Long-Term Programming and Reentry Needs - New Positions and Continued Development	4,158,246	0	0	0	4,158,246	49,00	0,00	0,00	0,00	49,00
6	B1 • Recurring	Additional Personnel for the Division of Compliance, Standards and Inspections	2,049,889	0	0	0	2,049,889	19,00	0,00	0,00	0,00	19,00
7	B1 • Recurring	Implementation of Kronos Timekeeping/Scheduling Electronic Process and Critical Personnel	943,678	0	0	0	943,678	7,00	0,00	0,00	0,00	7,00
8	B1 • Recurring	Preventive Health Screenings for Inmate Population	2,744,825	0	0	0	2,744,825	0,00	0,00	0,00	0,00	0,00
9	B1 • Recurring	Mandated Administrative Budget Requests	7,784,009	0	0	0	7,784,009	0,00	0,00	0,00	0,00	0,00
10	B2 • Non-Recurring	Critical Health Services Equipment	2,259,168	0	0	0	2,259,168	0,00	0,00	0,00	0,00	0,00
11	B2 • Non-Recurring	Critical Long-term and Reentry Programming Equipment	1,030,000	0	0	0	1,030,000	0,00	0,00	0,00	0,00	0,00
12	B2 • Non-Recurring	Food Services Kitchen Equipment	353,000	0	0	0	353,000	0,00	0,00	0,00	0,00	0,00
13	B2 • Non-Recurring	Critical Institutional and Security Personnel Equipment	27,156,430	0	0	0	27,156,430	0,00	0,00	0,00	0,00	0,00
14	B2 • Non-Recurring	Critical Agency-Wide Transportation and Maintenance Heavy Equipment Needs	7,424,000	0	0	0	7,424,000	0,00	0,00	0,00	0,00	0,00
15	C • Capital	Critical Deferred Maintenance Projects	100,000,000	0	0	0	100,000,000	0,00	0,00	0,00	0,00	0,00
TOTALS			193,735,082	0	0	0	193,735,082	200,50	0,00	0,00	0,00	200,50

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FORM BI – RECURRING OPERATING REQUEST

AGENCY PRIORITY	1																				
Provide the Agency Priority Ranking from the Executive Summary.																					
TITLE	Retention Increases for Health Services, Institutional Correctional Officers/Food Services and LEO Police Services Officers																				
Provide a brief, descriptive title for this request.																					
AMOUNT	General: \$14,071,752 Federal: \$0 Other: \$0 Total: \$14,071,752																				
What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.																					
NEW POSITIONS	0.00																				
Please provide the total number of new positions needed for this request.																					
FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply: <table><tr><td></td><td>Change in cost of providing current services to existing program audience</td></tr><tr><td>X</td><td>Change in case load/enrollment under existing program guidelines</td></tr><tr><td></td><td>Non-mandated change in eligibility/enrollment for existing program</td></tr><tr><td></td><td>Non-mandated program change in service levels or areas</td></tr><tr><td></td><td>Proposed establishment of a new program or initiative</td></tr><tr><td></td><td>Loss of federal or other external financial support for existing program</td></tr><tr><td></td><td>Exhaustion of fund balances previously used to support program</td></tr><tr><td></td><td>IT Technology/Security related</td></tr><tr><td></td><td>Consulted DTO during development</td></tr><tr><td></td><td>Related to a Non-Recurring request – If so, Priority #</td></tr></table>		Change in cost of providing current services to existing program audience	X	Change in case load/enrollment under existing program guidelines		Non-mandated change in eligibility/enrollment for existing program		Non-mandated program change in service levels or areas		Proposed establishment of a new program or initiative		Loss of federal or other external financial support for existing program		Exhaustion of fund balances previously used to support program		IT Technology/Security related		Consulted DTO during development		Related to a Non-Recurring request – If so, Priority #
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STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective: <table><tr><td></td><td>Education, Training, and Human Development</td></tr><tr><td></td><td>Healthy and Safe Families</td></tr><tr><td>X</td><td>Maintaining Safety, Integrity, and Security</td></tr><tr><td></td><td>Public Infrastructure and Economic Development</td></tr><tr><td></td><td>Government and Citizens</td></tr></table>		Education, Training, and Human Development		Healthy and Safe Families	X	Maintaining Safety, Integrity, and Security		Public Infrastructure and Economic Development		Government and Citizens										
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X	Maintaining Safety, Integrity, and Security																				
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ACCOUNTABILITY OF FUNDS	Goal #1 - Maintaining Safety, Integrity and Security; House Feed and Clothe inmates in secure and safe institutions																				
What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?																					
RECIPIENTS OF FUNDS	Agency personnel listed below.																				
What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated—using an existing formula, through a competitive process, based upon predetermined eligibility criteria?																					
JUSTIFICATION OF REQUEST	<ul style="list-style-type: none"><li>Request is for a 15% across the board increase (\$530,200) for the entire Police Services' staff, LEO and Administrative, to compensate for the prior Law Enforcement increases granted to LEO which did not include the SCDC staff.</li><li>Request funding for hiring range increases (\$750 each position) (Total \$4,506,458) for retention and competitive salaries compared to the counties. Includes the Food Service Personnel (part of the institutional security environment).</li><li>Administrative HCA Salaries (\$106,548) increase of approximately 10.0% individually.</li><li>Increase Physician salaries (\$475,760) to increase of approximately 14.0% individually.</li><li>Increase current Registered Nurse staff (\$2,609,641) to increase of approximately 12.0% individually.</li><li>Increase current Licensed Practical Nurse staff (\$811,800) to increase of approximately 12.0% individually.</li><li>Increase current Pharmacy staff (\$54,951) to increase of approximately 5.0% individually.</li><li>Increase current Certified Nurse Assistants (\$140,679) to increase of approximately 9.0% individually.</li><li>Increase current Substance Abuse Disorder Counselors (\$353,280) to increase of approximately 11.0% individually.</li><li>Increase current Medical Technologists (\$33,120) to increase of approximately 9.0% individually.</li><li>Increase current Laboratory Processor (\$3,487) to increase of approximately 5.0% individually.</li><li>Increase current Dentists (\$217,600) to increase of approximately 15.0% individually.</li><li>Increase current Dental Assistants (\$30,547) to increase of approximately 5.0% individually.</li><li>QIRM Division Director (\$87,720 to \$98,000) increase of 11.72%.</li><li>QIRM Program Manager (\$61,200 to \$76,000) increase of 24.18%.</li><li>QIRM Analysts I (6 positions) (\$48,960 to \$60,000 each) increase of 22.55% each.</li><li>QIRM Analyst II (\$48,960 to \$65,000) increase of 32.76%.</li><li>Information Security Officer (\$89,760 to \$95,145) increase of 5.99%.</li><li>Internal Audit Director (\$71,816 to \$85,000) increase of 15.5%.</li></ul>																				
Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.																					

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**FORM BI – RECURRING OPERATING REQUEST**

AGENCY PRIORITY	2																				
Provide the Agency Priority Ranking from the Executive Summary.																					
TITLE	New Positions for Health Services for the Continuation of Hepatitis "C" and Addiction Recovery Services, Medical and Menatl Health Services, Phase I of III																				
Provide a brief, descriptive title for this request.																					
AMOUNT	General: \$14,153,594 Federal: \$0 Other: \$0 Total: \$14,153,594																				
What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.																					
NEW POSITIONS	82.50																				
Please provide the total number of new positions needed for this request.																					
FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply: <table><tr><td></td><td>Change in cost of providing current services to existing program audience</td></tr><tr><td>X</td><td>Change in case load/enrollment under existing program guidelines</td></tr><tr><td></td><td>Non-mandated change in eligibility/enrollment for existing program</td></tr><tr><td></td><td>Non-mandated program change in service levels or areas</td></tr><tr><td></td><td>Proposed establishment of a new program or initiative</td></tr><tr><td></td><td>Loss of federal or other external financial support for existing program</td></tr><tr><td></td><td>Exhaustion of fund balances previously used to support program</td></tr><tr><td></td><td>IT Technology/Security related</td></tr><tr><td></td><td>Consulted DTO during development</td></tr><tr><td></td><td>Related to a Non-Recurring request – If so, Priority #</td></tr></table>		Change in cost of providing current services to existing program audience	X	Change in case load/enrollment under existing program guidelines		Non-mandated change in eligibility/enrollment for existing program		Non-mandated program change in service levels or areas		Proposed establishment of a new program or initiative		Loss of federal or other external financial support for existing program		Exhaustion of fund balances previously used to support program		IT Technology/Security related		Consulted DTO during development		Related to a Non-Recurring request – If so, Priority #
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STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective: <table><tr><td></td><td>Education, Training, and Human Development</td></tr><tr><td></td><td>Healthy and Safe Families</td></tr><tr><td>X</td><td>Maintaining Safety, Integrity, and Security</td></tr><tr><td></td><td>Public Infrastructure and Economic Development</td></tr><tr><td></td><td>Government and Citizens</td></tr></table>		Education, Training, and Human Development		Healthy and Safe Families	X	Maintaining Safety, Integrity, and Security		Public Infrastructure and Economic Development		Government and Citizens										
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ACCOUNTABILITY OF FUNDS	Goal #1.2 - Provide inmates with quality physical and mental health services.																				
What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?																					
RECIPIENTS OF FUNDS	New hiring of Agency personnel, see below:																				
What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated— using an existing formula, through a competitive process, based upon predetermined eligibility criteria?																					
JUSTIFICATION OF REQUEST	<ul style="list-style-type: none"><li>• One (1) Physician (\$200,000 each) to provide delivery of services.</li><li>• Eight (8) Registered Nurses (\$54,000 each) to provide delivery of services to our inmate population.</li><li>• Four (4) Licensed Practical Nurses (\$34,331 each) to provide delivery of Hep "C" services to our inmate population.</li><li>• Nine (9) Registered Nurse Supervisors (\$78,000 each) to provide continued delivery of addiction recovery services to our inmate population.</li><li>• Six and half (6.5) Psychiatrist positions (\$250,000 each) to provide continued delivery of mental health services to our inmate population.</li><li>• Two (2) Psychologist positions (\$120,000 each) to provide continued delivery of mental health services to our inmate population.</li><li>• One (1) Psychometrist position (\$42,000) to assist with the processing and testing of inmates at R&amp;E as needed with other inmates in need of assessment throughout the state.</li><li>• Ten (10) Qualified Mental Health Professionals (\$52,000 each) to provide continued delivery of mental health services to our inmate population.</li><li>• Five (5) Activity Therapist (\$31,945 each) to support the additional work created with the expansion of the Mental Health program.</li><li>• Ten (10) administrative positions (\$38,000 each) responsible for the enrollment, discharge and planning for inmates under the care of the Mental Health program.<ul style="list-style-type: none"><li>• Two (2) new Dentist Hygienist positions (\$48,821 each) to provide continued delivery of dental services.</li></ul></li><li>• Ten (10) addiction Recovery Specialists (\$52,000 each) to support the additional work created with the expansion of the Hep "C" program.</li><li>• Eleven (11) Psychiatric Nurse Practitioner positon (\$113,000 each) to provide continued delivery of mental health services to our inmate population.</li><li>• Two (2) Procurement Administrative Assistants (\$36,734 each) and One (1) Procurement Specialist (\$38,556) to provide continued delivery of procurement services to support the Health Services area.</li><li>• To continue to seek assistance from outside contract nursing agencies (\$4,550,984) until fully staffed.</li></ul>																				
Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.																					

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FORM BI – RECURRING OPERATING REQUEST

AGENCY PRIORITY	3																				
	Provide the Agency Priority Ranking from the Executive Summary.																				
TITLE	Critical Medical and Hepatitis "C" Treatment, Supplies and Equipment																				
	Provide a brief, descriptive title for this request.																				
AMOUNT	General: \$5,000,000 Federal: \$0 Other: \$0 Total: \$5,000,000																				
	What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.																				
NEW POSITIONS	0.00																				
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ACCOUNTABILITY OF FUNDS	Goal #1.2 - Provide Inmates with Quality Physical and Mental Health Services.																				
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RECIPIENTS OF FUNDS	Agency Medical staff																				
	What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated— using an existing formula, through a competitive process, based upon predetermined eligibility criteria?																				
JUSTIFICATION OF REQUEST	<ul style="list-style-type: none"><li>Funding for tests and treatment of our current inmate population (\$1,103,740), (\$2,239,581) to treat our non-identified inmates, (\$1,091,079) annual costs to test incoming inmates and annual costs of ultrasounds (\$165,600) for the detection of liver damage due to Hep C.</li><li>Agency-wide Institutional Meal Delivery - To transfer food to inmates in dorms that are locked down, segregated for health and behavioral problems and other emergency types of events. (\$400,000)</li></ul>																				
	Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.																				

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FORM BI – RECURRING OPERATING REQUEST

AGENCY PRIORITY	<div>4</div> <div>Provide the Agency Priority Ranking from the Executive Summary.</div>																				
TITLE	<div>Expansion of Gang Enforcement Security Team</div> <div>Provide a brief, descriptive title for this request.</div>																				
AMOUNT	<div>General: \$4,606,491</div> <div>Federal: \$0</div> <div>Other: \$0</div> <div>Total: \$4,606,491</div> <div>What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.</div>																				
NEW POSITIONS	<div>43.00</div> <div>Please provide the total number of new positions needed for this request.</div>																				
FACTORS ASSOCIATED WITH THE REQUEST	<div>Mark "X" for all that apply:</div> <table><tr><td></td><td>Change in cost of providing current services to existing program audience</td></tr><tr><td>X</td><td>Change in case load/enrollment under existing program guidelines</td></tr><tr><td></td><td>Non-mandated change in eligibility/enrollment for existing program</td></tr><tr><td></td><td>Non-mandated program change in service levels or areas</td></tr><tr><td>X</td><td>Proposed establishment of a new program or initiative</td></tr><tr><td></td><td>Loss of federal or other external financial support for existing program</td></tr><tr><td></td><td>Exhaustion of fund balances previously used to support program</td></tr><tr><td></td><td>IT Technology/Security related</td></tr><tr><td></td><td>Consulted DTO during development</td></tr><tr><td></td><td>Related to a Non-Recurring request – If so, Priority #</td></tr></table>		Change in cost of providing current services to existing program audience	X	Change in case load/enrollment under existing program guidelines		Non-mandated change in eligibility/enrollment for existing program		Non-mandated program change in service levels or areas	X	Proposed establishment of a new program or initiative		Loss of federal or other external financial support for existing program		Exhaustion of fund balances previously used to support program		IT Technology/Security related		Consulted DTO during development		Related to a Non-Recurring request – If so, Priority #
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ACCOUNTABILITY OF FUNDS	<div>Goal #1 - House, Feed and Clothe Inmates in Secure and Safe Institutions</div> <div>What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?</div>																				
RECIPIENTS OF FUNDS	<div>Established Police Services and Security Operations</div> <div>What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated—using an existing formula, through a competitive process, based upon predetermined eligibility criteria?</div>																				
JUSTIFICATION OF REQUEST	<div>Request is to expand the gathering of intelligence about Security Threat Groups (Gangs) within our correctional institutions. Important as the inmate population changes into a more violent, gang founded population.</div> <div><ul style="list-style-type: none"><li>One Administrative Manager II (\$80,000) to provide liaison duties between the STG groups and the SCDC Police Services.</li><li>Two Lieutenant Officers (\$41,568 each) to provide daily monitoring and information gathering for the identification of STG inmates in our Level III institutions.</li><li>Thirty six Level III Correctional Officers (\$37,831 each) for the gathering, collecting and assessing intelligence related to the Security Threat, Disruptive and Watch designated inmate groups at their assigned institutions.</li><li>Three Intelligence Unit Analysts (\$30,015 each) to plan, conduct and complete criminal and administrative investigations in conjunction with the Division of Security and Police Services.</li><li>Deputy Director of Operations is in need of an Assistant Deputy Director (\$125,000) that will be responsible for an overall direction of the correctional institutions. Currently, as Operations is exploring new inmate classification systems, working with the Mental Health Implementation Panel and developing a more valid inmate disciplinary system, this position will be key in focusing attention directly to the operations of all twenty one correctional facilities.</li><li>Request is for the technology to interdict criminal activity via inmate calls from approved phone call equipment. Celebrate (\$2,000,000) System is adequate for our needs.</li></ul></div> <div>Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.</div>																				

Agency Name:	Department Of Corrections		
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FORM BI – RECURRING OPERATING REQUEST

AGENCY PRIORITY	5
Provide the Agency Priority Ranking from the Executive Summary.	
TITLE	Long-Term Proqramming and Reentry Needs - New Positions and Continued Development
Provide a brief, descriptive title for this request.	
AMOUNT	General: \$4,158,246 Federal: \$0 Other: \$0 Total: \$4,158,246
What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.	
NEW POSITIONS	49.00
Please provide the total number of new positions needed for this request.	
FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:
	<input type="checkbox"/> Change in cost of providing current services to existing program audience
	<input checked="" type="checkbox"/> Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/> Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/> Non-mandated program change in service levels or areas
	<input checked="" type="checkbox"/> Proposed establishment of a new program or initiative
	<input type="checkbox"/> Loss of federal or other external financial support for existing program
	<input type="checkbox"/> Exhaustion of fund balances previously used to support program
	<input type="checkbox"/> IT Technology/Security related
	<input type="checkbox"/> Consulted DTO during development
<input type="checkbox"/> Related to a Non-Recurring request – If so, Priority #	
STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:
	<input type="checkbox"/> Education, Training, and Human Development
	<input type="checkbox"/> Healthy and Safe Families
	<input checked="" type="checkbox"/> Maintaining Safety, Integrity, and Security
	<input type="checkbox"/> Public Infrastructure and Economic Development
	<input type="checkbox"/> Government and Citizens
ACCOUNTABILITY OF FUNDS	Goal #2.3 - Provide Inmates with Job Skills and Pre-Release Programming
What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?	
RECIPIENTS OF FUNDS	New Employees to operate New Re-Entry programmatic services to the inmate population.
What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated—using an existing formula, through a competitive process, based upon predetermined eligibility criteria?	
JUSTIFICATION OF REQUEST	<p>Request is to provide reentry and long-term programming Program Coordinators and staff assistants to the Level II and III institutions where rehabilitation is needed most. These staff will also provide programs for the mentally ill inmates as well as those with behavioral problems housed in Restrictive Housing.</p> <ul style="list-style-type: none"><li>• Eight Program Coordinators II (\$48,000 each) to provide delivery of institutional programs and reentry services to our inmate population.</li><li>• Twenty-six Program Assistants (\$37,000 each) to provide delivery of institutional programs and reentry services to our inmate population.</li><li>• New curricula for all inmates (\$256,000) for an evidence based program which can provide meaningful, sustained and measurable reentry outcomes as well as mental illness and opioid addictions.</li><li>• Inmate job/life skills training (\$330,000) through SC Thrive and other community providers to ensure that the inmates are prepared for reentry into the community and provided with social security cards, SNAP, TANF and Veterans benefits, and applicable SSI disability applications.</li><li>• Associated staff development training (\$60,000) for the instructional platforms with the new curricula as well as training in "Thinking For a Change", "Seven Habits on the Inside", "Changing Offender Behavior" and SC Thrive Benefits Bank staff training.</li></ul> <p>Request is to hire additional staff for the continued growth of the Program Services support teams and inmate reentry into the community workforce.</p> <ul style="list-style-type: none"><li>• One Program Manager II (\$81,000) to provide state-wide training and development of all reentry and institutional specific programs as well as policy development.</li><li>• One State-wide Coordinator (Administrative Manager II) (\$96,000) to provide delivery of a comprehensive state-wide inmate workforce reentry/reintegration initiative.</li><li>• One Public Awareness Officer (\$35,000) for a continued crime prevention program for at-risk youth in the community. Currently, we have a team of two officers dedicated to this program, however, the program is so successful, we need one additional position.</li><li>• One Grants Coordinator (\$47,470) to research and apply for important grants that would benefit the Agency and the inmate population.</li><li>• Implement the Academy of Hope (\$900,000) at the Lee Correctional Institution which is an outside organization that provides a violence intervention series of programming and education mediation and inmate manipulation.</li><li>• Three (3) Chaplains (\$38,323) to provide religious programmatic services to the inmate populations at Leath, Lieber and Perry.</li><li>• One (1) Culinary Arts Instructor (\$54,141) to provide food preparation programmatic services to the inmate population.</li><li>• Three (3) Program Manager I positions (\$65,000) to provide monitoring, audit and evaluation for all program services being offered to the inmate population.</li><li>• One (1) Assistant Division Director (\$65,000) and three (3) Human Services Specialists (\$38,400) to provide additional programming needs to the youthful offenders participating in the YOPRS program.</li></ul> <p>Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.</p>

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FORM BI – RECURRING OPERATING REQUEST

AGENCY PRIORITY	<div>6</div> <div>Provide the Agency Priority Ranking from the Executive Summary.</div>
TITLE	<div>Additional Personnel for the Division of Compliance, Standards and Inspections</div> <div>Provide a brief, descriptive title for this request.</div>
AMOUNT	<div><div>General: \$2,049,889</div><div>Federal: \$0</div><div>Other: \$0</div><div>Total: \$2,049,889</div></div> <div>What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.</div>
NEW POSITIONS	<div>19.00</div> <div>Please provide the total number of new positions needed for this request.</div>
FACTORS ASSOCIATED WITH THE REQUEST	<div><div>Mark "X" for all that apply:</div><div><div>X</div>Change in cost of providing current services to existing program audience</div><div><div></div>Change in case load/enrollment under existing program guidelines</div><div><div></div>Non-mandated change in eligibility/enrollment for existing program</div><div><div></div>Non-mandated program change in service levels or areas</div><div><div></div>Proposed establishment of a new program or initiative</div><div><div></div>Loss of federal or other external financial support for existing program</div><div><div></div>Exhaustion of fund balances previously used to support program</div><div><div></div>IT Technology/Security related</div><div><div></div>Consulted DTO during development</div><div><div></div>Related to a Non-Recurring request – If so, Priority #</div></div>



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FORM BI – RECURRING OPERATING REQUEST

AGENCY PRIORITY	7
Provide the Agency Priority Ranking from the Executive Summary.	

TITLE	Implementation of Kronos Timekeeping/Scheduling Electronic Process and Critical Personnel
Provide a brief, descriptive title for this request.	

AMOUNT	General: \$943,678 Federal: \$0 Other: \$0 Total: \$943,678
What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.	

NEW POSITIONS	7.00
Please provide the total number of new positions needed for this request.	

FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:
	<input type="checkbox"/> Change in cost of providing current services to existing program audience
	<input type="checkbox"/> Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/> Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/> Non-mandated program change in service levels or areas
	<input checked="" type="checkbox"/> Proposed establishment of a new program or initiative
	<input type="checkbox"/> Loss of federal or other external financial support for existing program
	<input type="checkbox"/> Exhaustion of fund balances previously used to support program
	<input checked="" type="checkbox"/> IT Technology/Security related
	<input type="checkbox"/> Consulted DTO during development
<input type="checkbox"/> Related to a Non-Recurring request – If so, Priority #	

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:
	<input type="checkbox"/> Education, Training, and Human Development
	<input type="checkbox"/> Healthy and Safe Families
	<input checked="" type="checkbox"/> Maintaining Safety, Integrity, and Security
	<input type="checkbox"/> Public Infrastructure and Economic Development
	<input type="checkbox"/> Government and Citizens

ACCOUNTABILITY OF FUNDS	Goal #3 - Provide Cost-Effective Services and Promote Operational Excellence.
What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?	

RECIPIENTS OF FUNDS	Agency personnel to provide additional accountability of working times and overtime.
What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated—using an existing formula, through a competitive process, based upon predetermined eligibility criteria?	

JUSTIFICATION OF REQUEST	Request is for a electronic standardized timekeeping and scheduling tool for the management of the Agency's employee population. In order to meet the demands of incoming uniformed and non-uniformed recruits, we need additional staff (5) and one (1) registered nurse to expedite the processing to fill Agency vacancies. Request is to fund one (1) position that will be responsible for critical accounting, budget and finance data processing and management report production
Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.	

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FORM BI – RECURRING OPERATING REQUEST

AGENCY PRIORITY	8																				
Provide the Agency Priority Ranking from the Executive Summary.																					
TITLE	Preventive Health Screenings for Inmate Population																				
Provide a brief, descriptive title for this request.																					
AMOUNT	General: \$2,744,825 Federal: \$0 Other: \$0 Total: \$2,744,825																				
What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.																					
NEW POSITIONS	0.00																				
Please provide the total number of new positions needed for this request.																					
FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply: <table><tr><td></td><td>Change in cost of providing current services to existing program audience</td></tr><tr><td>X</td><td>Change in case load/enrollment under existing program guidelines</td></tr><tr><td></td><td>Non-mandated change in eligibility/enrollment for existing program</td></tr><tr><td></td><td>Non-mandated program change in service levels or areas</td></tr><tr><td>X</td><td>Proposed establishment of a new program or initiative</td></tr><tr><td></td><td>Loss of federal or other external financial support for existing program</td></tr><tr><td></td><td>Exhaustion of fund balances previously used to support program</td></tr><tr><td></td><td>IT Technology/Security related</td></tr><tr><td></td><td>Consulted DTO during development</td></tr><tr><td></td><td>Related to a Non-Recurring request – If so, Priority #</td></tr></table>		Change in cost of providing current services to existing program audience	X	Change in case load/enrollment under existing program guidelines		Non-mandated change in eligibility/enrollment for existing program		Non-mandated program change in service levels or areas	X	Proposed establishment of a new program or initiative		Loss of federal or other external financial support for existing program		Exhaustion of fund balances previously used to support program		IT Technology/Security related		Consulted DTO during development		Related to a Non-Recurring request – If so, Priority #
	Change in cost of providing current services to existing program audience																				
X	Change in case load/enrollment under existing program guidelines																				
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	Non-mandated program change in service levels or areas																				
X	Proposed establishment of a new program or initiative																				
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	Exhaustion of fund balances previously used to support program																				
	IT Technology/Security related																				
	Consulted DTO during development																				
	Related to a Non-Recurring request – If so, Priority #																				
STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective: <table><tr><td></td><td>Education, Training, and Human Development</td></tr><tr><td></td><td>Healthy and Safe Families</td></tr><tr><td>X</td><td>Maintaining Safety, Integrity, and Security</td></tr><tr><td></td><td>Public Infrastructure and Economic Development</td></tr><tr><td></td><td>Government and Citizens</td></tr></table>		Education, Training, and Human Development		Healthy and Safe Families	X	Maintaining Safety, Integrity, and Security		Public Infrastructure and Economic Development		Government and Citizens										
	Education, Training, and Human Development																				
	Healthy and Safe Families																				
X	Maintaining Safety, Integrity, and Security																				
	Public Infrastructure and Economic Development																				
	Government and Citizens																				
ACCOUNTABILITY OF FUNDS	Goal #1.2 - Provide Inmates with Quality Physical and Mental Health Services																				
What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?																					
RECIPIENTS OF FUNDS	Inmate Population																				
What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated—using an existing formula, through a competitive process, based upon predetermined eligibility criteria?																					
JUSTIFICATION OF REQUEST	To provide community standard of care and long term cost efficiency, perform health screenings on inmate population. <ul style="list-style-type: none"><li>Screening colonoscopies on all men age 50 or over. (\$1,513,000)</li><li>Mammography on women age 40 or greater. (\$136,000)</li><li>Chronic disease testing to monitor health of patients with chronic conditions such as diabetes, hypertension, cardio and pulmonary issues (\$95,825).</li><li>Thirty Day medication supply upon inmate discharge (\$1,000,000) needed to reduce recidivism by enabling inmates departing the SCDC system to stay on mental and other critical medications until they can obtain services in the community.</li></ul>																				
Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.																					

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FORM BI – RECURRING OPERATING REQUEST

AGENCY PRIORITY	<div>9</div> <div>Provide the Agency Priority Ranking from the Executive Summary.</div>
TITLE	<div>Mandated Administrative Budget Requests</div> <div>Provide a brief, descriptive title for this request.</div>
AMOUNT	<div><div>General: \$7,784,009</div><div>Federal: \$0</div><div>Other: \$0</div><div>Total: \$7,784,009</div><div>What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.</div></div>
NEW POSITIONS	<div>0.00</div> <div>Please provide the total number of new positions needed for this request.</div>
FACTORS ASSOCIATED WITH THE REQUEST	<div><div>Mark "X" for all that apply:</div><div><div><div></div><div>Change in cost of providing current services to existing program audience</div></div><div><div>X</div><div>Change in case load/enrollment under existing program guidelines</div></div><div><div></div><div>Non-mandated change in eligibility/enrollment for existing program</div></div><div><div></div><div>Non-mandated program change in service levels or areas</div></div><div><div></div><div>Proposed establishment of a new program or initiative</div></div><div><div></div><div>Loss of federal or other external financial support for existing program</div></div><div><div></div><div>Exhaustion of fund balances previously used to support program</div></div><div><div></div><div>IT Technology/Security related</div></div><div><div></div><div>Consulted DTO during development</div></div><div><div></div><div>Related to a Non-Recurring request – If so, Priority #</div></div></div></div>
STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	<div><div>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</div><div><div><div></div><div>Education, Training, and Human Development</div></div><div><div></div><div>Healthy and Safe Families</div></div><div><div>X</div><div>Maintaining Safety, Integrity, and Security</div></div><div><div></div><div>Public Infrastructure and Economic Development</div></div><div><div></div><div>Government and Citizens</div></div></div></div>
ACCOUNTABILITY OF FUNDS	<div><div>Goal #3 - Provide Cost-Effective Services and Promote Operational Excellence</div><div>What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?</div></div>
RECIPIENTS OF FUNDS	<div><div>Agency Administrative services mandated to absorb additional costs set by other State Agencies.</div><div>What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated— using an existing formula, through a competitive process, based upon predetermined eligibility criteria?</div></div>
JUSTIFICATION OF REQUEST	<div><div>Request is to fund additional property and tort insurance premiums (\$5,984,009) administered by the IRF and to fund the implementation of the Microsoft 365 IT (\$1,800,000) platform to match the technology conversion mandated from the State ITO.</div><div>Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.</div></div>

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**FORM B2 – NON-RECURRING OPERATING REQUEST**

AGENCY PRIORITY	10
Provide the Agency Priority Ranking from the Executive Summary.	
TITLE	Critical Health Services Equipment
Provide a brief, descriptive title for this request.	
AMOUNT	\$2,259,168
What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.	
FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:
	<input checked="" type="checkbox"/> Change in cost of providing current services to existing program audience
	<input checked="" type="checkbox"/> Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/> Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/> Non-mandated program change in service levels or areas
	<input checked="" type="checkbox"/> Proposed establishment of a new program or initiative
	<input type="checkbox"/> Loss of federal or other external financial support for existing program
	<input type="checkbox"/> Exhaustion of fund balances previously used to support program
	<input type="checkbox"/> IT Technology/Security related
	<input type="checkbox"/> Consulted DTO during development
	<input type="checkbox"/> Request for Non-Recurring Appropriations
	<input type="checkbox"/> Request for Federal/Other Authorization to spend existing funding
	<input type="checkbox"/> Related to a Recurring request – If so, Priority #
STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:
	<input type="checkbox"/> Education, Training, and Human Development
	<input type="checkbox"/> Healthy and Safe Families
	<input checked="" type="checkbox"/> Maintaining Safety, Integrity, and Security
	<input type="checkbox"/> Public Infrastructure and Economic Development
<input type="checkbox"/> Government and Citizens	
ACCOUNTABILITY OF FUNDS	Goal #1.2 - Provide Inmates with Quality Physical and Mental Health Services
What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?	
RECIPIENTS OF FUNDS	Agency Medical Staff for inmate population
What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?	
JUSTIFICATION OF REQUEST	<ul style="list-style-type: none"><li>• Funding for the supplies needed (\$208,500) for Mental Health services program to comply with current Implementation Panel mandates. (testing materials, suicide smocks, blankets, radios, headphones).</li><li>• Equipment needed for R&amp;E Dental Unit (\$97,739).</li><li>• Eyecon Pill Scanner (\$10,000) to improve pharmacy efficiency.</li><li>• Portable digital x-ray unit (\$24,000) needed to provide x-ray services at multiple sites to reduce movement of inmates.</li><li>• Funding for increase in supply costs for medical services (\$265,000) replacement/update to include medical gurneys, vital signs monitors, additional AED units, scales and diagnostic sets.</li><li>• Additional copier for HS Headquarters office plus smart board, computers needed for HS Admin offices (\$53,000).</li><li>• Parata Medication Pharmacy System (\$867,500) for the increased efficiency of pill distribution and reduction of nursing labor associated with the distribution of meds to the inmates.</li><li>• Additional Telehealth carts (\$250,000) to enable telehealth visits at remote SCDC sites for specialty care physician services, thereby reducing the movement of inmates to the community for care.</li><li>• Purchase of "Up-to-Date" clinical software system (\$124,429) which is the most accepted evidence-based set of clinical guidelines to support cost effective clinical decision making by providers.</li><li>• Purchase four (4) Vans for the transportation of bed ridden or obese inmate patients without calling for a medical service, (\$51,000 each).</li><li>• Update obsolete X-Ray PACS system to enable images to reside in the EHR. (\$80,000)</li><li>• Lab computer interface (\$75,000) needed for lab system to communicate with EHR. Current system no longer supported by company.</li></ul>
Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.	

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FORM B2 – NON-RECURRING OPERATING REQUEST

AGENCY PRIORITY	11
Provide the Agency Priority Ranking from the Executive Summary.	
TITLE	Critical Long-term and Reentry Programming Equipment
Provide a brief, descriptive title for this request.	
AMOUNT	\$1,030,000
What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.	
FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:
	<input checked="" type="checkbox"/> Change in cost of providing current services to existing program audience
	<input checked="" type="checkbox"/> Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/> Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/> Non-mandated program change in service levels or areas
	<input checked="" type="checkbox"/> Proposed establishment of a new program or initiative
	<input type="checkbox"/> Loss of federal or other external financial support for existing program
	<input type="checkbox"/> Exhaustion of fund balances previously used to support program
	<input type="checkbox"/> IT Technology/Security related
	<input type="checkbox"/> Consulted DTO during development
	<input type="checkbox"/> Request for Non-Recurring Appropriations
	<input type="checkbox"/> Request for Federal/Other Authorization to spend existing funding
	<input type="checkbox"/> Related to a Recurring request – If so, Priority #
STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:
	<input type="checkbox"/> Education, Training, and Human Development
	<input type="checkbox"/> Healthy and Safe Families
	<input checked="" type="checkbox"/> Maintaining Safety, Integrity, and Security
	<input type="checkbox"/> Public Infrastructure and Economic Development
<input type="checkbox"/> Government and Citizens	
ACCOUNTABILITY OF FUNDS	Goal # 2 - Prevent Recidivism by Preparing Inmates for Reentry Back into Their Communities
What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?	
RECIPIENTS OF FUNDS	Programmatic staff for the inmate population.
What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?	
JUSTIFICATION OF REQUEST	<p>Request is to provide reentry and long-term programming Program Coordinators and staff assistants the equipment to manage the Level II and III institution reentry programs where rehabilitation is needed most.</p> <ul style="list-style-type: none"><li>Request is for a validated, integrated "Risk/Needs Assessment" electronic tool (750,000) that will track and evaluate inmate program participation.</li><li>Equipment (\$70,000) to support the new curricula. The equipment includes laptops, smartboards, projectors, screens to display the curricula to the inmates.</li><li>Camille Griffin Graham needs two (2) additional programmatic classrooms (\$184,000 for both) and Wateree needs critical repairs to their four (4) portables (\$26,000 total).</li></ul>
Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.	

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FORM B2 – NON-RECURRING OPERATING REQUEST

AGENCY PRIORITY	12
Provide the Agency Priority Ranking from the Executive Summary.	
TITLE	Food Services Kitchen Equipment
Provide a brief, descriptive title for this request.	
AMOUNT	\$353,000
What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.	
FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:
	<input checked="" type="checkbox"/> Change in cost of providing current services to existing program audience
	<input type="checkbox"/> Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/> Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/> Non-mandated program change in service levels or areas
	<input type="checkbox"/> Proposed establishment of a new program or initiative
	<input type="checkbox"/> Loss of federal or other external financial support for existing program
	<input type="checkbox"/> Exhaustion of fund balances previously used to support program
	<input type="checkbox"/> IT Technology/Security related
	<input type="checkbox"/> Consulted DTO during development
	<input type="checkbox"/> Request for Non-Recurring Appropriations
	<input type="checkbox"/> Request for Federal/Other Authorization to spend existing funding
	<input type="checkbox"/> Related to a Recurring request – If so, Priority #
STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:
	<input type="checkbox"/> Education, Training, and Human Development
	<input type="checkbox"/> Healthy and Safe Families
	<input checked="" type="checkbox"/> Maintaining Safety, Integrity, and Security
	<input type="checkbox"/> Public Infrastructure and Economic Development
<input type="checkbox"/> Government and Citizens	
ACCOUNTABILITY OF FUNDS	Goal #1 - House, Feed and Clothe Inmates in Secure and Safe Institutions
What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?	
RECIPIENTS OF FUNDS	Food Service staff for the inmate population
What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?	
JUSTIFICATION OF REQUEST	Request to continue the replacement of old worn out kitchen equipment for institutional cafeterias.  • Kitchen Equipment - Ten ice machines (\$7,000 each), Three dish washing machines (\$50,000 each), Eight heating storage cabinets for daily food storage (\$8,750 each), Two cold storage holding cabinets for daily food storage (\$5,000 each). • 5000 Lb. Forklifts (2) (\$26,500 each) - To properly move products throughout the Food Warehouse and for the loading of trucks for delivery purposes.
Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.	

Agency Name:	Department Of Corrections		
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FORM B2 – NON-RECURRING OPERATING REQUEST

AGENCY PRIORITY	13 <i>Provide the Agency Priority Ranking from the Executive Summary.</i>																										
TITLE	Critical Institutional and Security Personnel Equipment <i>Provide a brief, descriptive title for this request.</i>																										
AMOUNT	\$27,156,430 <i>What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.</i>																										
FACTORS ASSOCIATED WITH THE REQUEST	<table><tr><td colspan="2">Mark "X" for all that apply:</td></tr><tr><td><input type="checkbox"/></td><td>Change in cost of providing current services to existing program audience</td></tr><tr><td><input type="checkbox"/></td><td>Change in case load/enrollment under existing program guidelines</td></tr><tr><td><input type="checkbox"/></td><td>Non-mandated change in eligibility/enrollment for existing program</td></tr><tr><td><input type="checkbox"/></td><td>Non-mandated program change in service levels or areas</td></tr><tr><td><input checked="" type="checkbox"/></td><td>Proposed establishment of a new program or initiative</td></tr><tr><td><input type="checkbox"/></td><td>Loss of federal or other external financial support for existing program</td></tr><tr><td><input type="checkbox"/></td><td>Exhaustion of fund balances previously used to support program</td></tr><tr><td><input type="checkbox"/></td><td>IT Technology/Security related</td></tr><tr><td><input type="checkbox"/></td><td>Consulted DTO during development</td></tr><tr><td><input type="checkbox"/></td><td>Request for Non-Recurring Appropriations</td></tr><tr><td><input type="checkbox"/></td><td>Request for Federal/Other Authorization to spend existing funding</td></tr><tr><td><input type="checkbox"/></td><td>Related to a Recurring request – If so, Priority #</td></tr></table>	Mark "X" for all that apply:		<input type="checkbox"/>	Change in cost of providing current services to existing program audience	<input type="checkbox"/>	Change in case load/enrollment under existing program guidelines	<input type="checkbox"/>	Non-mandated change in eligibility/enrollment for existing program	<input type="checkbox"/>	Non-mandated program change in service levels or areas	<input checked="" type="checkbox"/>	Proposed establishment of a new program or initiative	<input type="checkbox"/>	Loss of federal or other external financial support for existing program	<input type="checkbox"/>	Exhaustion of fund balances previously used to support program	<input type="checkbox"/>	IT Technology/Security related	<input type="checkbox"/>	Consulted DTO during development	<input type="checkbox"/>	Request for Non-Recurring Appropriations	<input type="checkbox"/>	Request for Federal/Other Authorization to spend existing funding	<input type="checkbox"/>	Related to a Recurring request – If so, Priority #
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STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	<table><tr><td colspan="2">Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</td></tr><tr><td><input type="checkbox"/></td><td>Education, Training, and Human Development</td></tr><tr><td><input type="checkbox"/></td><td>Healthy and Safe Families</td></tr><tr><td><input checked="" type="checkbox"/></td><td>Maintaining Safety, Integrity, and Security</td></tr><tr><td><input type="checkbox"/></td><td>Public Infrastructure and Economic Development</td></tr><tr><td><input type="checkbox"/></td><td>Government and Citizens</td></tr></table>	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:		<input type="checkbox"/>	Education, Training, and Human Development	<input type="checkbox"/>	Healthy and Safe Families	<input checked="" type="checkbox"/>	Maintaining Safety, Integrity, and Security	<input type="checkbox"/>	Public Infrastructure and Economic Development	<input type="checkbox"/>	Government and Citizens														
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ACCOUNTABILITY OF FUNDS	<div>Goal #1 - House, Feed and Clothe Inmates in Safe and Secure Institutions</div> <div><i>What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?</i></div>																										
RECIPIENTS OF FUNDS	<div>Agency Security Institutional Staff to secure our Institutions</div> <div><i>What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?</i></div>																										
JUSTIFICATION OF REQUEST	<div>Request is for institutional equipment to provide security and safety for our staff:</div> <div><ul style="list-style-type: none"><li>• Mandown Electronic System (\$21,600,000) for Level II and III Institutions for the protection of our correctional officers and institutional staff.</li><li>• Convert the primitive analog radio systems in our Level II and III institutions to digital. The cost is \$182,353 for each of the seventeen (17) institutions that need to be converted. Digital has features that provide more safety and security for individual officers and the institutions (\$3,000,000).</li><li>• Security Camera Equipment (\$1,000,000) for Level II and III Institutions for the protection of our correctional officers and institutional staff.</li><li>• Three hundred stab/ballistic vests (\$275,000) for our emergency response teams and Five hundred Pointblank multi threat vests (\$375,000) for our correctional officers.</li><li>• Heartbeat Detection System (\$216,000)</li><li>• Cell Sense Poles (\$259,920)</li><li>• Special Teams Equipment (\$430,510)</li></ul></div> <div><i>Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.</i></div>																										

Agency Name:	Department Of Corrections		
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FORM B2 – NON-RECURRING OPERATING REQUEST

AGENCY PRIORITY	14
Provide the Agency Priority Ranking from the Executive Summary.	
TITLE	Critical Agency-Wide Transportation and Maintenance Heavy Equipment Needs
Provide a brief, descriptive title for this request.	
AMOUNT	\$7,424,000
What is the net change in requested appropriations for FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.	
FACTORS ASSOCIATED WITH THE REQUEST	Mark "X" for all that apply:
	<input checked="" type="checkbox"/> Change in cost of providing current services to existing program audience
	<input checked="" type="checkbox"/> Change in case load/enrollment under existing program guidelines
	<input type="checkbox"/> Non-mandated change in eligibility/enrollment for existing program
	<input type="checkbox"/> Non-mandated program change in service levels or areas
	<input type="checkbox"/> Proposed establishment of a new program or initiative
	<input type="checkbox"/> Loss of federal or other external financial support for existing program
	<input type="checkbox"/> Exhaustion of fund balances previously used to support program
	<input type="checkbox"/> IT Technology/Security related
	<input type="checkbox"/> Consulted DTO during development
	<input type="checkbox"/> Request for Non-Recurring Appropriations
	<input type="checkbox"/> Request for Federal/Other Authorization to spend existing funding
<input type="checkbox"/> Related to a Recurring request – If so, Priority #	
STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	Mark "X" for primary applicable Statewide Enterprise Strategic Objective:
	<input type="checkbox"/> Education, Training, and Human Development
	<input type="checkbox"/> Healthy and Safe Families
	<input checked="" type="checkbox"/> Maintaining Safety, Integrity, and Security
	<input type="checkbox"/> Public Infrastructure and Economic Development
<input type="checkbox"/> Government and Citizens	
ACCOUNTABILITY OF FUNDS	Goal #1 - House, Feed and Clothe Inmates in Secure and Safe Institutions
	What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency's accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?
RECIPIENTS OF FUNDS	Agency Support Services and Facilities Maintenance
	What individuals or entities would receive these funds (contractors, vendors, grantees, individual beneficiaries, etc.)? How would these funds be allocated – using an existing formula, through a competitive process, based upon predetermined eligibility criteria?
JUSTIFICATION OF REQUEST	Request is to fund the purchase of new transport vehicles and sedans to replace our ageing fleet. Our vehicles are outdated for security and safety transport of the inmates and security staff.
	<ul style="list-style-type: none"><li>• Tractor Trailers (8) - To transfer food stuffs and Industries/Commissary/Canteen products around the State to our institutions and customers.</li><li>• Box Trucks (10) - To transfer food stuffs and Industries/Commissary/Canteen products around the State to our institutions and customers.</li><li>• Heavy Duty Buses (7) - To transfer inmates around the State to our institutions and various other medical/court appointments.</li><li>• Vans/Pickup Trucks (51) - To transfer inmates and staff around the State to our institutions and various other medical/court appointments.</li><li>• Sedans/SUV (57) - To provide Agency staff with safe, secure and reliable transportation to perform their jobs efficiently.</li><li>• Trailers (8) - For product storage capabilities.</li><li>• Tractor Trailers (2) (\$250,000 each) and Lowboy (1) (\$100,000) - To transport heavy equipment around the State to our institutions.</li><li>• Boom Truck (1) (\$300,000) - To provide crane services around the State to our institutions.</li><li>• Mini-Excavator (\$100,000) - To aid in excavating projects for pipe repairs and cable installation.</li><li>• Other needed equipment (\$70,000) for day to day operations.</li></ul>
Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.	



Agency Name:	Department Of Corrections		
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FORM C – CAPITAL REQUEST

AGENCY PRIORITY

15

Provide the Agency Priority Ranking from the Executive Summary.

TITLE

Critical Deferred Maintenance Projects

Provide a brief, descriptive title for this request.

AMOUNT

\$100,000,000

How much is requested for this project in FY 2021-2022? This amount should correspond to the total for all funding sources on the Executive Summary.

CPIP PRIORITY

Various - This is the Senate Version from FY21, Detail was sent in prior e-mail.

Identify the project's CPIP plan year and priority number, along with the first year in which the project was included in the agency's CPIP. If not included in the agency's CPIP, please provide an explanation. If the project involves a request for appropriated state funding, briefly describe the agency's contingency plan in the event that state funding is not made available in the amount requested.

OTHER APPROVALS

Capital Budgeting Office and JBRC Group

What approvals have already been obtained? Are there additional approvals that must be secured in order for the project to succeed? (Institutional board, JBRC, SFAA, etc.)

LONG-TERM PLANNING AND SUSTAINABILITY

We don't have funding to fund this large request.

What other funds have already been invested in this project (source/type, amount, timeframe)? Will other capital and/or operating funds for this project be requested in the future? If so, how much, and in which fiscal years? Has a source for those funds been identified/secured? What is the agency's expectation with regard to additional annual costs or savings associated with this capital improvement? What source of funds will be impacted by those costs or savings? What is the expected useful life of the capital improvement?

SUMMARY

Submitted Senate Version of \$100,000,000 - detailed from the notebook for Shane Martin

Provide a summary of the project and explain why it is necessary. Please refer to the budget guidelines for appropriate questions and thoroughly answer all related items.

Agency Name:	Department Of Corrections		
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FORM E – AGENCY COST SAVINGS AND GENERAL FUND REDUCTION CONTINGENCY PLAN

TITLE	Agency Cost Savings and General Fund Reduction Contingency Plan
AMOUNT	\$13,669,422 <i>What is the General Fund 3% reduction amount? This amount should correspond to the reduction spreadsheet prepared by EBO.</i>
ASSOCIATED FTE REDUCTIONS	The FY20 adjusted Agency General Fund Budget amounts to \$455,647,384 which is made up of Personal Services \$333,665,446 (69%) and General Operating \$121,981,938 (31%). As determined by the Executive Budget Office, this Agency would be responsible for reducing State General Funds of \$13,669,422. Approximately two hundred (260) sixty non-uniformed positions would have to remain unfilled and temporary positons would be eliminated. <i>How many FTEs would be reduced in association with this General Fund reduction?</i>
PROGRAM / ACTIVITY IMPACT	With the increasing everyday costs of providing a safe, secure and rehabilitative environment for our inmates coupled with the high cost of providing medical and mental/behavioral health services, it is difficult to bear an agency-wide budget reduction of any percentage.  The Agency savings (carryforward) that we do incur annually is generally derived from the excessive vacancies that the Agency is experiencing within our security ranks. We do examine what Agency needs can be best served using our carryforward which usually is spent on covering deficits from rising medical costs and unfunded mandated increases from other support Agencies such as the IRF.  <i>What programs or activities are supported by the General Funds identified?</i>
SUMMARY	In order to reduce our budget, we would be obligated to reduce expenditures in our administrative and support services function which represent the remaining fifteen (15%) of our budget, approximately \$68,347,108.  We studied the Agency payroll and have determined that we would place a hiring freeze on mostly administrative, maintenance, teachers, vocational instructors, case workers, and supply warehouse worker positions in conjunction with not filling positons that become vacant from staff retirements/attribution, and continue to watch our costs of medical delivery and further reduce socialized programs to the inmates. We would also have to redefine non-uniformed positions as essential and non-essential and implement a furlough/reduction in force for those positions considered non-essential to direct security support. While this protects our security staffing, it does create support issues. The security staff cannot maintain a secure environment without the support of the positions listed above.  <i>Please provide a detailed summary of service delivery impact caused by a reduction in General Fund Appropriations and provide the method of calculation for anticipated reductions. Agencies should prioritize reduction in expenditures that have the least significant impact on service delivery.</i>
AGENCY COST SAVINGS PLANS	With the increasing costs of providing a safe, secure and rehabilitative environment for our inmates and the high cost of providing medical and mental/behavioral health services, it is difficult to have agency-wide savings. The Agency savings (carryforward) that we do incur annually is generally derived from the excessive vacancies that the Agency is experiencing within our security ranks. We do examine what Agency needs can be best served using our carryforward which usually is spent on providing more security protection for our correctional officers and much needed maintenance/ equipment replacement within our institutional and support buildings. We do not use the carryforward for recurring costs such as new administrative positions or frivolous spending: always on items that were previously requested through the annual budget preparation that the State could not afford at that time.  <i>What measures does the agency plan to implement to reduce its costs and operating expenses by more than \$50,000? Provide a summary of the measures taken and the estimated amount of savings. How does the agency plan to repurpose the savings?</i>

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FORM F – REDUCING COST AND BURDEN TO BUSINESSES AND CITIZENS

TITLE	<div>South Carolina Department of Corrections Report</div> <div>Provide a brief, descriptive title for this request.</div>								
EXPECTED SAVINGS TO BUSINESSES AND CITIZENS	<div>The South Carolina Department of Corrections' mission statement is to protect the public, our employees, and our inmates while providing rehabilitation and self-improvement opportunities for our inmates and promoting fiscal responsibility and self-sufficiency.</div> <div>In accordance with our mission, Agency Management continues to look for programs to assist inmates in their rehabilitation back to society, to reduce recidivism and ways to save operational costs.</div> <div>What is the expected savings to South Carolina's businesses and citizens that is generated by this proposal? The savings could be related to time or money.</div>								
FACTORS ASSOCIATED WITH THE REQUEST	<div>Mark "X" for all that apply:</div> <table><tr><td></td><td>Repeal or revision of regulations.</td></tr><tr><td></td><td>Reduction of agency fees or fines to businesses or citizens.</td></tr><tr><td>X</td><td>Greater efficiency in agency services or reduction in compliance burden.</td></tr><tr><td>X</td><td>Other</td></tr></table>		Repeal or revision of regulations.		Reduction of agency fees or fines to businesses or citizens.	X	Greater efficiency in agency services or reduction in compliance burden.	X	Other
	Repeal or revision of regulations.								
	Reduction of agency fees or fines to businesses or citizens.								
X	Greater efficiency in agency services or reduction in compliance burden.								
X	Other								
METHOD OF CALCULATION	<div>Actual Expenditures.</div> <div>Describe the method of calculation for determining the expected cost or time savings to businesses or citizens.</div>								
REDUCTION OF FEES OR FINES	<div>The South Carolina Department of Corrections does not charge fees or fines to the general public. The Agency charges fees and fines to the inmate population when Agency/staff property is damaged, charges for authorized telephone usage, victims' restitution, canteen purchases and other replacement fees.</div> <div>Which fees or fines does the agency intend to reduce? What was the fine or fee revenue for the previous fiscal year? What was the associated program expenditure for the previous fiscal year? What is the enabling authority for the issuance of the fee or fine?</div>								
REDUCTION OF REGULATION	<div>None at this time.</div> <div>Which regulations does the agency intend to amend or delete? What is the enabling authority for the regulation?</div>								
SUMMARY	<div>The Agency continues to comply with the mission at hand. We strive to provide security, rehabilitation, self-sufficiency and fiscal responsibility. In addition to security, the Agency has achieved success with the following objectives in FY19:</div> <div><ul style="list-style-type: none"><li>During FY20, approximately \$3.7 million of General Fund carryforward (savings) was dedicated to open major critical deferred maintenance to the institutions.</li><li>The Agency strives to continue to eliminate the need for paper-based records through initiatives to use electronic means of recording data and converting paper records into digital images.</li><li>During FY20, the Agency School District awarded six (6) High School Diplomas, Two hundred thirty three (233) GED's, One thousand nine hundred and fifty (1,950) Vocational Certificates, One thousand twenty two (1,022) WIN Certificates and two thousand one hundred and twenty two (2,122) on the job training certificates.</li><li>During FY20, Victim's Services registered three thousand twenty eight (3,028) new victims, three thousand three hundred and twenty one (3,321) address updates and a total of ten thousand three hundred and forty five (10,345) notifications were performed through the internal notification system.</li><li>The number of workers' compensation claims filed over last year declined from 250 to 243 cases.</li></ul></div>								

Provide an explanation of the proposal and its positive results on businesses or citizens. How will the request affect agency operations?