

<b>AGENCY NAME:</b>	South Carolina Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67



## Fiscal Year 2020-21 Agency Budget Plan

### FORM A - BUDGET PLAN SUMMARY

<b>OPERATING REQUESTS (FORM B1)</b>	<b>For FY 2020-21, my agency is (mark "X"):</b> <input checked="" type="checkbox"/> Requesting General Fund Appropriations. <input type="checkbox"/> Requesting Federal/Other Authorization. <input type="checkbox"/> Not requesting any changes.
<b>NON-RECURRING REQUESTS (FORM B2)</b>	<b>For FY 2020-21, my agency is (mark "X"):</b> <input checked="" type="checkbox"/> Requesting Non-Recurring Appropriations. <input type="checkbox"/> Requesting Non-Recurring Federal/Other Authorization. <input type="checkbox"/> Not requesting any changes.
<b>CAPITAL REQUESTS (FORM C)</b>	<b>For FY 2020-21, my agency is (mark "X"):</b> <input checked="" type="checkbox"/> Requesting funding for Capital Projects. <input type="checkbox"/> Not requesting any changes.
<b>PROVISOS (FORM D)</b>	<b>For FY 2020-21, my agency is (mark "X"):</b> <input checked="" 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 type="checkbox"/> Not requesting any proviso changes.

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

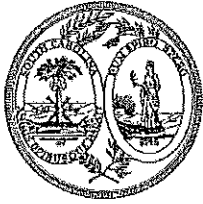
	<u>Name</u>	<u>Phone</u>	<u>Email</u>
<b>PRIMARY CONTACT:</b>	Kim Parris	896-5644	kdparr@scdj.net
<b>SECONDARY CONTACT:</b>	Melinda Al-Hasan	896-5640	mralha@scdj.net

I have reviewed and approved the enclosed FY 2020-21 Agency Budget Plan, which is complete and accurate to the extent of my knowledge.

	<u>Agency Director</u>	<u>Board or Commission Chair</u>
<b>SIGN/DATE:</b>	 9/12/19	
<b>TYPE/PRINT NAME:</b>	Freddie B. Pough	

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

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	SC Board of Juvenile Parole



## Fiscal Year 2020-21 Agency Budget Plan

### FORM A - BUDGET PLAN SUMMARY

<b>OPERATING REQUESTS (FORM B1)</b>	<b>For FY 2020-21, my agency is (mark "X"):</b>	
	<input checked="" type="checkbox"/>	Requesting General Fund Appropriations.
	<input type="checkbox"/>	Requesting Federal/Other Authorization.
	<input type="checkbox"/>	Not requesting any changes.

<b>NON-RECURRING REQUESTS (FORM B2)</b>	<b>For FY 2020-21, my agency is (mark "X"):</b>	
	<input checked="" type="checkbox"/>	Requesting Non-Recurring Appropriations.
	<input type="checkbox"/>	Requesting Non-Recurring Federal/Other Authorization.
	<input type="checkbox"/>	Not requesting any changes.

<b>CAPITAL REQUESTS (FORM C)</b>	<b>For FY 2020-21, my agency is (mark "X"):</b>	
	<input checked="" type="checkbox"/>	Requesting funding for Capital Projects.
	<input type="checkbox"/>	Not requesting any changes.

<b>PROVISOS (FORM D)</b>	<b>For FY 2020-21, my agency is (mark "X"):</b>	
	<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>	Mrs. Toni Vanlue	803-896-3973	tmaco@scdjj.net
<b>SECONDARY CONTACT:</b>	Melinda Al-Hasan	803-896-5640	mralha@scdjj.net

I have reviewed and approved the enclosed FY 2020-21 Agency Budget Plan, which is complete and accurate to the extent of my knowledge.

	<u>Agency Director</u>	<u>Board or Commission Chair</u>
<b>SIGN/DATE:</b>	<i>Toni Vanlue 9-09-19</i>	<i>Oscar Douglas 9/09/19</i>
<b>TYPE/PRINT NAME:</b>	Mrs. Toni Vanlue	Mr. Oscar Douglas

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

Fiscal Year 2020-21 Budget Request Executive Summary

Agency Code: N120  
 Agency Name: Department Of Juvenile Justice  
 Section: 67

BUDGET REQUESTS			FUNDING				FTES					
Priority	Request Type	Request Title	State	Federal	Earmarked	Restricted	Total	State	Federal	Earmarked	Restricted	Total
1	B1 - Recurring	Increase base starting salary for Juvenile Correction Officers and Community Specialists	4,297,769				4,297,769					0.00
2	B1 - Recurring	Recruitment and retention of social work and psychology staff	141,683				141,683					0.00
3	B1 - Recurring	Increase cost of Health Services and outside contracts	1,786,506				1,786,506					0.00
4	B1 - Recurring	Salary for education staff & support due to unfunded mandates over the past 7 years	4,425,035				4,425,035					0.00
5	B1 - Recurring	Expand Family Solutions	412,000				412,000					0.00
6	C - Capital	Renovations to existing secure facilities	2,029,673				2,029,673					0.00
7	C - Capital	Security Phase 1 of 2 - Upgrade of the agency security camera network - LAC recommendation #15	1,925,000				1,925,000					0.00
8	B1 - Recurring	Complete upgrade of the agency security camera network maintenance, including airtime usage for walkie-talkie	810,371				810,371					0.00
9	B2 - Non-Recurring	Education-Intercom System - LAC Recommendation #15	350,000				350,000					0.00
10	B2 - Non-Recurring	3 Grasshopper 930D mowers	71,931				71,931					0.00
11	B1 - Recurring	Marine and Wilderness Program Increase	1,167,888				1,167,888					0.00
12	B1 - Recurring	Community Alternatives-Youth Empowerment Day Treatment Center	500,000				500,000					0.00
13	C - Capital	Replace all Agency R-22 HVAC Systems Statewide	600,000				600,000					0.00
14	C - Capital	Upgrade all fire alarm call systems agency wide	96,000				96,000					0.00
15	C - Capital	Acoustic Treatments	255,400				255,400					0.00
16	B1 - Recurring	Community Evaluations- Staff, Phase 1 of 2					0	280,000				280,000.00
17	B1 - Recurring	Electronic Monitoring Program	320,000				320,000					0.00
18	B1 - Recurring	Expansion of Diversionary Program	2,240,000				2,240,000					0.00
19	B1 - Recurring	Pierson iPad testing devices & Support team for JJ Reform-Phase 1 of 2	101,300				101,300	128,700.00				128,700.00
20	B1 - Recurring	4 Regional Multi-Systemic Therapy (MST) /Functional Family Therapy trams (FFT) Phase 1 of 4	1,200,000				1,200,000					0.00
21	B1 - Recurring	Increase in Insurance Reserve Fund-Tort Insurance-77% increase FY21	520,000				520,000					0.00
22							0					0.00
23							0					0.00
24							0					0.00
25							0					0.00
26							0					0.00
27							0					0.00
28							0					0.00
29							0					0.00
30							0					0.00
TOTAL BUDGET REQUESTS			23,250,557	0	0	0	23,250,557	408,700.00	0.00	0.00	0.00	408,700.00

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>1</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Increase base starting salary for Juvenile Correction Officers and Community Specialists</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>General: \$4,297,769</b> <b>Federal:</b> <b>Other:</b> <b>Total: \$4,297,769</b>
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*What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>NEW POSITIONS</b>	<b>0</b>
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*Please provide the total number of new positions needed for this request.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>	
	<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 checked="" 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 # _____	

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<b>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</b>	
	<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	

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

**ACCOUNTABILITY OF FUNDS**

*Goal 2 –Maintain a safe, healthy facility-wide climate in the least restrictive environment*

*What specific strategy, as outlined in the FY 2019-20 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**

Individuals through salaries and fringe of Juvenile Correction Officers and Community Specialists and Human Services

*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**

This request for funding is to increase the starting salaries for new employees as well as the existing salaries for front-line institutional correctional officers and community specialists in order to reduce overall shortages due to outside competition and the nature of the dangerous work in a correctional setting.

	Current	Requested	DMH	SCDC	PPP	Total*
Community Specialists	\$31,482	\$35,457	\$35,457			\$2,127,836
JCO	\$30,271	\$32,908		\$32,908	\$35,700	\$2,169,933

\*The total includes base salary plus fringe

- 508 correctional officer positions would be subject to a base salary increase
- 304 community positions would be subject to a base salary increase
- Total request \$4,297,769

*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.*

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	2
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Recruitment and retention of social work and psychology staff</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>General: \$141,683</b> <b>Federal:</b> <b>Other:</b> <b>Total: \$141,683</b>
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*What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>NEW POSITIONS</b>	0
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*Please provide the total number of new positions needed for this request.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>	
	<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 checked="" 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 # _____	

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

<b>ACCOUNTABILITY OF FUNDS</b>	<b>Goal 3 – Enrich Workforce Development to Attract, Train and Retain a Competent Workforce</b>
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*What specific strategy, as outlined in the FY 2019-20 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?*

<b>RECIPIENTS OF FUNDS</b>	Individuals through salaries and fringe of social work and psychology staff.
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*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**

The goal of this request for funding is to create a career ladder for social work and reclassification of psychology:

1. Requested Funding Per FY for Creation Of Social Work Career Ladder for Purposes of Recruitment, Retention, Competitiveness with Other State/Private Employers: \$70,000

Licensure level	Requested Starting Salary	% increase	Amount of Increase
Non-licensed (MSW only, hired as HSCI)	\$38,000 ( <i>no change</i> )	NA	0%
LMSW	\$40,000 ( <i>no change</i> )	NA	0%
LISW-CP	\$44,800	12%	\$4,800
LISW-CP Supervisor	\$47,200	18%	\$7,200
LISW-CP Licensure Supervisor ( <i>only if providing LISW-CP supervision for DJJ staff</i> )	\$46,500 ( <i>front line staff</i> ) \$52,000 ( <i>DJJ supervisor</i> )	3.7%	\$1,700
		8%	\$3,800

2. Total Amount Requested Per FY For Psychology Reclassification/Licensure Incentives for Purpose of Recruitment and Retention of Qualified Staff and Professional Career Ladder: \$71,683

Position Title	Current Salary	Salary Increase	Cost of Increase/%
Psychologist II (Administrator)	\$97,090	\$102,580	\$5,490 (5.65%)
Psychologist I (Supervisors) A	\$93,600	\$95,400	\$1,800 (1.92%)
Psychologist I (Supervisors) B-E (4 positions)	\$90,000	\$95,400	\$5,400 (6%)
Psychologist I (Supervisors) F	\$91,047	\$95,400	\$4,353 (4.78%)
Human Services Coordinator II	\$49,560	\$88,000	\$38,440 (77.56%)

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.

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>3</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Increase in the Cost of Health Services and outside contracts</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>General: \$1,786,506</b> <b>Federal:</b> <b>Other:</b> <b>Total: \$1,786,506</b>
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*What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>NEW POSITIONS</b>	<b>0</b>
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*Please provide the total number of new positions needed for this request.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark “X” for all that apply:</b>
	<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 checked="" 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 #	

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

<b>ACCOUNTABILITY OF FUNDS</b>	<b><i>Goal 2: Maintain a Safe, Healthy Facility-wide Climate in the Least Restrictive Environment</i></b>
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*What specific strategy, as outlined in the FY 2019-20 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?*

<b>RECIPIENTS OF FUNDS</b>	State contractors and vendors
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*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?*

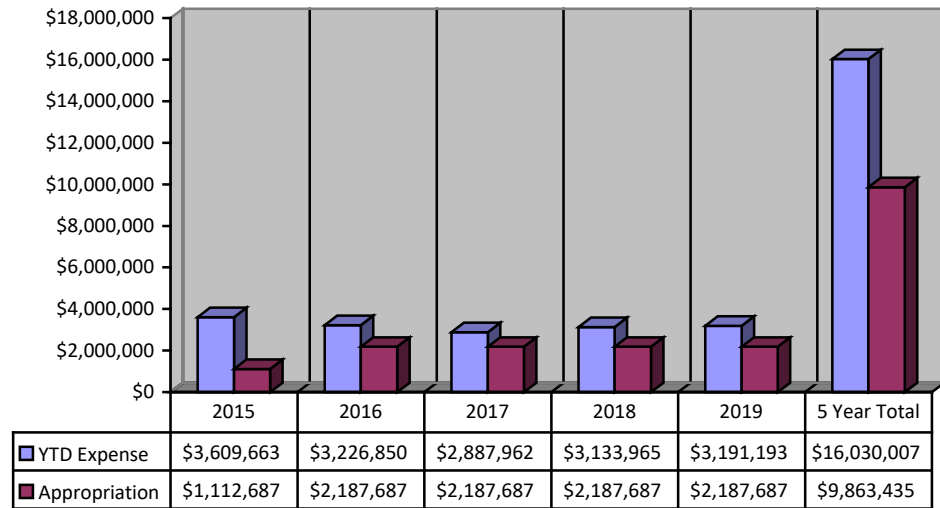
Through rigorous negotiations SCDJJ has upgraded its continual contract with various outside services to provide the necessary care of our juveniles.

In addition to the increasing expenses through outside contracts (see below) expenses overall of medical industry and its providers have increased significantly.

Services Provided	Year 2017	Maximum 2017	Year 2018/2019	Maximum 2018
Mental Health	\$160/hour	\$332,800	\$200/hour	\$416,000
Medical Director Services	\$14,862	\$166,344	\$14,278/month	\$171,334
Nurse Practitioner Service	\$103/month	\$96,408	\$103/month	\$96,408
Specialty Service	Billed @ 25% below customary charges	N/A	Billed @ 25% below customary charges	N/A
On-Call Services	N/A	N/A	\$5,685/month	\$68,217
Physical Therapy	N/A	N/A	\$103/hour	\$23,920

**JUSTIFICATION OF REQUEST**

In order to provide continual services SCDJJ is asking for an additional \$1,786,506 of general medical services based on general increasing of overall medical expenses:

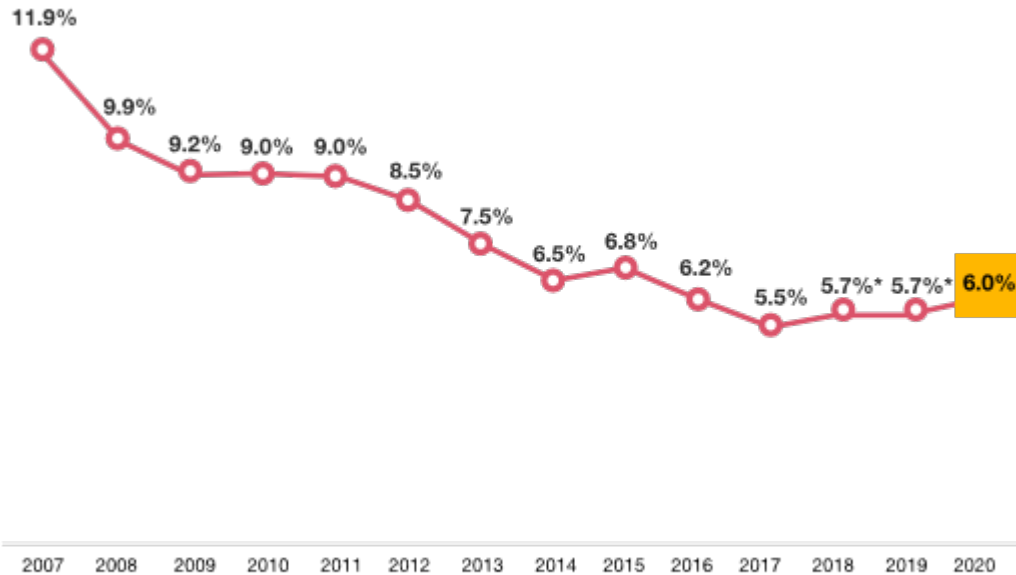


As demonstrated in the above chart, since 2015, DJJ has been absorbing the ever increasing medical expenses without requesting additional appropriation.

- USC Clinic contract increase was \$591,000
- 6% general increase in medical cost is \$192,000
- Appropriation shortfall \$1,003,506
  - Total request \$1,786,506

Each June PwC’s Health Research Institute (HRI) projects the growth of medical costs in the employer insurance market for the coming calendar year and identifies the leading factors expected to impact the trend. Heading into 2020, medical cost trend is expected to increase slightly. HRI projects 2020’s medical cost trend to be 6%. This is up over the flat trend seen in 2018 and 2019, with revised estimates coming in at 5.7% for both years. Prices continue to be the primary driver of healthcare spending, growing at a faster rate than utilization.

**Figure 1: Medical cost trend has been flat for two years but is expected to increase in 2020**



\*HRI adjusted its estimates for 2018 and 2019 down from those previously reported.<sup>11</sup>  
 Source: PwC Health Research Institute medical cost trends 2007-2020

<https://www.pwc.com/us/medicalcosttrends>

To drive medical cost trend down, DJJ is taking a more active role in managing healthcare costs. For example, DJJ is continually negotiating contract prices, reviewing our provider networks, staff and even building a parallel health system options to take care of the juveniles at more manageable costs.

*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.*

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>4</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Salary for Education Staff &amp; Support due to UNFUNDED MANDATES over the past 7 years.</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>General: \$4,425,035</b> <b>Federal:</b> <b>Other:</b> <b>Total: \$4,425,035</b>
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*What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>NEW POSITIONS</b>	<b>0</b>
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*Please provide the total number of new positions needed for this request.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark “X” for all that apply:</b>	
	<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 checked="" 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 #	

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

<b>ACCOUNTABILITY OF FUNDS</b>	<b><i>Goal 1 Enhance Services to Improve Long-term Outcomes for System-Involved Youth and Families</i></b>
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*What specific strategy, as outlined in the FY 2019-20 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?*

<b>AGENCY NAME:</b>	<b>SC Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

<b>RECIPIENTS OF FUNDS</b>	Individuals through salaries and fringe of Juvenile Justice Education staff and supporting Staff.
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>The goal of this request for funding is to increase funding of salaries and existing salaries for front-line institutional education staff and support staff. Per State Auditor’s report June 30, 2018 it has been identified:</p> <p><b>SEE ATTACHED TABLE*</b></p> <p>Audit identified that the Department of Juvenile Justice utilized funds from other programmatic areas (as allowed by State Proviso) to fund, on average, approximately 28%, of the school districts expenses each fiscal year.</p> <p>For FY 2019-Unaudited shortfall was recorded as: \$4,425,035</p> <p>Additionally, FY 2019 1.A.36 (SDE-EIA: Teacher Salaries/SE/Average) Funds appropriated in Part IA, Section 1, VIII.C.2 for Teacher Salaries must be used to increase salaries of those teachers eligible pursuant to Section 59-20-50(4)(b). Mandatory 1% Salary increase for 0-2 years of experience to \$32,000. In addition, the FY 20 appropriation act provided all teachers throughout the state a 4% cost of living increase which was approximately another \$119,416 unfunded for DJJ.</p>
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*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.*

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
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**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>5</b> <i>Provide the Agency Priority Ranking from the Executive Summary.</i>
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<b>TITLE</b>	<b>Expand Family Solutions</b> <i>Provide a brief, descriptive title for this request.</i>
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<b>AMOUNT</b>	<b>General: \$412,000</b> <b>Federal:</b> <b>Other:</b> <b>Total: \$412,000</b> <i>What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.</i>
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<b>NEW POSITIONS</b>	<b>0</b> <i>Please provide the total number of new positions needed for this request.</i>
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<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark “X” for all that apply:</b>
	<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"/> Related to a Non-Recurring request – If so, Priority #	

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

<b>ACCOUNTABILITY OF FUNDS</b>	<b><i>Goal 1 Enhance Services to Improve Long-term Outcomes for System-Involved Youth and Families</i></b>  <i>What specific strategy, as outlined in the FY 2019-20 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>
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<b>AGENCY NAME:</b>	<b>SC Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

<b>RECIPIENTS OF FUNDS</b>	Contractors and vendors through competitive bidding process
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	To expand Family Solutions and to provide each county with 4 sessions, (10 weeks per session) of the Family Solutions cycle per year. Family Solutions works successfully as a front-end diversion program and aids in the coordination of case diversion from other state agencies, local law enforcement and family court.
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*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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<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>8</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Complete upgrade of the agency security camera network maintenance, including airtime usage for walkie-talkie</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>General: \$810,371 Federal: Other: Total: \$810,371</b>
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*What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>NEW POSITIONS</b>	<b>0</b>
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*Please provide the total number of new positions needed for this request.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>	
	<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 checked="" type="checkbox"/>	IT Technology/Security related
	<input checked="" type="checkbox"/>	Related to a Non-Recurring request – If so, Priority # <u>7</u>

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<b>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</b>	
	<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

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

<b>ACCOUNTABILITY OF FUNDS</b>	<p><i>Goal 2 –Maintain a Safe, Healthy Facility-wide Climate it the Least Restrictive Environment</i></p>
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*What specific strategy, as outlined in the FY 2019-20 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?*

<b>RECIPIENTS OF FUNDS</b>	<p>Safety and Security of the juveniles and the staff that serve them.</p>
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>DJJ must phase out the walkie-talkie radio that goes will go out of service by the manufacturer (Motorola) in December of 2019. Once the model is out of service, parts and service will no longer be available, thus making it an inoperable device. Transitioning from outdated, out of service, walkie-talkies to the newer model will ensure the agency has a uniform, operable, and up to date communication than will give the safety and security of the juveniles as well as the staff.</p> <p>Ongoing request of funds for Contract Services for request to update Network system, the last complete upgrade was in 2009/2014 respectively. Better enhance the quality of the images captured on the video equipment which would also improve for the safety of juveniles and the staff that serve them. The equipment upgrade will provide better quality and additional features that will enhance detail allowing for quality and clarity to better identify personas and details involved in incidents. Software with the upgrade will also allow for remote access that will make for immediate viewing without having to travel to the facility where the incident occurred.</p> <p>DJJ is billed by Motorola for airtime for each click of the button on our radios. From 2018 records, this charge averaged approximately \$13,000/monthly.</p>
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*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.*

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>11</b> <i>Provide the Agency Priority Ranking from the Executive Summary.</i>
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<b>TITLE</b>	<b>Marine and Wilderness Program Increase</b> <i>Provide a brief, descriptive title for this request.</i>
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<b>AMOUNT</b>	<b>General: \$1,167,888</b> <b>Federal:</b> <b>Other:</b> <b>Total: \$1,167,888</b> <i>What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.</i>
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<b>NEW POSITIONS</b>	<b>0</b> <i>Please provide the total number of new positions needed for this request.</i>
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<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>
	<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 checked="" 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 #	

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<b>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</b>
	<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	

<b>ACCOUNTABILITY OF FUNDS</b>	<b><i>Goal 1 Enhance Services to Improve Long-term Outcomes for System-Involved Youth and Families</i></b> <i>What specific strategy, as outlined in the FY 2019-20 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>
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<b>AGENCY NAME:</b>	<b>SC Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

<b>RECIPIENTS OF FUNDS</b>	Contractors and vendors through competitive bidding process
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>The Community Services Division is respectfully requesting an 8% increase of contracts totaling \$14,600,000 to procure Marine and Wilderness beds with enhanced services as outlined in the new solicitation scheduled to be bid this FY. The 8% increase will include services at Camp Aspen, Generations Group Home, Beaufort, Georgetown, Piedmont, Bennettsville, Sand Hills, White Pines 1 and 2 for a total increase of \$1,167,888.32.</p> <p>New enhancements to services include:</p> <ul style="list-style-type: none"> <li>• Acceptance of Short Term Alternative Placement (STAP) in lieu of detention or secure evaluation;</li> <li>• Enhanced Staff to Student ratios: Intensive 1:4 (previously 1:5) and Intermediate 1:6 (previously 1:8);</li> <li>• Two programs will be enhanced to serve Intensive youth (1 program for each gender);</li> <li>• Aftercare services will be provided for 90 days following discharge;</li> <li>• SCDJJ will be authorized to impose financial penalties for a provider failing to adhere to terms of the contract;</li> <li>• Prison Rape Elimination Act (PREA) Compliance;</li> <li>• Staff must be trained in the following areas: <ul style="list-style-type: none"> <li>○ Trauma Informed Care</li> <li>○ Medication Side Effects and Dispensation</li> <li>○ Responding to Emergency Situations</li> <li>○ CPR / AED / First Aid Certification</li> <li>○ Event Reporting; and</li> </ul> </li> <li>• Evidence-Based Therapeutic Interventions appropriate for the population served at every camp.</li> </ul>
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*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.*

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	12
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	Community Alternatives/Youth Empowerment Day Treatment Center
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>General: \$500,000</b> <b>Federal:</b> <b>Other:</b> <b>Total: \$500,000</b>
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*What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>NEW POSITIONS</b>	0
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*Please provide the total number of new positions needed for this request.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>
	<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"/> Related to a Non-Recurring request – If so, Priority #	

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<b>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</b>
	<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	

<b>ACCOUNTABILITY OF FUNDS</b>	<b><i>Goal 1 Enhance Services to Improve Long-term Outcomes for System-Involved Youth and Families</i></b>
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*What specific strategy, as outlined in the FY 2019-20 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?*

<b>AGENCY NAME:</b>	<b>SC Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

<b>RECIPIENTS OF FUNDS</b>	Contractors and vendors through competitive bidding process
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>Research shows that juveniles given the opportunity to receive preventative services or community-based intervention are significantly less likely to penetrate the criminal justice system. Research also shows juveniles are also significantly less likely to recidivate than those who have been incarcerated for any given period. Alternatives to confinement are less expensive, and at times, more effective for juveniles at-risk of being removed from their home.</p> <p>Juveniles would receive educational/vocational skills and services as well as evidence-based individual, group and family interventions. Juveniles would report during school hours and return home each night to their family.</p> <p>The benefits to using an alternative to confinement are many: reduction of crowding in facilities, cutting the operational costs of the Juvenile Detention Center, shielding offenders from the stigma of being in an institutional setting, avoiding juvenile associating with more serious offenders. Most importantly, keeping Proviso 67.14 in mind, this program focuses on community diversion and the SCDJJ Youth Empowerment Day Treatment Center (YEDTC) will keep youth in the least restrictive environment available and as close to home and community as is available.</p> <p>The Region of the State of South Carolina with the greatest need and fewest resources for youth is in the Pee Dee Region; specifically the Florence Darlington County area. The YEDTC would be available to serve youth in the following School Districts: Darlington County School District and Florence County School Districts 1-5. These School Districts are where young people who have touched the Juvenile Justice System in any way are not permitted to return to the regular school setting for at least one year. This creates a cycle of non-attendance for the youth during ongoing school district appeals.</p>
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*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.*

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	16 <i>Provide the Agency Priority Ranking from the Executive Summary.</i>
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<b>TITLE</b>	Community Evaluations-Staff Phase 1 of 2 <i>Provide a brief, descriptive title for this request.</i>
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<b>AMOUNT</b>	<b>General: \$280,000</b> <b>Federal:</b> <b>Other:</b> <b>Total: \$280,000</b> <i>What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.</i>
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<b>NEW POSITIONS</b>	5 <i>Please provide the total number of new positions needed for this request.</i>
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<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>
	<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 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 checked="" 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 #	

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<b>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</b>
	<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	

<b>ACCOUNTABILITY OF FUNDS</b>	<b><i>Goal 2 Maintain a safe, healthy facility-wide climate in the least restrictive environment.</i></b>  <i>What specific strategy, as outlined in the FY 2019-20 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>
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<b>AGENCY NAME:</b>	<b>SC Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

<b>RECIPIENTS OF FUNDS</b>	Juveniles and the staff that serve them
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>The goal of this request is to phase in over a two-year period ten additional full-time employees to provide services that will support the agency’s ability to monitor youth going through the Community Evaluation Process.</p> <p>Community Evaluations, intensively monitor youth remaining in the community as an alternative to detention and monitor the administrative services for state-wide diversionary programs that will be managed by DJJ. DJJ’s staff must include a comprehensive, individualized biopsychosocial assessment—to include an examination of the child’s social, physical, and mental health functioning—in order to better evaluate each child’s needs.</p> <p>Additionally, DJJ will be creating regional transportation teams to provide transportation to referrals and appointments when wrap services are not available. More Intensive Intake Officers will be needed to coordinate the increase in the use of these Community Evaluations and ensure that the youth is following the rules of home and community throughout this process.</p> <p>Phase 1 will provide funding for five positions to assist with the implementation of these reform efforts statewide.</p> <p><b>Total Ask \$560,000=Phase 1 \$280,000, Phase 2 an additional \$280,000 recurring funds.</b></p>
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*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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<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	17 <i>Provide the Agency Priority Ranking from the Executive Summary.</i>
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<b>TITLE</b>	<b>Electronic Monitoring Program</b> <i>Provide a brief, descriptive title for this request.</i>
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<b>AMOUNT</b>	<b>General: \$320,000</b> <b>Federal:</b> <b>Other:</b> <b>Total: \$320,000</b> <i>What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.</i>
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<b>NEW POSITIONS</b>	0 <i>Please provide the total number of new positions needed for this request.</i>
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<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>
	<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 checked="" 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 #	

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<b>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</b>
	<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	

<b>ACCOUNTABILITY OF FUNDS</b>	<b><i>Goal 2 Maintain a safe, healthy facility-wide climate in the least restrictive environment.</i></b>  <i>What specific strategy, as outlined in the FY 2019-20 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>
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<b>AGENCY NAME:</b>	<b>SC Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

<b>RECIPIENTS OF FUNDS</b>	DJJ Juveniles, Solicitors/Judges
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>In the two months since Raise the Age was enacted the costs expended on Electronic Monitoring has increased from a monthly average of \$15,750.00 to an average of \$40,000.00. In order to continue with the use of Electronic Monitoring as a part of the continuum of services for graduated sanctions for probation violations, alternatives to detention and condition of aftercare/release we need to ask for an increase in funding of \$320,000.00.</p> <p>The Department of Juvenile Justice is seeking to expand the usage of our electronic monitoring program to ensure the availability statewide and serve as an alternative to detention. This additional funding request will allow the agency to meet the demands of our solicitors and judges. We have already seen an increase in usage which has caused a budget shortfall for the allotted amount in this current fiscal year.</p>
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*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.*

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>18</b> <i>Provide the Agency Priority Ranking from the Executive Summary.</i>
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<b>TITLE</b>	<b>Expansion of Diversionary Programs</b> <i>Provide a brief, descriptive title for this request.</i>
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<b>AMOUNT</b>	<b>General: \$2,240,000</b> <b>Federal:</b> <b>Other:</b> <b>Total: \$2,240,000</b> <i>What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.</i>
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<b>NEW POSITIONS</b>	<b>0</b> <i>Please provide the total number of new positions needed for this request.</i>
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<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>
	<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 checked="" 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 #	

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

<b>ACCOUNTABILITY OF FUNDS</b>	<b><i>Goal 1 Enhance Services to Improve Long-term Outcomes for System-involved Youth and Families.</i></b>  <i>What specific strategy, as outlined in the FY 2019-20 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>
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<b>AGENCY NAME:</b>	<b>SC Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

<b>RECIPIENTS OF FUNDS</b>	DJJ Juveniles through the diversion or intervention programs for at-risk children and their families. Youth who successfully complete the program will have no further involvement with Law Enforcement and Family Court.
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>The Department of Juvenile Justice is making this request to increase the operation of community-based diversion or intervention programs for at-risk children and families.</p> <p>This request will provide an allocation of an additional \$140,000 for diversionary programs per circuit. Currently each of the 16 circuits receive \$60,000 to administer Arbitration services. This will give each circuit a total allocation of \$200,000.</p> <p>In an effort to answer proviso 67-14, funds will be divided equally between 16 circuits to provide expanded diversion and intervention services. Each circuit must use funds to serve all Counties in their Circuit and Circuits must be able to demonstrate that all youth who meet an eligibility criteria, (to be developed) are being offered an opportunity to be diverted from Family Court involvement. Time frame from referral to completion of any diversion sanctions must be able to be completed within 90 days of initial referral. Models adopted for implementation will adhere to proven best-practice programming. .</p> <p>Additionally, in order to divert children from penetrating the juvenile justice system, this amendment requires DJJ to create a plan that encourages the development of evidence-based intervention programs and services. These programs and services will be under the supervision of DJJ, but the department may contract with service coordination agencies to assist with the execution.</p>
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*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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<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

## FORM B1 – RECURRING OPERATING REQUEST

<b>AGENCY PRIORITY</b>	<b>19</b> <i>Provide the Agency Priority Ranking from the Executive Summary.</i>
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<b>TITLE</b>	<b>Pierson iPad testing devices &amp; Support team for JJ Reform-Phase 1 of 2</b> <i>Provide a brief, descriptive title for this request.</i>
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<b>AMOUNT</b>	<b>General: \$230,000</b> <b>Federal:</b> <b>Other:</b> <b>Total: \$230,000</b> <i>What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.</i>
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<b>NEW POSITIONS</b>	<b>3</b> <i>Please provide the total number of new positions needed for this request.</i>
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<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>	
	<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 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 checked="" 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 #	

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

<b>ACCOUNTABILITY OF FUNDS</b>	<b><i>Goal 1 Enhance Services to Improve Long-term Outcomes for System-involved Youth and Families.</i></b>  <i>What specific strategy, as outlined in the FY 2019-20 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>
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<b>AGENCY NAME:</b>	<b>SC Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

<b>RECIPIENTS OF FUNDS</b>	DJJ Juveniles and its staff
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>The Department of Juvenile Justice goal of this request is to obtain Pearson iPad testing devices to expedite screening/testing of community evaluations and to hire twelve additional personnel to assist with the administrative functioning of the test administration and evaluations statewide. This is a phased request to ensure we evaluate capacity and fidelity.</p> <p>Pearson iPad testing devices to expedite screening/testing of community evaluations</p> <ul style="list-style-type: none"> <li>• User licenses = approx. \$16,500 per year licenses</li> <li>• iPads compatible with software = \$35,940</li> <li>• Hot spots = approx. \$1296/month = \$15,560 per year</li> </ul> <p style="text-align: center;">➤ <u>TOTAL: \$68,000</u></p> <p><b>5 additional administrative specialists</b></p> <ul style="list-style-type: none"> <li>• \$30,643 X 40% Fringe (\$12,257) = \$42,900 per position</li> </ul> <p style="text-align: center;">➤ <u>TOTAL: \$214,500</u></p> <p><b>Education/PR/Community Support Team for Purpose of JJ Reform</b></p> <ul style="list-style-type: none"> <li>• Could be temp positions, utilizing paid graduate assistants or law students possibly</li> <li>• Could utilize a team of part-timers with one full time project manager</li> <li>• Special focus on judges/solicitors</li> <li>• Would need to include a clinician who can speak to evaluation reform knowledgeably (dual employment or part time reassignment???)</li> <li>• 4-8 part time students/grad assts at \$15,000 per person = \$60,000-\$120,000</li> <li>• One full time temp employee to head up this project and report back to Strategic Ops project manager = \$50,000 X 15% Fringe (\$7,500) = \$57,500</li> <li>• Printing (flyers, invitations, handouts, presentation materials) = \$20,000</li> <li>• Miscellaneous costs/travel = \$10,000</li> </ul> <p style="text-align: center;">➤ <u>TOTAL: \$177,500</u></p> <p>Total ask \$460,000=Phase 1 \$230,000, Phase 2 additional \$230,000 recurring</p>
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*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.*

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	<b>20</b> <i>Provide the Agency Priority Ranking from the Executive Summary.</i>
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<b>TITLE</b>	<b>4 Regional Multi-Systemic Therapy/Functional Family Therapy teams Phase 1 of 4</b> <i>Provide a brief, descriptive title for this request.</i>
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<b>AMOUNT</b>	<b>General: \$1,200,000</b> <b>Total: \$1,200,000</b> <i>What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.</i>
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<b>NEW POSITIONS</b>	<b>0</b> <i>Please provide the total number of new positions needed for this request.</i>
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<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark “X” for all that apply:</b>
	<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 checked="" 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 # _____	

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

<b>ACCOUNTABILITY OF FUNDS</b>	<b><i>Goal 1 Enhance Services to Improve Long-term Outcomes for System-involved Youth and Families.</i></b> <i>What specific strategy, as outlined in the FY 2019-20 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>
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<b>RECIPIENTS OF FUNDS</b>	To serve approximately 500 community-based moderate to high risk youth and to ensure a continuum of care for youth that is an age and developmentally appropriate; improve positive outcomes for the our and for the South Carolina Communities. <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>
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**JUSTIFICATION OF REQUEST**

The goal of this request is to implement 4 regional **Multi-Systemic Therapy “MST”/ Functional Family Therapy “FFT”** teams throughout the state. The proposed four regional teams of stacked MST/FFT services, serving approximately 500 community-based moderate to high risk youth.

The primary goals of MST’s juvenile delinquency prevention program: Reducing youth criminal activity, Reducing other types of anti-social behavior such as drug abuse and Achieving these outcomes at a cost savings by decreasing rates of incarceration and out-of-home placement. MST comes with a strong evidence base for success: Youth who have had MST features the largest body of evidence, by far, of successful interventions for high risk youth and has been implemented across the U.S. and internationally with consistently excellent outcomes.

FFT has received international recognition for its outcomes in helping troubled youth and their families to overcome delinquency, substance abuse, and violence. It is a short-term treatment strategy that is built on a foundation of respect of individuals, families and cultures, but that included powerful treatment strategies that pave the way for motivating individuals and families to become more adaptive and successful in their own lives. In doing so, FFT helps to save families while at the same time preventing crime and victimization Communities.

Evidence-Based Programs with EBA	Length of Stay	Case Rate	Youth per Year (target) per Team	Annual Team Cost*	Target group	Note
MST	3-5 months per youth	\$12,750	45	\$575,750	HIGHEST Risk	<i>Staff are available 24/7 to youth and families in crisis</i>
FFT	2-4 months per youth	\$7,200	80	\$573,750	MODERATE and HIGH Risk	<i>Not currently used in SC, but paired successfully with MST in other states to create continuum of services</i>

This service will ensure a continuum of care for youth that is age and developmentally appropriate; improve positive outcomes for youth and the SC communities. This is a request that can be phased in over a period of time as we evaluate the fidelity of our youth’s outcomes.

**This budget ask can be phased in over a 4 year time frame, making the initial ask \$1,200,000 with an additional \$1,200,000 per year for 3 more years. This will reduce the number of youth served, however it will allow us to serve those youth that require this level of intense services.**

<b>AGENCY NAME:</b>	<b>SC Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

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*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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<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

**FORM B1 – RECURRING OPERATING REQUEST**

<b>AGENCY PRIORITY</b>	21
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Increase in Insurance Reserve Fund-Tort Insurance-77% increase FY21</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>General: \$520,000</b> <b>Federal:</b> <b>Other:</b> <b>Total: \$520,000</b>
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*What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>NEW POSITIONS</b>	0
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*Please provide the total number of new positions needed for this request.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>	
	<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"/>	Related to a Non-Recurring request – If so, Priority #	

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

<b>ACCOUNTABILITY OF FUNDS</b>	<b>Goal 4: Improve IT processes and Agency Applications for Efficient Operations</b>
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*What specific strategy, as outlined in the FY 2019-20 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?*

<b>AGENCY NAME:</b>	<b>SC Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

<b>RECIPIENTS OF FUNDS</b>	Insurance Reserve Fund
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>The State of South Caronia has received and increase in premiums over the past few years and they expect the same for FY21.</p> <p>One of the reasons for these increases is due to an inadequacy in payments for tort coverage. In analyzing the state tort rates (per the SC State Fiscal Accountability Authority), it was discovered that the insureds that are in the law enforcement category are the most inadequate and therefore the most effected.</p> <p><b>As a result, SCDJJ is projected overall premium is expected to be and additional \$520,000 or a 77% increase for FY21. Notification from SFAA 11-25-19.</b></p>
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*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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<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

## FORM B2 – NON-RECURRING OPERATING REQUEST

<b>AGENCY PRIORITY</b>	<b>9</b> <i>Provide the Agency Priority Ranking from the Executive Summary.</i>
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<b>TITLE</b>	<b>Education-Intercom System- <u>LAC</u> Recommendation #15</b> <i>Provide a brief, descriptive title for this request.</i>
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<b>AMOUNT</b>	<b>\$350,000</b> <i>What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.</i>
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<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<p><b>Mark "X" for all that apply:</b></p> <table border="0"> <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 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 checked="" type="checkbox"/></td><td>Exhaustion of fund balances previously used to support program</td></tr> <tr><td><input checked="" 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 checked="" 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>	<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 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 checked="" 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 checked="" 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 #
<input type="checkbox"/>	Change in cost of providing current services to existing program audience																								
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<input type="checkbox"/>	Request for Federal/Other Authorization to spend existing funding																								
<input type="checkbox"/>	Related to a Recurring request – If so, Priority #																								

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<p><b>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</b></p> <table border="0"> <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>	<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
<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										

<b>ACCOUNTABILITY OF FUNDS</b>	<p><b><i>Goal 2 –Maintain a Safe, Healthy Facility-wide Climate it the Least Restrictive Environment</i></b></p>
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*What specific strategy, as outlined in the FY 2019-20 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?*

<b>AGENCY NAME:</b>	<b>SC Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

<b>RECIPIENTS OF FUNDS</b>	<p>Birchwood School is in desperate need of a new School Intercom System to replace the system installed in 1980. According to South Carolina Facilities Planning and Construction Guide Section 1211, The following communication systems shall be provided in all schools:</p> <ul style="list-style-type: none"> <li>• Telephone conduit system</li> <li>• Classroom intercom system. All-call mode with callback feature should be provided.</li> <li>• Program bell system</li> <li>• Teacher Call Back: Two-way communication to the office should be provided.</li> </ul>
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*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?*

<b>JUSTIFICATION OF REQUEST</b>	<p>Performance Goal: Maintain lower disciplinary interventions by creating an orderly, non-threatening environment in which students and staff feel safe and follow directives of the institution.</p> <p>DJJ’s concern other than safety within our institution is the LAC report finding 15 that DJJ should implement all of the security recommendations made by the Correctional Consulting Services. Additional security lighting, personal duress, communication, fire suppression, and cameras are all a part this recommendation.</p> <p>Intercom systems will be used for communication between the 4 buildings located on Birchwood Campus. Intercom speakers placed at strategic points in a building make it easy for everyone in a building to receive a message at the same time. Room to room communication is imperative when keeping an orderly, well connected school running its day to day activities.</p> <p>The South Carolina Facilities Planning and Construction Guide Section 1211, the following communication systems <b>MUST</b> be provided at all schools:</p> <ul style="list-style-type: none"> <li>• Telephone conduit system</li> <li>• Classroom intercom system. All-call mode with callback feature</li> <li>• Program bell system</li> <li>• Teacher Call Back: Two-way communication to the office</li> </ul>
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*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. Does this non-recurring appropriation request create an annualization or need for recurring funds?*

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

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

<b>AGENCY PRIORITY</b>	10
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	3-Grasshopper 930D mowers
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	\$71,931
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*What is the net change in requested appropriations for FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<b>Mark "X" for all that apply:</b>
	<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 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 checked="" 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 checked="" 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 #	

<b>STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES</b>	<b>Mark "X" for primary applicable Statewide Enterprise Strategic Objective:</b>
	<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	

<b>ACCOUNTABILITY OF FUNDS</b>	<b><i>Goal 2 Maintain a Safe, Healthy Facility-wide Climate in the Least Restrictive Environment</i></b>
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*What specific strategy, as outlined in the FY 2019-20 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?*

<b>RECIPIENTS OF FUNDS</b>	The Grounds Department of the South Carolina Department of Juvenile Justice.
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*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?*

<b>AGENCY NAME:</b>	<b>SC Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

**JUSTIFICATION OF REQUEST**

The Grounds Department of the South Carolina Department of Juvenile Justice is in need of a mower fleet replacement. The Grasshopper 930D mowers in our fleet that were purchased in 2013 are reaching the end of their life cycle. These mowers have a tough job to do and some are starting to fail in significant ways. The mowers of SCDJJ are in use year round due to the climate of South Carolina. During the spring and summer months however the work load increases tremendously. Grounds is responsible for +400 acres of grass and the terrain is extreme. Our mechanic is often tied up repairing and conditioning our fleet to keep the grass manicured. We are proposing to purchase three Toro Grounds Master 3280-D mowers to replace the oldest members of our mower fleet.

South Carolina Child Labor Law details restrictions for this age group as follows: When public school is in session: No working during school hours. No more than three hours on school days. A maximum of eight hours on non-school days. A maximum of 18 hours per week.

*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. Does this non-recurring appropriation request create an annualization or need for recurring funds?*

<b>AGENCY NAME:</b>	<b>SC Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

**FORM C – CAPITAL REQUEST**

<b>AGENCY PRIORITY</b>	<b>6</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Renovations to existing secure facilities</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>\$2,029,673</b>
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*How much is requested for this project in FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>CPIP PRIORITY</b>	CPIP Plan year and priority number – 21-03 and 22-01 First year included – FY 2018-2019
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*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.*

<b>OTHER APPROVALS</b>	JBRC and SFAA approval will be sought upon funding
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*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.)*

<b>LONG-TERM PLANNING AND SUSTAINABILITY</b>	Existing/ongoing projects 9606 and 9607 for Regionalization			
	Yes Other capital and/or operating funds for this project will be requested:			
	<b>FISCAL YEAR</b>	<b>TITLE</b>	<b>COST</b>	<b>OVERALL PRIORITY</b>
	2021	Phase 1 of 3 Willow Lane (WL) Site Modifications for Regionalization	3,521,203	3
	2021	Phase 2 of 3 Willow Lane building repurposing	13,198,982	4
	2021	Phase 3 of 3 Midlands Evaluation Center Services Center	5,971,766	5
	2021	Broad River Road Complex Recreational Areas	1,224,000	6
	Regionalization represents a fundamental shift in how young people will be served by the juvenile justice system. It will allow youth to be kept closer to their home communities instead of committing them to distant state facilities. Regionalization brings neighboring counties together to share resources and services to better serve youth close to their homes.			
	The advantages of regionalization include increased family engagement, transitional programming and contact with other providers, community resources, and parole and probation proficiency. A smaller population of youth in each center may also reduce gang issues and behavior issues. There was also discussion about exploring the possibility of moving youth with mental health issues to a separate facility.			
	25-30 years expected useful life.			

<b>AGENCY NAME:</b>	<b>SC Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

*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**

This budget request reflects the cost of creating a more therapeutic environment at CEC and UEC for the long-term rehabilitation of justice involved youth. (Renovations pertaining to MEC are not included in this budget request.) This estimate includes upgrades to bedrooms in an effort to provide equity across all centers. The acoustic panels will provide sound absorption. The addition of televisions with headsets for youth will significantly reduce noise pollution in the pods as well. Painting the facilities in a calming color palate and replacing the light fixtures will create a more therapeutic environment.

<b>Estimate for Creating a more therapeutic environment at CEC &amp; UEC</b>	
<b>PER FACILITY</b>	<b>Appx Cost</b>
Acoustic panels	\$ 658,000.00
TV Enclosures (includes cabling, mount and enclosure)	\$ 20,000.00
TV (8 @\$200 each)	\$ 3,200.00
TV Transmitter (\$80/tv, 2 tvs/pod x 4 pods)	\$ 1,280.00
AM/FM radio/headsets (\$25/youth x 75)	\$ 3,750.00
Chairs (\$500/chair x 16 x 4 pods)	\$ 64,000.00
Suicide resistant towel holder (\$400 per shower)	\$ 6,400.00
Razor wire on designated short length	\$ 20,000.00
Stationary staff desk in units (3 pods)	\$ 7,200.00
Paint	\$ 200,000.00
Bulletin board in pod (48"x72", \$555 x 4 pods)	\$ 4,440.00
Locker/desk/bed in each room (\$5,000 per room x 50 rooms)	\$ 500,000.00
Gametop tables (1 per pod x 4 pods)	\$ 11,200.00
Correctional Light fixtures	\$ 150,000.00
Contingency 15%	\$ 247,420.50
Tax 7%	\$ 132,782.34
<b>TOTAL</b>	<b>\$ 2,029,672.84</b>
<b>*Subject to change after review by a qualified architect to assure form, function, and flow.</b>	

*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.*

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

## FORM C – CAPITAL REQUEST

<b>AGENCY PRIORITY</b>	7
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Security-Phase 1 of 2: Upgrade of the agency security camera network-LAC Recommendation #15</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>\$ 1,925,000</b>
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*How much is requested for this project in FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>CPIP PRIORITY</b>	CPIP Plan year and priority number - 20-09 First year included – FY 2018-2019
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*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.*

<b>OTHER APPROVALS</b>	JBRC and SFAA approval will be sought upon funding
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*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.)*

<b>LONG-TERM PLANNING AND SUSTAINABILITY</b>	Security cameras and other surveillance equipment has been replaced as needed resulting in a rag tag mismatched system overall. Some of the equipment is out of service and no longer meets current standards and needs. This is a phase I of II. Will request an additional \$500,000 in the following fiscal year to complete. Useful life is 5-10 years.  Recurring funding requested in priority 8 in the amount of \$810,371 to maintain system on an ongoing basis.
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*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?*

<b>AGENCY NAME:</b>	<b>SC Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

<b>SUMMARY</b>	<p>The equipment upgrade will provide better quality and additional features that will enhance detail allowing for quality and clarity to better identify persons and details involved in incidents. This will be evident during investigations. Software with the upgrade will also allow for remote access that will make for immediate viewing without having to travel to the facility where the incident occurred.</p> <p>It is requested that a complete upgrade of the agency security camera network be approved. The last complete recorder upgrade was in 2009 and the last complete camera upgrade was in 2014. At that time all cameras were replaced. The current DVRs are no longer being made and thus have no replacement parts, requiring a new model be purchased. With the continued improvement of technological advancement, a complete change out would guarantee compatibility, provide better quality and increased storage and longer footage retention. With new safety equipment would come warranties and therefore require less time and money be spent maintaining and repairing outdated equipment. An upgrade would also provide software that would allow for remote viewing access.</p> <p>Better enhance the quality of the images captured on the video equipment which will also improve the safety of juveniles and the staff that serve them.</p> <p>DJJ's concern other than safety within our institution is the LAC report finding 15 that DJJ should implement all of the security recommendations made by the Correctional Consulting Services. Additional security lighting, personal duress, communication, fire suppression, and cameras are all a part of Phase I.</p>
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*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.*

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

**FORM C – CAPITAL REQUEST**

<b>AGENCY PRIORITY</b>	<b>13</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Replace all Agency R-22 HVAC Systems Statewide</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>\$600,000</b>
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*How much is requested for this project in FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>CPIP PRIORITY</b>	2021 Priority 1 within plan year FY 19
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*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.*

<b>OTHER APPROVALS</b>	JBRC & SFAA
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*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.)*

<b>LONG-TERM PLANNING AND SUSTAINABILITY</b>	<p>No Funds have been invested in this project.</p> <p>No other funds will be requested for this future project.</p> <p>State Appropriation.</p> <p>Replacing existing HVAC System will improve energy efficiency.</p> <p>The Office of Support Services currently pays for all utilities, these utility savings will be used for other minor projects throughout the facilities.</p> <p>Useful life: 15-20 years</p>
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*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?*

<b>AGENCY NAME:</b>	<b>SC Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

<b>SUMMARY</b>	Replacement of R-22 HVAC systems state wide are mandatory for federal EPA requirements. R-22 is no longer available and the parts to repair are being rapidly depleted. There is no other viable alternative. Estimated 250 various size units state wide.
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*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.*

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

**FORM C – CAPITAL REQUEST**

<b>AGENCY PRIORITY</b>	<b>14</b>
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*Provide the Agency Priority Ranking from the Executive Summary.*

<b>TITLE</b>	<b>Upgrade all fire alarm call systems agency wide.</b>
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*Provide a brief, descriptive title for this request.*

<b>AMOUNT</b>	<b>\$96,000</b>
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*How much is requested for this project in FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.*

<b>CPIP PRIORITY</b>	2021 Priority 2 within plan year FY 19
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*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.*

<b>OTHER APPROVALS</b>	JBRC & SFAA
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*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.)*

<b>LONG-TERM PLANNING AND SUSTAINABILITY</b>	No Funds have been invested in this project.  No other funds will be requested for this future project.  State Appropriation.  Replacing out of code analog systems.  The Office of Support Services currently pays for all maintenance of these items any savings will be used for other minor projects throughout the facilities.  Useful life: 10-15 years
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*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?*

<b>AGENCY NAME:</b>	<b>SC Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

<b>SUMMARY</b>	Replacement of agency wide fire alarm analog systems (out of code compliance) in our owned buildings and institutions to totally wireless call systems to maintain life safety for our staff, public and juveniles.
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*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.*

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

**FORM C – CAPITAL REQUEST**

<b>AGENCY PRIORITY</b>	<b>15</b> <i>Provide the Agency Priority Ranking from the Executive Summary.</i>
<b>TITLE</b>	<b>Acoustic Treatments</b> <i>Provide a brief, descriptive title for this request.</i>
<b>AMOUNT</b>	<b>\$255,400</b> <i>How much is requested for this project in FY 2020-21? This amount should correspond to the total for all funding sources on the Executive Summary.</i>
<b>CPIP PRIORITY</b>	2021- Priority 3 within plan year-FY 19 <i>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.</i>
<b>OTHER APPROVALS</b>	JBRC & SFAA <i>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.)</i>
<b>LONG-TERM PLANNING AND SUSTAINABILITY</b>	No Funds have been invested in this project. No other funds will be requested for this future project. State Appropriation. Install acoustic treatments. Useful life: 5-10 years <i>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?</i>
<b>SUMMARY</b>	Acoustic Treatments to (MEC) Midland Evaluation Center , (UEC) Upstate Evaluation Center, (CEC) Coastal Evaluation Center, and Gymnasiums State Wide. Currently there are no treatments, no other practical option. <i>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.</i>

<b>AGENCY NAME:</b>	South Carolina Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

**FORM D – PROVISIO REVISION REQUEST**

<b>NUMBER</b>	67.12
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*Cite the proviso according to the renumbered list for FY 2020-21 (or mark "NEW").*

<b>TITLE</b>	Local District Effort
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*Provide the title from the FY 2019-20 Appropriations Act or suggest a short title for any new request.*

<b>BUDGET PROGRAM</b>	Education 2501.400000.000
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*Identify the associated budget program(s) by name and budget section.*

<b>RELATED BUDGET REQUEST</b>	Agency Priority Number 4 "Salary for Education Staff & Support due to unfunded mandates over the past 7 years"
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*Is this request associated with a budget request you have submitted for FY 2020-21? If so, cite it here.*

<b>REQUESTED ACTION</b>	Delete
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*Choose from: Add, Delete, Amend, or Codify.*

<b>OTHER AGENCIES AFFECTED</b>	None
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*Which other agencies would be affected by the recommended action? How?*

<b>SUMMARY &amp; EXPLANATION</b>	<p>Existing Proviso:  Upon commitment or confinement to a Department of Juvenile Justice facility, the school district in which that child resides shall pay an amount equivalent to the statewide average of the local base student cost (thirty percent), multiplied by the appropriate pupil weighting set forth in Section 59-20-40, for instructional services provided to out-of-district students to the Department of Juvenile Justice for the time period in which the child is committed or confined to a department facility. EFA funding for school districts is provided for a one hundred eighty day school year. The billing provided by the department shall be calculated by dividing the local base student cost by two hundred twenty-five days to determine the daily rate. The department shall notify the school district in writing within forty-five calendar days that a student from the nonresident district is receiving education services pursuant to this provision. The notice shall also contain the student's name, date of birth, disabling condition if available, and dates of service.</p> <p>The invoice shall be paid within sixty days of billing, provided the department has provided a copy of the invoice to both the superintendent and the finance office of the school district being invoiced. Should the school district fail to pay the invoice within sixty days, the department can seek relief from the Department of Education. The Department of Education shall withhold EFA funding equal to the billing from the district refusing to pay and submit the funding (equal to the invoice) to the department. If adequate funding is not received, the department shall have the flexibility to use funds from other programmatic areas to maintain an appropriate level of service.</p>
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*Summarize the existing proviso. If requesting a new proviso, describe the current state of affairs without it. Explain the need for your requested action. For deletion requests due to recent codification, please identify SC Code section where language now appears.*

<b>AGENCY NAME:</b>	<b>South Carolina Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

<b>FISCAL IMPACT</b>	<p>The SC Department of Juvenile Justice respectfully requests this Proviso be deleted. Collection efforts utilizing this proviso have been largely on the small, rural and poorer school districts of this state. Total collections for the past 4 fiscal years can be found below and is woefully insufficient to meet the needs of our special school district.</p> <p>FY '19 \$424,281  FY '18 \$438,557  FY '17 \$502,806  FY '16 \$510,616</p> <p>We no longer wish to invoke this proviso on the backs of already struggling school districts. Instead, we request the state provide through general fund recurring appropriations an amount sufficient to educate the youth in our care. Agency priority number 4 included in this request for FY 2020-2021 for \$4,425,035 will allow us the ability to fully serve these youth.</p>
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*Provide estimates of any fiscal impacts associated with this proviso, whether for state, federal, or other funds. Explain the method of calculation.*

<b>PROPOSED PROVISO TEXT</b>	<p><del>(DJJ: Local District Effort) Upon commitment or confinement to a Department of Juvenile Justice facility, the school district in which that child resides shall pay an amount equivalent to the statewide average of the local base student cost (thirty percent), multiplied by the appropriate pupil weighting set forth in Section 59-20-40, for instructional services provided to out of district students to the Department of Juvenile Justice for the time period in which the child is committed or confined to a department facility. EFA funding for school districts is provided for a one hundred eighty day school year. The billing provided by the department shall be calculated by dividing the local base student cost by two hundred twenty five days to determine the daily rate. The department shall notify the school district in writing within forty five calendar days that a student from the nonresident district is receiving education services pursuant to this provision. The notice shall also contain the student's name, date of birth, disabling condition if available, and dates of service.</del></p> <p><del>—The invoice shall be paid within sixty days of billing, provided the department has provided a copy of the invoice to both the superintendent and the finance office of the school district being invoiced. Should the school district fail to pay the invoice within sixty days, the department can seek relief from the Department of Education. The Department of Education shall withhold EFA funding equal to the billing from the district refusing to pay and submit the funding (equal to the invoice) to the department. If adequate funding is not received, the department shall have the flexibility to use funds from other programmatic areas to maintain an appropriate level of service.</del></p>
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*Paste FY 2019-20 text above, then bold and underline insertions and strikethrough deletions. For new proviso requests, enter requested text above.*

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

**FORM E – AGENCY COST SAVINGS AND GENERAL FUND REDUCTION  
CONTINGENCY PLAN**

<b>TITLE</b>	Agency Cost Savings and General Fund Reduction Contingency Plan
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<b>AMOUNT</b>	<b>\$ 3,500,580</b>
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*What is the General Fund 3% reduction amount (minimum based on the FY 2019-20 recurring appropriations)? This amount should correspond to the reduction spreadsheet prepared by EBO.*

<b>ASSOCIATED FTE REDUCTIONS</b>	No FTE reductions would be required by the Agency in order to implement a 3% general fund reduction.
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*How many FTEs would be reduced in association with this General Fund reduction?*

<b>PROGRAM/ACTIVITY IMPACT</b>	No critical programs, services or other activities provided to youth or communities served by the agency would be cut or eliminated. Programs or activities that are deemed the most critical and could be supported by Other Earmarked revenue sources would be shifted to these funding sources. Programs that fall outside of the core agency services would be reviewed by agency administration and could potentially be eliminated as needed.
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*What programs or activities are supported by the General Funds identified?*

<b>SUMMARY</b>	<p>We are proposing to eliminate temporary (non-FTE) positions in all areas, other than Health Services, Detention, Evaluation Centers and the Broad River Road Complex since these positions have been set up to handle needs that are non-permanent. The duties that are handled by these positions would be reassigned to existing FTE staff in the proper department.</p> <p>We are proposing to reduce our operating expenses by 5% and this would be achieved by carefully reviewing operating expenditures in all programs for services or other supplies that could be deferred or handled in a more cost effective manner.</p> <p>We are proposing to reduce case services expenditures related to juvenile placement in multi-agency beds and in funding to our wilderness camps. These expenditures represent critical services, however, because they are programs or activities other than incarceration, funding could be provided with the use of Other Earmarked funds.</p>
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*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.*

<b>AGENCY NAME:</b>	<b>SC Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

<b>AGENCY COST SAVINGS PLANS</b>	As a result of utilizing First Responders Discount through Verizon we will be saving approximately \$125,000/year, 25% of bill.
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*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?*

<b>AGENCY NAME:</b>	SC Department of Juvenile Justice		
<b>AGENCY CODE:</b>	N120	<b>SECTION:</b>	67

**FORM F – REDUCING COST AND BURDEN TO BUSINESSES AND CITIZENS**

<b>TITLE</b>	<b>Reducing Cost and Burden to Businesses and Citizens</b>
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*Provide a brief, descriptive title for this request.*

<b>EXPECTED SAVINGS TO BUSINESSES AND CITIZENS</b>	<b>The South Carolina Department of Juvenile Justice is continuously reviewing internal processes and procedures in order to provide greater efficiency in the delivery of services provided.</b>
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*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.*

<b>FACTORS ASSOCIATED WITH THE REQUEST</b>	<p><b>Mark “X” for all that apply:</b></p> <table border="1"> <tr> <td><input type="checkbox"/></td> <td>Repeal or revision of regulations.</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Reduction of agency fees or fines to businesses or citizens.</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Greater efficiency in agency services or reduction in compliance burden.</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Other</td> </tr> </table>	<input type="checkbox"/>	Repeal or revision of regulations.	<input type="checkbox"/>	Reduction of agency fees or fines to businesses or citizens.	<input checked="" type="checkbox"/>	Greater efficiency in agency services or reduction in compliance burden.	<input type="checkbox"/>	Other
<input type="checkbox"/>	Repeal or revision of regulations.								
<input type="checkbox"/>	Reduction of agency fees or fines to businesses or citizens.								
<input checked="" type="checkbox"/>	Greater efficiency in agency services or reduction in compliance burden.								
<input type="checkbox"/>	Other								

<b>METHOD OF CALCULATION</b>	A review of revenue received in FY 2018-19 classified as fees and fines to determine if any of the fees and fines would affect businesses and citizens of South Carolina.
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*Describe the method of calculation for determining the expected cost or time savings to businesses or citizens.*

<b>REDUCTION OF FEES OR FINES</b>	The South Carolina Department of Juvenile Justice receives the following revenue which is classified as fees and fines: “Juvenile Detention Fee”, “Traffic Education Program Application Fee”, “Court Fines”. All of these are appropriated by the General Assembly for direct services provided to the juveniles in our care. The agency does not propose a reduction to these fines as it would directly affect the care and services provided to the juveniles.
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*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?*

<b>REDUCTION OF REGULATION</b>	There are no regulations that directly affect businesses and citizens of South Carolina. At this time the agency does not propose any changes to current regulation.
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*Which regulations does the agency intend to amend or delete? What is the enabling authority for the regulation?*

<b>AGENCY NAME:</b>	<b>SC Department of Juvenile Justice</b>		
<b>AGENCY CODE:</b>	<b>N120</b>	<b>SECTION:</b>	<b>67</b>

**SUMMARY**

The South Carolina Department of Juvenile Justice receives the following revenue which is classified as fees and fines: “Juvenile Detention Fee”, “Traffic Education Program Application Fee”, “Court Fines”. All of these are appropriated by the General Assembly for direct services provided to the juveniles in our care. The agency does not propose a reduction to these fines as it would directly affect the care and services provided to the juveniles.

As stated in the “Reduction of Fees and Fines” section The South Carolina Department of Juvenile Justice does not propose any fee reductions at this time.

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