

South Carolina Commission for the Blind



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South Carolina Commission for the Blind

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PHONE: (803) 898-8822 • FAX: (803) 898-8845

Commissioner
James M. Kirby

January 12th, 2017

The Honorable George Murrell Smith Jr., Chairman
The Honorable William "Bill" Clyburn
The Honorable Garry Smith
The Honorable Jimmy Bales

Ways and Means Budget Committee
Health and Human Services Sub-Committee
Columbia, SC 29201

Dear Representatives:

The following fiscal year 2017-2018 budget plan for the South Carolina Commission for the Blind is submitted for your consideration.

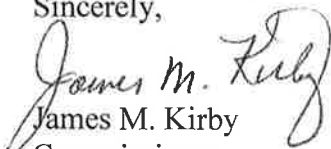
The South Carolina Commission for the Blind is requesting recurring state funds in the amount of \$118,000. These funds would be used to hire a counselor for The Older Blind Program (\$48,000) and an employment consultant for the Training and Employment Division (\$48,000) and (\$22,000) to replace the Federal Training Grant.

SCCB is also, requesting \$295,000 of non-recurring funds. These funds would be used to purchase an outfitted mobile unit (\$195,000) and, also, customize our case management software (\$100,000.)

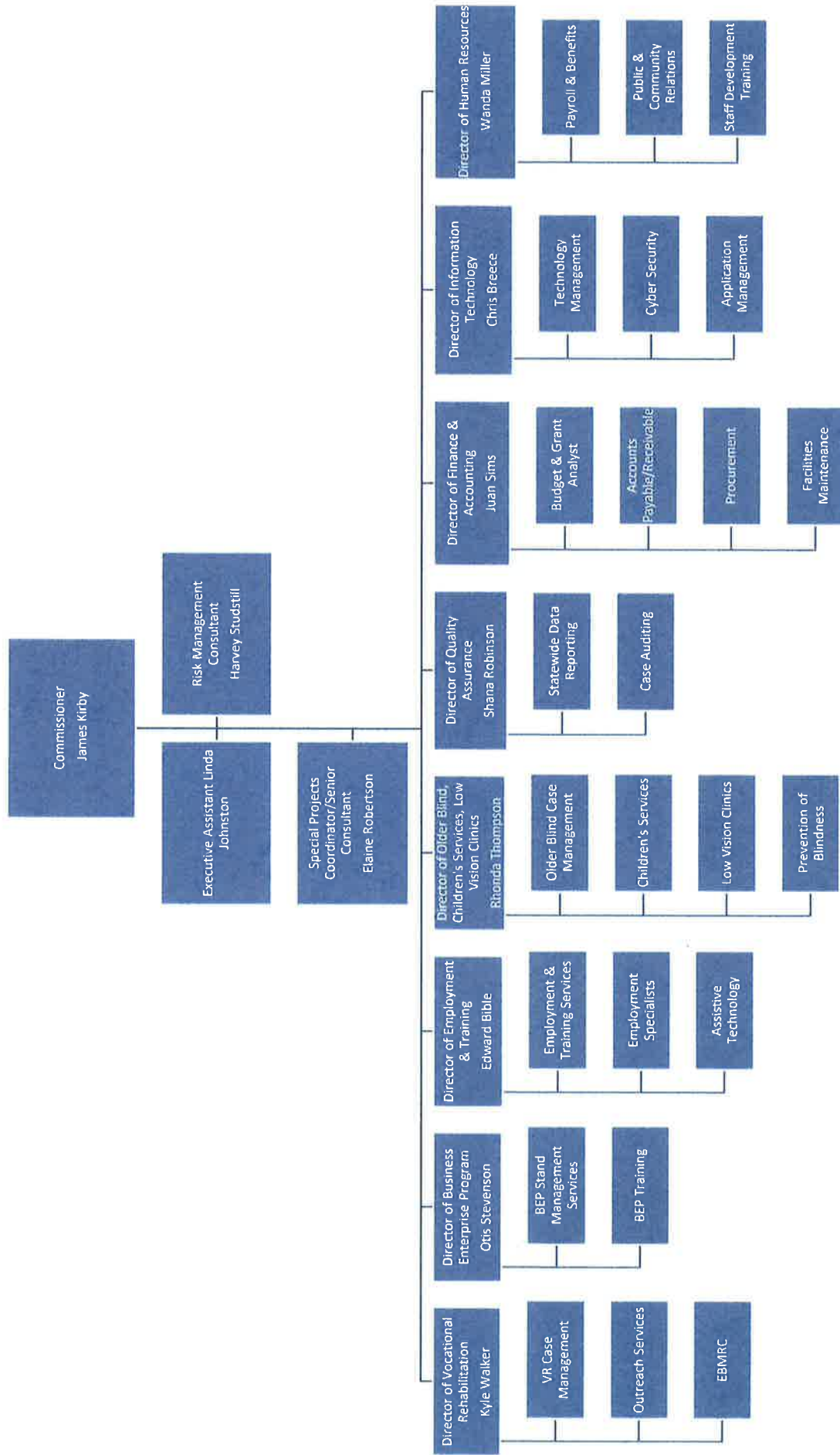
We appreciate your consideration of our budget request as we provide services to the blind citizens of South Carolina to promote employment, independence, and self-reliance.

If you should have any questions, please do not hesitate to contact me.

Sincerely,


James M. Kirby
Commissioner

SOUTH CAROLINA COMMISSION FOR THE BLIND ORGANIZATION CHART (03/14/2016)



AGENCY NAME:	South Carolina Commission for the Blind	
AGENCY CODE:	L24	SECTION:

**Fiscal Year 2015-16
Accountability Report**

SUBMISSION FORM

AGENCY MISSION	The mission of the South Carolina Commission for the Blind is to provide quality, individualized vocational rehabilitation services, independent living services, and prevention of blindness services to blind and visually impaired consumers leading to competitive employment and social and economic independence.
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AGENCY VISION	The vision of the agency is to become a national model vocational rehabilitation agency for the blind, demonstrating quality services, accountability, innovation, effectiveness and efficiency.
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Please state yes or no if the agency has any major or minor (internal or external) recommendations that would allow the agency to operate more effectively and efficiently.

RESTRUCTURING RECOMMENDATIONS:	No
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Please identify your agency's preferred contacts for this year's accountability report.

	<u>Name</u>	<u>Phone</u>	<u>Email</u>
PRIMARY CONTACT:	Elaine Robertson	(803)898-1049	erobertson@sccb.sc.gov
SECONDARY CONTACT:	James Kirby	(803)898-8822	jkirby@sccb.sc.gov

AGENCY NAME:	South Carolina Commission for the Blind		
AGENCY CODE:	L24	SECTION:	

I have reviewed and approved the enclosed FY 2015-16 Accountability Report, which is complete and accurate to the extent of my knowledge.

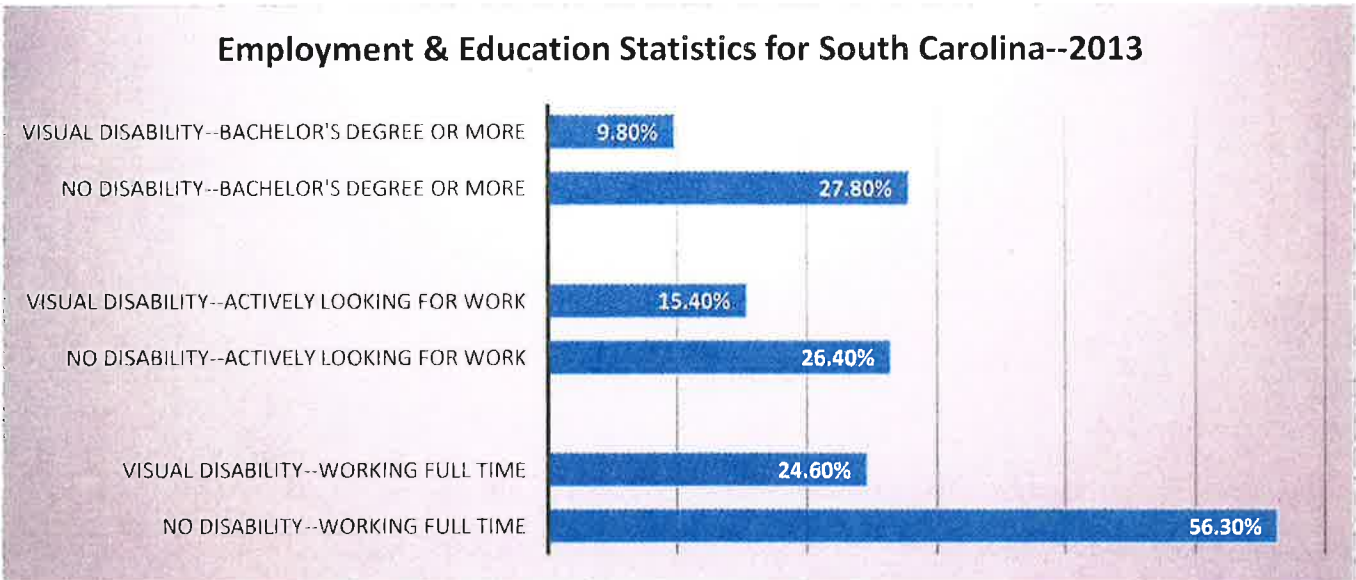
AGENCY DIRECTOR (SIGN AND DATE):	
(TYPE/PRINT NAME):	James. M. Kirby

BOARD/CMSN CHAIR (SIGN AND DATE):	
(TYPE/PRINT NAME):	Mary S. Sonksen

AGENCY'S DISCUSSION AND ANALYSIS

OUR CONSUMERS

South Carolinians with severe visual impairments often lose their ability to be self-sufficient and/or employed as their visual acuity decreases or when faced with sudden vision loss. National data illustrates the effect of vision loss on employment and the latest data from Cornell University Disability Statistics 2013 reports that only 24.6% of people aged 16 to 64 with a visual impairment are employed in South Carolina. Only 9.8% of persons with a visual disability in this state hold a Bachelor's degree or higher compared to 27.8% of South Carolinians without a disability. Our agency diligently markets our services across the state to reach out and assist any eligible citizen of any age.

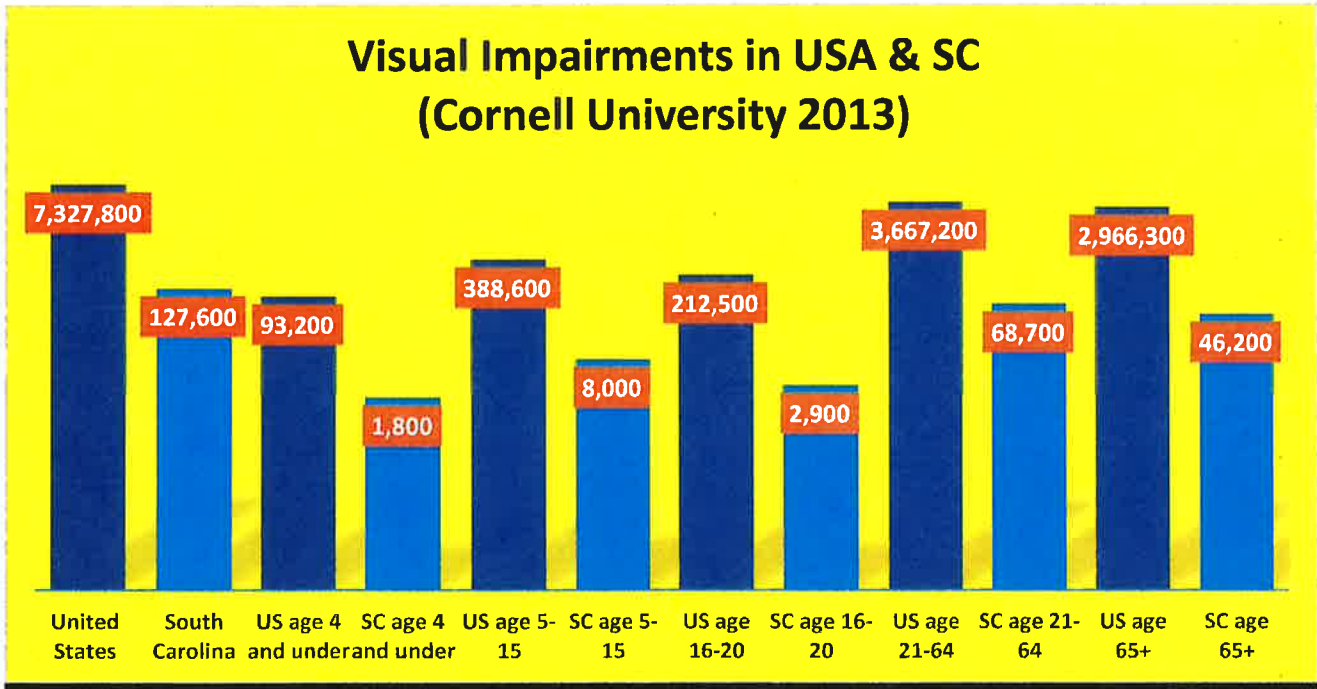


The South Carolina Commission for the Blind is the primary service provider in the state for the visually impaired population and provides case management, referral services, and guidance and counseling as well as independent living services. Consumers of the agency receive blindness skills training from vision rehabilitation teachers, orientation and mobility instructors, assistive technology specialists, and other professionals trained to provide services to persons who are blind or visually impaired. These services are primarily provided on campus at the Ellen Beach Mack Rehabilitation Center in Columbia but also occur in consumer homes, communities, and workplaces. We also rely on community partners in rural areas to assist in providing services to our consumers who reside considerable distances from our office locations throughout the state. Consumers receive employment-related training, job-related technology and tools, placement services, and, if needed, postemployment services, all coordinated through Vocational Rehabilitation Counselors. In SFY 15/16 the agency also reinstated the Prevention of Blindness Program to assist with cataract surgeries, retinal detachment services, eye exams, eye safety glasses, and statewide education about eye health.

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A GROWING POPULATION

According to a study from Cornell University that was completed in 2013, there are currently 7,327,800 people in the United States with Blindness or other visual impairments. In South Carolina there are estimated to be 127,600 residents with severe visual impairments or Blindness. The majority of people with a severe visual impairment are between the ages of 21 and 64, this is also an age where employment assistance is frequently needed. There are estimated to be 10,900 visually impaired youth between the ages of 5 and 20. As the prevalence of vision loss continues to increase in all age groups, the need for services from SCCB also rises. Our marketing team is diligently utilizing media options to create greater awareness of the agency and all we can provide. In the past year we have begun radio announcements, new brochures, visits to the Native American tribes, and presentations across the state for businesses, schools, and private organizations. As we begin to increase our community partnerships, especially with the education sector, it is expected that our consumer base will grow. With expanded outreach for the youth population we have already experienced a 62% increase in referrals for just this age group. Reinstating the Prevention of Blindness program has also brought many new consumers to SCCB and has provided the opportunity to educate communities across the state on the importance of eye health and ways to prevent conditions that can result in severe vision loss. SCCB expects to see growth in every program during the coming year due to our aggressive outreach marketing.



CHALLENGES AND OPPORTUNITIES

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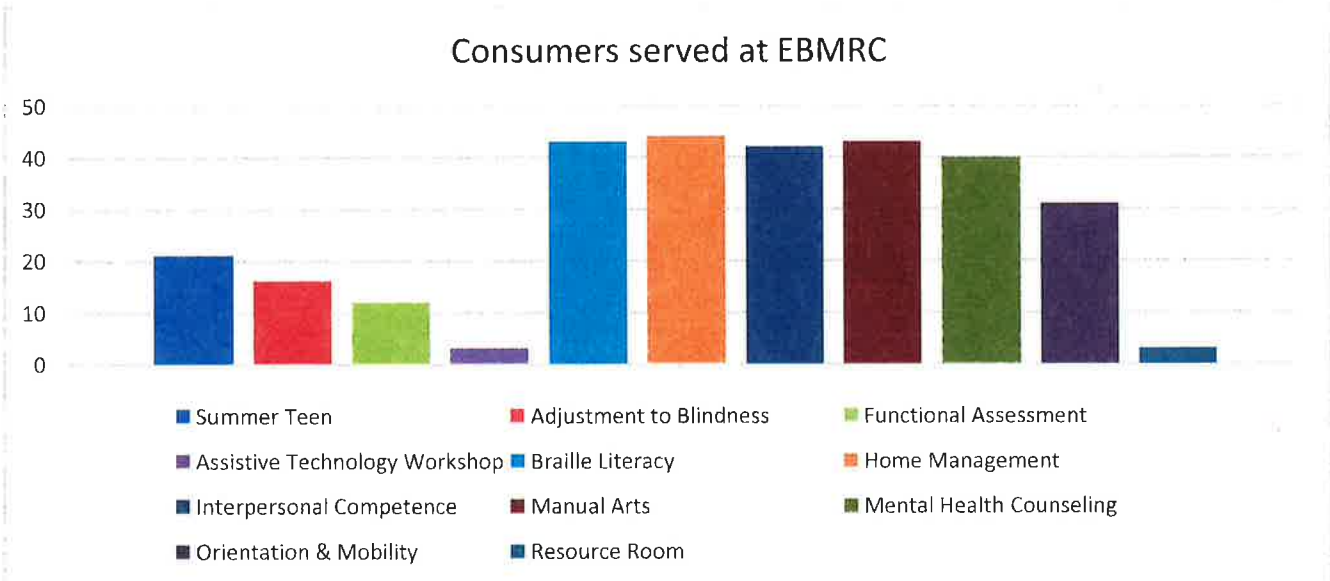
The past year brought numerous changes to the Commission as vacancies were filled, federal regulations were changed, and studies of the agency were conducted. Vacant positions were filled with highly qualified staff with a diverse background of experience in Vocational Rehabilitation. Partnerships with local, state, and private agencies were formed to increase service options and reduce waiting time for consumers. The Rehabilitation Services Administration implemented the Workforce Innovation and Opportunity Act (WIOA) bringing a new focus to the youth population and new challenges to Vocational Rehabilitation Agencies across the country. The State of South Carolina implemented a new Strategic Plan for Technology Operations that is changing the way technology is utilized across the state and resulted in our agency choosing to migrate our Information Technology infrastructure to the Department of Technology Operations to assist us in becoming compliant with all state policies and procedures in a timely manner. The Commission was selected for study by the Legislative Oversight Committee and we also began the process of a Statewide Comprehensive Needs Assessment. While all of these changes brought challenges to the agency, we chose to view them as opportunity for growth and have utilized each challenge to create new goals, strategies, objectives, and action steps for the coming year. We are excited to see what this next year will bring as we evolve and grow by utilizing each opportunity that we have been given. As we celebrate our 50th birthday it is clear that the need for our services and the passion of the staff continues stronger than ever.

VOCATIONAL REHABILITATION SERVICES

The Vocational Rehabilitation Program has been extremely active over the past year as they began the Comprehensive Statewide Needs Assessment to identify areas of opportunity and growth. This program also saw drastic changes to the performance indicators utilized by the Rehabilitation Services Administration. The publication of the Workforce Innovation and Opportunity Act (WIOA) regulations and the creation of a set-aside fund to provide Pre-Employment Transition Services (Pre-ETS) to youth ages 13 to 21 has presented challenges and opportunities for the VR program. WIOA also brought forth the mandate for partnerships with other state agencies who provide similar employment related services to South Carolina residents. Our VR Director took an active role in the creation of the Unified State Plan, ensuring that SCCB had strong presence and the importance of providing specialized services to the visually impaired was recognized. Vocational Rehabilitation staff has been very busy creating programs such as Career BOOST and Work Readiness workshops, meeting with schools across the state to identify potentially eligible youth, and began a partnership with NASA to build on a 3-D Idea Lab. Vocational Rehabilitation has seen many internal changes in the past year with the hiring of 7 new Vocational Rehabilitation Counselors, 3 Transition (Youth) Counselors, a Regional Director, Ellen Beach Mack Rehabilitation Center Director, 5 new Counselor Assistants, and the creation of 3 new JOBS Specialist positions to assist in serving the most severely disabled. There have been many trainings during the year to bring consistency and cohesiveness to the Vocational program. The staff in this program is looking forward to the challenges each of these changes has brought and the opportunity to create new avenues to assist consumers in achieving success.

ELLEN BEACH MACK REHABILITATION CENTER

The EBMRC ended the year with a new director and a new focus. Many consumers have utilized the services at the center over the past year and EBMRC was the home of the very successful Summer Teen Program. Currently the center is the primary focus of the Comprehensive Statewide Needs Assessment, Phase II. Upon completion in late fall of 2016, the CSNA will provide guidance in formulating new curriculum for the class offerings, suggestions for moving the focus to Employment First, and show which programs would benefit from greater staff training and credentialing. The EBMRC staff is excited to see what the next year will bring and how program changes will assist them in providing exemplary services to consumers.



EARLY INTERVENTION

With the focus of WIOA being on the youth population and the potential of increasing employment and education success by offering specialized services at an earlier age, we also need to look at what happens prior to age 14. The Children’s Services program primarily serves children ages 3 to 13 and coordinates services with schools and community organizations. The counselors in this program regularly visit preschools, daycare centers, and elementary schools to provide information about their services. This outreach has created an increase of 5% in referrals this year. SCCB hosted the Braille Challenge at the Columbia campus and conducted parent workshops while the children participated in the Braille activities. Counselors for this age group have also begun partnering with VR Transition Counselors and building relationships to allow for a smooth transition from Children’s Services to VR Transition services at age 14. Studies show that children with severe visual impairments who begin learning basic skills such as mobility, braille, and technology from a very young age, will be less dependent on others and more successful in building a career as they enter adulthood. Coordinating services for the children and their

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families, educating parents on the importance of independence, and ensuring that the children and their families have the tools for success, are the primary focus of this program.

TRAINING AND EMPLOYMENT SERVICES

The Training & Employment Services is a partner to the Vocational Rehabilitation Program. The Employment Consultants in this program work diligently to provide mentoring, training, and employment opportunities for work ready consumers. Vocational evaluations are completed by this department to assist consumers in setting and reaching an employment goal. It is not uncommon for an adult who has lost visual acuity to have difficulty in identifying what they are able to do for work. The assessment process helps identify their skills and strengths so the VR counselor and Employment Consultants can work with the consumer to build a new career path to fully utilize individual abilities. The staff also coordinated internships for the Summer Teen Program, exceeded their goal of 1 new business contact per month by reaching 22 at just halfway through the Federal Fiscal Year, and were honored when Janet LaBreck, Commissioner of the Rehabilitation Services Administration, spoke at the Summer Internship Graduation last year. This program is focusing on 2 primary challenges for the coming year, first to bring the United States Business Leadership Network to South Carolina, and second to create a technology training lab where consumers can experience the wide variety of technology available for persons with visual impairments and select what works best for their individual needs.

ENTREPRENEUR OPPORTUNITY

The Randolph Sheppard Act of 1936, amended in 1974, provides opportunity for adults who are legally or totally blind to operate their own business. The law gives priority options for the Blind to operate a vending or cafeteria style food service on federal and other properties. In South Carolina we support over 100 facilities ranging from vending machines at highway rest stops to the full service military dining facility at Fort Jackson Army base. SCCB provides thorough training, certification, and licensure for consumers entering this program. The 5 Business Enterprise Counselors provide ongoing support and supervision to Blind Vendors in their district. A major challenge that was met in the past year was the creation of a new Debt Collection Policy and Procedure for this program. The program supplies each new vendor with initial stocks of merchandise and cash to begin operating the business authorized by the permit. Debt is incurred when vendors allow operating capital and stock to fall below operating levels and upon exit from the program. The new collection procedure provides methods to begin collecting this debt from current and past vendors. The Business Enterprise Program and the Vocational Rehabilitation Program are working closely to develop a training program for our youth consumers who may be interested in self-employment. BEP has completed renovations of 5 facilities in the past year and vendor earnings have increased 3.9% over last year.

OLDER BLIND

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The Older Blind program assists South Carolinians who are age 55 and over with a severe visual impairment. The primary focus of this program is to provide services that allow this population to remain in their homes and as independent as possible. The referrals continue to increase in this program to meet the needs of the growing aging population across the state. Many serious visual conditions such as glaucoma, cataracts, macular degeneration, and low vision occur in the later years of life. These conditions can make it extremely difficult for people to remain in their homes and live independently. This program offers Low Vision clinics, Low Vision aids, mobility services, home management services, as well as training opportunities through the Hadley School for the Blind and National Federation of the Blind. Counselors also work with family members to coordinate services and partner with senior centers across the state to provide social opportunities for consumers. The Older Blind program not only faces increasing referrals but also the need for greater technology training and devices as this generation becomes more astute about the benefits of technology. A goal this year is to develop a process to provide technology training and assistive devices to our Older Blind and Independent Living Consumers to allow for greater independence in the home.

BEHIND THE FRONT LINE

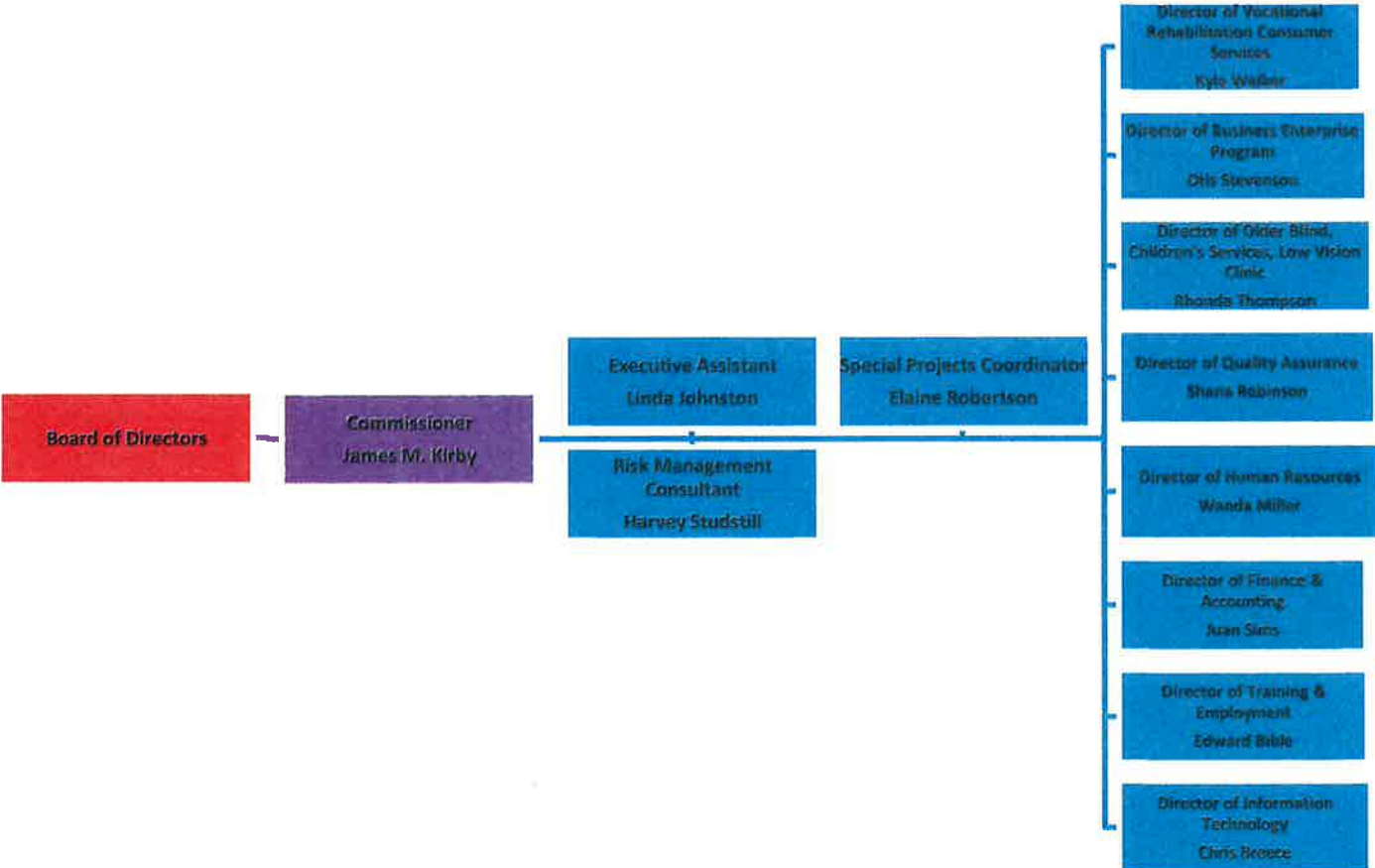
Providing support behind our direct consumer services are highly skilled professionals who assist in keeping our programs strong. Our Information Technology department is diligently working with Department of Technology Operations to migrate our infrastructure to the DTO location. The migration is in process and upon completion will provide greater security and support for programs utilized by SCCB. It will also allow our internal I.T. staff to focus on maintaining the programs and equipment that our staff utilizes on a daily basis. The Quality Assurance staff ensures that our data is accurate and monitors compliance with state and federal policies and procedures. Human Resources has been very busy this year with recruitment, orientation, and marketing. This department has reduced the turnover within the agency to 6% and the number of days from vacancy to hire has dropped from 183 days to 142, a decrease of almost 25%. They instituted a new orientation program that provides new hire training in the first week instead of spreading it throughout the first few months on the job. This department has also provided marketing services for agency programs. They significantly expanded the resource section on the SCCB website, produced Public Service Announcements that are broadcast across the state, and created new brochures and materials to be distributed to the public. Finance has maintained the agency budget through diligent monitoring and regular meetings with directors so the year ended with no deficit.

THE LEADERSHIP

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The Senior Leadership Team at SCCB has become more unified over the past year as they participated in monthly meetings where each director shared the challenges and accomplishments of their individual programs. This unification has shown strength as programs have found ways to partner and create seamless service provision to consumers. Vocational Rehabilitation and Training & Employment have worked together on training and introducing new programs, VR Transition Counselors and Children’s Services have presented together at schools and developed relationships to help youth smoothly progress from one program to the next, Human Resources has worked closely with Prevention of Blindness to create and distribute information about eye health and safety, and the Business Enterprise Program is working with VR to bring self-employment options to a younger group of consumers. These are only a few examples of the new partnerships that have developed among our own leadership over the past year. The team provides support to each other and the dedication and passion is evident in the progress the agency has made to overcome challenges this year.

SCCB Organizational Chart, 2016/2017



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RISK ASSESSMENT AND MITIGATION STRATEGIES

The potential most negative impact on the public that SCCB perceives could occur if we were unable to achieve our goals and objectives would be the inability of the Blind and Visually Impaired citizens of South Carolina would lose independence. Blind and visually impaired citizens of SC will be unable to obtain the disability adjustment and employment services needed to live independently and/or rejoin the workforce. This will result in undue burdens on families, local communities, charities, and will result in additional dependence of government programs such as food stamps, Medicaid, housing, etc.

If this situation were to occur the agency would ask the General Assembly for assistance if the staff was no longer able to respond to visually impaired citizens due to lack of resources. The agency would first reach out to partner agencies in the communities to provide services to our consumers. Utilizing other state agencies such as Vocational Rehabilitation, Department of Employment & Workforce, Mental Health, and Human Services, some of our consumers' needs could be met. Without appropriate resources it would be difficult to reach out to private and community agencies as we would be unable to pay.

Three options that may be presented to the General Assembly to assist the agency in meeting their goals and objectives would be:

1. Consider additional funding to continue service provision.
2. Consider legislation that encourages and offers incentives for South Carolina businesses to hire persons who are Blind or Visually Impaired.
3. Consider start-up or establishment grants for community rehabilitation programs to support and partner with SCCB in providing services.

Prioritized Budget Request

1. Older Blind Counselor

Our Older Blind Program received 800 referrals this past fiscal year and our average caseload for an Older Blind Counselor is about 70 consumers. To effectively work with each consumer, the counselors need sufficient time to address training needs within the home settings, coordinate appropriate services and conduct follow-up home visits. As the number of referrals increase, it is becoming more a challenge to effectively provide services and assistance. Adjustment to vision loss skills training for maintaining independence is the primary focus. The current waiting list has over 200 individuals.

2. Training and Employment – Employment Consultant

We are requesting this position to replace the one lost during the Reduction in Force in 2008/2009. The loss of that position resulted in fewer business contacts which in turn caused fewer job placement opportunities in competitive, integrated employment for SCCB consumers. Funding this request would add strength to this department and the ability to provide greater services to employers as mandated by WIOA regulations. The addition of this position would also allow for new community/business contacts to increase training and employment opportunities for consumers.

3. Software Customization

Customizing our case management software, AWARE, will reduce time necessary for entering information and increase productivity. It will also provide an easier flow of information that will improve case services for consumers working with several service providers. Interfacing AWARE and SCEIS would increase productivity and data accuracy as information on purchases of services and/or hard goods would only be entered once instead of the current process of entering into both systems separately. This would also allow reports to be generated automatically instead of manually calculated. The overall process will increase consumer services, accuracy of services provided and increased productivity for counselors, assistants, QA staff, and finance staff.

4. Mobile Unit

Purchasing a customized outfitted mobile unit to travel the state of South Carolina to provide assessments, vision screenings, testing and to allow a team to bring services to underserved and unserved areas of the state.

5. Federal Training Grant Replacement

The Federal Training Grant has been discontinued, but the need for training will always exist. Under new federal WIOA regulations each agency must be able to provide ongoing training to maintain well qualified staff to serve people with disabilities. The funds would be used for training needs of staff. Staff must be trained on the changes of federal regulations and federal requirements. It is also important to assist staff in obtaining and maintaining credentials specific to their job duties. Training in best practices by credentialed staff ensures that high quality services are provided to all consumers.

6. Federal Authorization Increase

SCCB is requesting additional federal spending authority to be able to fully utilize the federal funds available to our agency.

7. Pay Plan Allocation

Spread the agency pay plan increase as required.

8. SCRS and PORS .5% Rate Increase Allocation

Base adjustment Allocation of statewide employee benefits.

9. Health and Dental Insurance Allocation

Base adjustment Allocation of statewide employee benefits.

South Carolina Commission for the Blind Carryforward Funds

State carryforward into fiscal year 2017 was \$271,320.53. The agency also carried \$739,708.51 in Other funds into fiscal year 2017. This balance is comprised of revenue from the Business Enterprise Program, donated funds, and revenue from the sale of assets.

3 Years Other Funds Authorization and Spending

	FY16		FY15		FY14	
	Authorizaition	Expenditures	Authorizaition	Expenditures	Authorizaition	Expenditures
	403,000	53,560	293,000	156,681	293,000	244,077

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Fiscal Year 2017-18 Agency Budget Plan

FORM A – SUMMARY

RECURRING FUNDS (FORM B) DECISION PACKAGES)	My agency is submitting the following recurring decision packages listed in <u>priority order</u> (Form B): 9994, 9991, 10006, 9997, 10028, 10031, 10034, 10037
	For FY 2017-18, my agency is (mark "X"): <input checked="" type="checkbox"/> Requesting a net increase in recurring General Fund appropriations. <input type="checkbox"/> Not requesting a net increase in recurring General Fund Appropriations.
CAPITAL & NON-RECURRING FUNDS (FORM C) DECISION PACKAGES)	My agency is submitting the following one-time decision packages listed in <u>priority order</u> (Form C): 10025, 10022
	For FY 2017-18, my agency is (mark "X"): <input checked="" type="checkbox"/> Requesting capital and/or non-recurring funds. <input type="checkbox"/> Not requesting capital and/or non-recurring funds.
PROVISOS (FORM D)	For FY 2017-18, my agency is (mark "X"): <input type="checkbox"/> Requesting a new proviso and/or substantive changes to existing provisos. <input type="checkbox"/> Only requesting technical proviso changes (such as date references). <input checked="" type="checkbox"/> Not requesting any proviso changes.

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

	<u>Name</u>	<u>Phone</u>	<u>Email</u>
PRIMARY CONTACT:	Juan Sims	898-7701	jsims@sccb.sc.gov
SECONDARY CONTACT:	Carrie Morris	898-8835	cmorris@sccb.sc.gov

I have reviewed and approved the enclosed FY 2017-18 Agency Budget Plan, which is complete and accurate to the extent of my knowledge.

	<u>Agency Director</u>	<u>Board or Commission Chair</u>
SIGN/DATE:	<i>James Kirby</i> 9-30-16	<i>Mary Sonksen</i>
TYPE/PRINT NAME:	James Kirby	Mary Sonksen

This form must be signed by the department head – not a delegate

AGENCY NAME:	South Carolina Commission for the Blind		
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Fiscal Year 2017-18 Agency Budget Plan

FORM A – SUMMARY

**RECURRING FUNDS
(FORM B
DECISION PACKAGES)**

My agency is submitting the following recurring decision packages listed in <u>priority order</u> (Form B): 9994, 9991, 10006, 9997, 10028, 10031, 10034, 10037	
For FY 2017-18, my agency is (mark "X"):	
<input checked="" type="checkbox"/>	Requesting a net increase in recurring General Fund appropriations.
<input type="checkbox"/>	Not requesting a net increase in recurring General Fund Appropriations.

**CAPITAL &
NON-RECURRING
FUNDS
(FORM C
DECISION PACKAGES)**

My agency is submitting the following one-time decision packages listed in <u>priority order</u> (Form C): 10025, 10022	
For FY 2017-18, my agency is (mark "X"):	
<input checked="" type="checkbox"/>	Requesting capital and/or non-recurring funds.
<input type="checkbox"/>	Not requesting capital and/or non-recurring funds.

**PROVISOS
(FORM D)**

For FY 2017-18, my agency is (mark "X"):	
<input type="checkbox"/>	Requesting a new proviso and/or substantive changes to existing provisos.
<input type="checkbox"/>	Only requesting technical proviso changes (such as date references).
<input checked="" type="checkbox"/>	Not requesting any proviso changes.

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

	<u>Name</u>	<u>Phone</u>	<u>Email</u>
PRIMARY CONTACT:	Juan Sims	898-7701	jsims@sccb.sc.gov
SECONDARY CONTACT:	Carrie Morris	898-8835	cmorris@sccb.sc.gov

I have reviewed and approved the enclosed FY 2017-18 Agency Budget Plan, which is complete and accurate to the extent of my knowledge.

	<u>Agency Director</u>	<u>Board or Commission Chair</u>
SIGN/DATE:		
TYPE/PRINT NAME:	James Kirby	Mary Sonksen

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

AGENCY NAME:	SC Commission for the Blind		
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FORM B – PROGRAM REVISION REQUEST

DECISION PACKAGE

Provide the decision package number issued by the PBF system ("Governor's Request").

TITLE

Older Blind Counselor

Provide a brief, descriptive title for this request.

AMOUNT

48,000

What is the net change in requested appropriations for FY 2017-18? This amount should correspond to the decision package's total in PBF across all funding sources.

ENABLING AUTHORITY

Federal Department of Education, Rehabilitative Services Administration administers this program following the Federal Code of Regulations.

What specific state or federal statutory, regulatory, and/or administrative authority established this program? Is this decision package prompted by the establishment of or a revision to that authority? Please avoid citing general provisions of law where possible, and instead cite to the most specific legal authority supporting the request.

FACTORS ASSOCIATED WITH THE REQUEST

Mark "X" for all that apply:

<input type="checkbox"/>	(Base Adjustment) Allocation of statewide employee benefits.
<input type="checkbox"/>	(Base Adjustment) Realignment within existing programs and lines.
<input type="checkbox"/>	(Base Adjustment) Restructuring of agency programs – <i>requires pre-approval.</i>
<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, Decision Package # _____
<input type="checkbox"/>	Change in cost of providing current services to existing program audience.
<input checked="" type="checkbox"/>	Change in case load / enrollment under existing program guidelines.
<input type="checkbox"/>	Non-mandated change in eligibility / enrollment for existing program.
<input type="checkbox"/>	Non-mandated program change in service levels or areas.
<input 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.

RECIPIENTS OF FUNDS

These funds would support one Older Blind Counselor's salary and fringe benefits.

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?

ACCOUNTABILITY OF FUNDS

The addition of 1 FTE in the role of Older Blind Counselor will assist in meeting Objectives 2.1.1; 3.1.1; 3.1.2; 4.2.2. These objectives focus on increasing opportunities for the Older Blind population of this state to remain independent in their homes. The objectives also address efficiency and strengthening the Older Blind Program. An additional counselor will decrease/eliminate the current waiting list and allow the agency to serve many more citizens who are eligible for this program. With the older population in SC growing each year, the fact that most severe visual conditions occur after age 50, and the evidence of an increase in applicants for this program, an additional counselor is necessary to meet the increasing demand as well.

What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective?

POTENTIAL OFFSETS

No potential offsets available.

For decision packages that request non-mandatory funding increases to programs or initiatives, please identify a potential offset within an existing lower priority or ineffective program(s).

MATCHING FUNDS

None

Would these funds be matched by federal, institutional, philanthropic, or other resources? If so, identify the source, amount, and terms of the match requirement.

FUNDING ALTERNATIVES

There are no funding alternatives available.

What other possible funding sources were considered? Could this request be met in whole or in part with the use of other resources, including fund balances? If so, please comment on the sustainability of such an approach.

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SUMMARY

Our Older Blind Program received 800 referrals this past fiscal year, and our average caseload for an Older Blind Program counselor is about 70 consumers, with some areas of our state actually experiencing even larger caseload sizes (ex. the Upstate has an active caseload of over 90 consumers). To effectively work with each consumer, the counselors need sufficient time to address training needs within the home settings, coordinate other appropriate services and resources, conduct follow up home visits, and ensure case documentation is routinely completed as required. Some home visits can range up to two hours per meeting. As the number of referrals increase, it is becoming more of a challenge to effectively provide the various necessary assistance. Moreover, research indicates the senior population is expected to double by the year 2030, and "as the last of the baby boomers turn age 65 in 2029, researchers estimate the number of people with vision problems will double to more than 8 million in 2050." – Newsleader, May 2016. Therefore, we can only anticipate our caseloads will steadily increase as well.

Providing adjustment to vision loss skills training for maintaining independence is the primary focus of our Older Blind Program. While we continue to offer modifications and various adaptive equipment for the home setting, there is an increasing dependency on technology. The consumer base is changing to include more individuals who depend on technology for online transactions and as a source of communication with businesses, family and friends.

We currently have five Older Blind Program counselors working to provide services for a growing number of seniors across the state. The current waiting list includes a total of approximately 200 individuals, with some wait times as lengthy as four months. If we were awarded the funding to hire one additional employee, this would permit us to redistribute the service territories, which would subsequently reduce the caseload size for each counselor, the duration of travel, and ultimately give us the opportunity to more timely address the essential needs of the visually impaired senior population in our state.

Using as much detail as necessary to make an informed decision regarding this request, provide a summary of the rationale for the decision package. Why has it been requested? How specifically would the requested funds be used? If the request is related to information security or information technology, explain its relationship to the agency's security or technology plan.

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METHOD OF CALCULATION

We are asking for the anticipated cost of one FTE and the associated fringe benefits.

How was the amount of the request calculated? List the per unit or per FTE costs of implementation. What factors could cause deviations between the request and the amount that could ultimately be required in order to perform the underlying work?

FUTURE IMPACT

Without the approval of this decision package, we will continue to have a waiting list for the program. With a growing senior population, this will continue over time and will not provide timely services to the citizens of South Carolina.

Will the state incur any maintenance-of-effort or other obligations by adopting this decision package? What impact will there be on future capital and/or operating budgets if this request is or is not honored? Has a source of any such funds been identified and/or obtained by your agency?

PRIORITIZATION

Defer action.

If no or insufficient new funds are available in order to meet this need, how would the agency prefer to proceed? By using fund balances, generating new revenue, cutting other programs, or deferring action on this request in FY 2017-18? Please be specific.

INTENDED IMPACT

We currently have five Older Blind Program counselors working to provide services for a growing number of seniors across the state. The current waiting list includes a total of approximately 200 individuals, with some wait times as lengthy as four months. If we were awarded the funding to hire one additional employee, this would permit us to redistribute the service territories, which would subsequently reduce the caseload size for each counselor, the duration of travel, and ultimately give us the opportunity to more timely address the essential needs of the visually impaired senior population in our state.

What impact is this decision package intended to have on service delivery and program outcomes, and over what period of time?

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**PROGRAM
EVALUATION**

The agency will monitor the waiting list for the program, consumers served by the program, and the number of successful case closures.

How would the use of these funds be evaluated? What specific outcome or performance measures would be used to assess the effectiveness of this program?

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FORM B – PROGRAM REVISION REQUEST

DECISION PACKAGE

Provide the decision package number issued by the PBF system (“Governor’s Request”).

TITLE

Training and Employment - Employment Consultant

Provide a brief, descriptive title for this request.

AMOUNT

48,000

What is the net change in requested appropriations for FY 2017-18? This amount should correspond to the decision package’s total in PBF across all funding sources.

ENABLING AUTHORITY

The South Carolina Commission for the Blind is authorized to provide vocational rehabilitation services under Code of Federal Regulation 361.13(a) Title 1, Part B of the Rehabilitation Act and Title VI, Part B of the Rehabilitation Act.

What specific state or federal statutory, regulatory, and/or administrative authority established this program? Is this decision package prompted by the establishment of or a revision to that authority? Please avoid citing general provisions of law where possible, and instead cite to the most specific legal authority supporting the request.

FACTORS ASSOCIATED WITH THE REQUEST

Mark “X” for all that apply:

<input type="checkbox"/>	(Base Adjustment) Allocation of statewide employee benefits.
<input type="checkbox"/>	(Base Adjustment) Realignment within existing programs and lines.
<input type="checkbox"/>	(Base Adjustment) Restructuring of agency programs – <i>requires pre-approval.</i>
<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, Decision Package # _____
<input type="checkbox"/>	Change in cost of providing current services to existing program audience.
<input checked="" type="checkbox"/>	Change in case load / enrollment under existing program guidelines.
<input type="checkbox"/>	Non-mandated change in eligibility / enrollment for existing program.
<input type="checkbox"/>	Non-mandated program change in service levels or areas.
<input 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.

RECIPIENTS OF FUNDS

These funds would support one Employment Consultant’s salary and fringe benefits.

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?

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ACCOUNTABILITY OF FUNDS

The addition of 1 FTE in the role of Employment Consultant will assist in meeting Objectives 1.1.1; 1.1.2, 3.1.1, 3.1.2; 4.1.1; 4.2.2. These objectives concern increasing community and business partnerships, increasing opportunities for consumers, reducing staff turnover, especially from work stress, and implementing WIOA regulations. Adding this staff member will allow for greater coverage across the state, smaller regions for each Consultant to reduce work stress, and will improve efficiency and productivity within the program as well as increase competitive employment outcomes.

What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective?

POTENTIAL OFFSETS

No potential offsets available.

For decision packages that request non-mandatory funding increases to programs or initiatives, please identify a potential offset within an existing lower priority or ineffective program(s).

MATCHING FUNDS

These funds would not require match.

Would these funds be matched by federal, institutional, philanthropic, or other resources? If so, identify the source, amount, and terms of the match requirement.

FUNDING ALTERNATIVES

There are no funding alternatives available.

What other possible funding sources were considered? Could this request be met in whole or in part with the use of other resources, including fund balances? If so, please comment on the sustainability of such an approach.

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SUMMARY

This position would replace the position lost during the Reduction in Force of 2008/2009, which resulted in lost business contacts, and a reduction of SCCB consumers for competitive integrated employment opportunities.

The FTE, for the Employment Consultant position would cover one quarter of our state in developing and maintaining partner relationships in relieving barriers to employment.

Using as much detail as necessary to make an informed decision regarding this request, provide a summary of the rationale for the decision package. Why has it been requested? How specifically would the requested funds be used? If the request is related to information security or information technology, explain its relationship to the agency's security or technology plan.

METHOD OF CALCULATION

We are asking for the anticipated cost of one FTE and the associated fringe benefits.

How was the amount of the request calculated? List the per unit or per FTE costs of implementation. What factors could cause deviations between the request and the amount that could ultimately be required in order to perform the underlying work?

FUTURE IMPACT

Funding this request will bring this particular service back to pre-budget cut levels. We could reestablish the necessary relationships to place more consumers in competitive integrated employment.

Will the state incur any maintenance-of-effort or other obligations by adopting this decision package? What impact will there be on future capital and/or operating budgets if this request is or is not honored? Has a source of any such funds been identified and/or obtained by your agency?

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PRIORITIZATION

Defer action.

If no or insufficient new funds are available in order to meet this need, how would the agency prefer to proceed? By using fund balances, generating new revenue, cutting other programs, or deferring action on this request in FY 2017-18? Please be specific.

INTENDED IMPACT

Within the first year, the Employment Consultant should reestablish lost contacts with employers, increase consumer referrals, and increase business awareness of services, not only in job development, but also with job retention, ADA Awareness and services, and Diversity transition in the workplace for employers.

In accordance with the Workforce Innovation and Opportunity Act (WIOA), the Employment Consultant will work closely with other employment driven State Agencies (SC Department of Employment & Workforce, SC Department of Vocational Rehabilitation, Etc.). Also in accordance, an extra Employment Consultant position will allow for the ability to service the underserved in Rural areas of the state.

What impact is this decision package intended to have on service delivery and program outcomes, and over what period of time?

PROGRAM EVALUATION

The performance of the position will be measured upon the following:

1. Monthly reports on: Number of presentations conducted, number of sensitivity and awareness trainings to employers, number of consumers worked with each month, and the number of community events attended/hosted each month
2. Quality of each placement

How would the use of these funds be evaluated? What specific outcome or performance measures would be used to assess the effectiveness of this program?

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FORM B – PROGRAM REVISION REQUEST

DECISION PACKAGE
Provide the decision package number issued by the PBF system ("Governor's Request").

TITLE
Provide a brief, descriptive title for this request.

AMOUNT
What is the net change in requested appropriations for FY 2017-18? This amount should correspond to the decision package's total in PBF across all funding sources.

ENABLING AUTHORITY
What specific state or federal statutory, regulatory, and/or administrative authority established this program? Is this decision package prompted by the establishment of or a revision to that authority? Please avoid citing general provisions of law where possible, and instead cite to the most specific legal authority supporting the request.

- FACTORS ASSOCIATED WITH THE REQUEST**
- Mark "X" for all that apply:**
- (Base Adjustment) Allocation of statewide employee benefits.
 - (Base Adjustment) Realignment within existing programs and lines.
 - (Base Adjustment) Restructuring of agency programs – *requires pre-approval.*
 - IT Technology/Security related
 - Consulted DTO during development
 - Related to a Non-Recurring request – If so, Decision Package # _____
 - Change in cost of providing current services to existing program audience.
 - Change in case load / enrollment under existing program guidelines.
 - Non-mandated change in eligibility / enrollment for existing program.
 - Non-mandated program change in service levels or areas.
 - Proposed establishment of a new program or initiative.
 - Loss of federal or other external financial support for existing program.
 - Exhaustion of fund balances previously used to support program.

RECIPIENTS OF FUNDS
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?

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ACCOUNTABILITY OF FUNDS

Under the new federal WIOA regulations each agency must be able to provide ongoing training to maintain well qualified staff to serve people with disabilities. Within our agency we have two objectives that examine this need, 3.1.1 and 3.1.2. Both address the need to revise program positions and descriptions to meet the new performance standards and indicators and also to assist in reducing turnover as well-trained staff will remain in their jobs as long as they have the skills and tools to provide the best services to their consumers.

What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective?

POTENTIAL OFFSETS

No potential offsets available.

For decision packages that request non-mandatory funding increases to programs or initiatives, please identify a potential offset within an existing lower priority or ineffective program(s).

MATCHING FUNDS

Funds would not be matched.

Would these funds be matched by federal, institutional, philanthropic, or other resources? If so, identify the source, amount, and terms of the match requirement.

FUNDING ALTERNATIVES

No funding alternatives available.

What other possible funding sources were considered? Could this request be met in whole or in part with the use of other resources, including fund balances? If so, please comment on the sustainability of such an approach.

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SUMMARY

The funds would be used for training purposes for staff. There are many changes in federal regulations and staff needs be abreast of to meet federal requirements.

Using as much detail as necessary to make an informed decision regarding this request, provide a summary of the rationale for the decision package. Why has it been requested? How specifically would the requested funds be used? If the request is related to information security or information technology, explain its relationship to the agency's security or technology plan.

METHOD OF CALCULATION

We are asking for approximately the same amount as the grant that has been discontinued.

How was the amount of the request calculated? List the per unit or per FTE costs of implementation. What factors could cause deviations between the request and the amount that could ultimately be required in order to perform the underlying work?

FUTURE IMPACT

The agency will have to reduce services to consumers to fund the required training.

Will the state incur any maintenance-of-effort or other obligations by adopting this decision package? What impact will there be on future capital and/or operating budgets if this request is or is not honored? Has a source of any such funds been identified and/or obtained by your agency?

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PRIORITIZATION

The agency would have to reduce Vocational Rehabilitation services to fund the required training for staff.

If no or insufficient new funds are available in order to meet this need, how would the agency prefer to proceed? By using fund balances, generating new revenue, cutting other programs, or deferring action on this request in FY 2017-18? Please be specific.

INTENDED IMPACT

This decision package will maintain important training for staff, keep the agency up to date with the rapidly changing federal regulations, and keep consumer services in compliance with the federal regulations.

What impact is this decision package intended to have on service delivery and program outcomes, and over what period of time?

PROGRAM EVALUATION

The funds would be monitored by the number of employees trained, number of training sessions held each year, and state and federal audit results that could show a lack of training due to preventable errors.

How would the use of these funds be evaluated? What specific outcome or performance measures would be used to assess the effectiveness of this program?

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FORM B – PROGRAM REVISION REQUEST

DECISION PACKAGE

Provide the decision package number issued by the PBF system ("Governor's Request").

TITLE

Federal Authorization Increase

Provide a brief, descriptive title for this request.

AMOUNT

231,563

What is the net change in requested appropriations for FY 2017-18? This amount should correspond to the decision package's total in PBF across all funding sources.

ENABLING AUTHORITY

The South Carolina Commission for the Blind is authorized to provide vocational rehabilitation services under Code of Federal Regulation 361.13(a) Title 1, Part B of the Rehabilitation Act and Title VI, Part B of the Rehabilitation Act.

What specific state or federal statutory, regulatory, and/or administrative authority established this program? Is this decision package prompted by the establishment of or a revision to that authority? Please avoid citing general provisions of law where possible, and instead cite to the most specific legal authority supporting the request.

FACTORS ASSOCIATED WITH THE REQUEST

Mark "X" for all that apply:

<input type="checkbox"/>	(Base Adjustment) Allocation of statewide employee benefits.
<input type="checkbox"/>	(Base Adjustment) Realignment within existing programs and lines.
<input type="checkbox"/>	(Base Adjustment) Restructuring of agency programs – <i>requires pre-approval.</i>
<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, Decision Package # _____
<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.

RECIPIENTS OF FUNDS

Vendors, through the SRM process.

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?

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ACCOUNTABILITY OF FUNDS

This supports the entire Accountability Report.

What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective?

POTENTIAL OFFSETS

No potential offset available.

For decision packages that request non-mandatory funding increases to programs or initiatives, please identify a potential offset within an existing lower priority or ineffective program(s).

MATCHING FUNDS

No new matching funds required.

Would these funds be matched by federal, institutional, philanthropic, or other resources? If so, identify the source, amount, and terms of the match requirement.

FUNDING ALTERNATIVES

There are no funding alternatives available.

What other possible funding sources were considered? Could this request be met in whole or in part with the use of other resources, including fund balances? If so, please comment on the sustainability of such an approach.

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SUMMARY

South Carolina Commission for the Blind is requesting additional federal spending authority to be able to fully utilize the federal funds available to our agency.

Using as much detail as necessary to make an informed decision regarding this request, provide a summary of the rationale for the decision package. Why has it been requested? How specifically would the requested funds be used? If the request is related to information security or information technology, explain its relationship to the agency's security or technology plan.

METHOD OF CALCULATION

This request is for the increase in our grant award in the two most recent years.

How was the amount of the request calculated? List the per unit or per FTE costs of implementation. What factors could cause deviations between the request and the amount that could ultimately be required in order to perform the underlying work?

FUTURE IMPACT

There will be no MOE obligations due to this package. If this request is not honored, the agency will not have sufficient authorization to use all of the federal funds available.

Will the state incur any maintenance-of-effort or other obligations by adopting this decision package? What impact will there be on future capital and/or operating budgets if this request is or is not honored? Has a source of any such funds been identified and/or obtained by your agency?

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PRIORITIZATION

If the agency runs out of federal spending authority during the year, off cycle authorization requests would be required.

If no or insufficient new funds are available in order to meet this need, how would the agency prefer to proceed? By using fund balances, generating new revenue, cutting other programs, or deferring action on this request in FY 2017-18? Please be specific.

INTENDED IMPACT

The agency needs this to be able to use all federal funds available.

What impact is this decision package intended to have on service delivery and program outcomes, and over what period of time?

**PROGRAM
EVALUATION**

SCCB will monitor the use of these funds by reviewing the numbers of consumers with blindness served, the number of consumers with blindness closed successfully rehabilitated, and by maintaining the current service delivery levels and consumer satisfaction of consumers with blindness.

How would the use of these funds be evaluated? What specific outcome or performance measures would be used to assess the effectiveness of this program?

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FORM B – PROGRAM REVISION REQUEST

DECISION PACKAGE
Provide the decision package number issued by the PBF system ("Governor's Request").

TITLE
Provide a brief, descriptive title for this request.

AMOUNT
What is the net change in requested appropriations for FY 2017-18? This amount should correspond to the decision package's total in PBF across all funding sources.

ENABLING AUTHORITY
What specific state or federal statutory, regulatory, and/or administrative authority established this program? Is this decision package prompted by the establishment of or a revision to that authority? Please avoid citing general provisions of law where possible, and instead cite to the most specific legal authority supporting the request.

- FACTORS ASSOCIATED WITH THE REQUEST**
- Mark "X" for all that apply:**
- (Base Adjustment) Allocation of statewide employee benefits.
 - (Base Adjustment) Realignment within existing programs and lines.
 - (Base Adjustment) Restructuring of agency programs – *requires pre-approval.*
 - IT Technology/Security related
 - Consulted DTO during development
 - Related to a Non-Recurring request – If so, Decision Package # _____
 - Change in cost of providing current services to existing program audience.
 - Change in case load / enrollment under existing program guidelines.
 - Non-mandated change in eligibility / enrollment for existing program.
 - Non-mandated program change in service levels or areas.
 - Proposed establishment of a new program or initiative.
 - Loss of federal or other external financial support for existing program.
 - Exhaustion of fund balances previously used to support program.

RECIPIENTS OF FUNDS
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?

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ACCOUNTABILITY OF FUNDS

Required decision package

What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective?

POTENTIAL OFFSETS

Required decision package

For decision packages that request non-mandatory funding increases to programs or initiatives, please identify a potential offset within an existing lower priority or ineffective program(s).

MATCHING FUNDS

Required decision package

Would these funds be matched by federal, institutional, philanthropic, or other resources? If so, identify the source, amount, and terms of the match requirement.

FUNDING ALTERNATIVES

Required decision package

What other possible funding sources were considered? Could this request be met in whole or in part with the use of other resources, including fund balances? If so, please comment on the sustainability of such an approach.

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SUMMARY

Required decision package to spread the pay plan allocation

Using as much detail as necessary to make an informed decision regarding this request, provide a summary of the rationale for the decision package. Why has it been requested? How specifically would the requested funds be used? If the request is related to information security or information technology, explain its relationship to the agency's security or technology plan.

METHOD OF CALCULATION

Required decision package

How was the amount of the request calculated? List the per unit or per FTE costs of implementation. What factors could cause deviations between the request and the amount that could ultimately be required in order to perform the underlying work?

FUTURE IMPACT

Required decision package

Will the state incur any maintenance-of-effort or other obligations by adopting this decision package? What impact will there be on future capital and/or operating budgets if this request is or is not honored? Has a source of any such funds been identified and/or obtained by your agency?

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PRIORITIZATION

Required decision package

If no or insufficient new funds are available in order to meet this need, how would the agency prefer to proceed? By using fund balances, generating new revenue, cutting other programs, or deferring action on this request in FY 2017-18? Please be specific.

INTENDED IMPACT

Required decision package

What impact is this decision package intended to have on service delivery and program outcomes, and over what period of time?

**PROGRAM
EVALUATION**

Required decision package

How would the use of these funds be evaluated? What specific outcome or performance measures would be used to assess the effectiveness of this program?

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FORM B – PROGRAM REVISION REQUEST

DECISION PACKAGE

Provide the decision package number issued by the PBF system ("Governor's Request").

TITLE

SCRS and PORS .5% Rate Increase Allocation

Provide a brief, descriptive title for this request.

AMOUNT

7,325

What is the net change in requested appropriations for FY 2017-18? This amount should correspond to the decision package's total in PBF across all funding sources.

ENABLING AUTHORITY

Required decision package

What specific state or federal statutory, regulatory, and/or administrative authority established this program? Is this decision package prompted by the establishment of or a revision to that authority? Please avoid citing general provisions of law where possible, and instead cite to the most specific legal authority supporting the request.

FACTORS ASSOCIATED WITH THE REQUEST

Mark "X" for all that apply:

<input checked="" type="checkbox"/>	(Base Adjustment) Allocation of statewide employee benefits.
<input type="checkbox"/>	(Base Adjustment) Realignment within existing programs and lines.
<input type="checkbox"/>	(Base Adjustment) Restructuring of agency programs – <i>requires pre-approval.</i>
<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, Decision Package # _____
<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 type="checkbox"/>	Exhaustion of fund balances previously used to support program.

RECIPIENTS OF FUNDS

Employees

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?

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ACCOUNTABILITY OF FUNDS

Required decision package

What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective?

POTENTIAL OFFSETS

Required decision package

For decision packages that request non-mandatory funding increases to programs or initiatives, please identify a potential offset within an existing lower priority or ineffective program(s).

MATCHING FUNDS

Required decision package

Would these funds be matched by federal, institutional, philanthropic, or other resources? If so, identify the source, amount, and terms of the match requirement.

FUNDING ALTERNATIVES

Required decision package

What other possible funding sources were considered? Could this request be met in whole or in part with the use of other resources, including fund balances? If so, please comment on the sustainability of such an approach.

AGENCY NAME:

SC Commission for the Blind

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SUMMARY

Required decision package to spread employee retirement increase allocation

Using as much detail as necessary to make an informed decision regarding this request, provide a summary of the rationale for the decision package. Why has it been requested? How specifically would the requested funds be used? If the request is related to information security or information technology, explain its relationship to the agency's security or technology plan.

METHOD OF CALCULATION

Required decision package

How was the amount of the request calculated? List the per unit or per FTE costs of implementation. What factors could cause deviations between the request and the amount that could ultimately be required in order to perform the underlying work?

FUTURE IMPACT

Required decision package

Will the state incur any maintenance-of-effort or other obligations by adopting this decision package? What impact will there be on future capital and/or operating budgets if this request is or is not honored? Has a source of any such funds been identified and/or obtained by your agency?

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PRIORITIZATION

Required decision package

If no or insufficient new funds are available in order to meet this need, how would the agency prefer to proceed? By using fund balances, generating new revenue, cutting other programs, or deferring action on this request in FY 2017-18? Please be specific.

INTENDED IMPACT

Required decision package

What impact is this decision package intended to have on service delivery and program outcomes, and over what period of time?

PROGRAM EVALUATION

Required decision package

How would the use of these funds be evaluated? What specific outcome or performance measures would be used to assess the effectiveness of this program?

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FORM B – PROGRAM REVISION REQUEST

DECISION PACKAGE

Provide the decision package number issued by the PBF system ("Governor's Request").

TITLE

Provide a brief, descriptive title for this request.

AMOUNT

What is the net change in requested appropriations for FY 2017-18? This amount should correspond to the decision package's total in PBF across all funding sources.

ENABLING AUTHORITY

What specific state or federal statutory, regulatory, and/or administrative authority established this program? Is this decision package prompted by the establishment of or a revision to that authority? Please avoid citing general provisions of law where possible, and instead cite to the most specific legal authority supporting the request.

FACTORS ASSOCIATED WITH THE REQUEST

Mark "X" for all that apply:	
<input checked="" type="checkbox"/>	(Base Adjustment) Allocation of statewide employee benefits.
<input type="checkbox"/>	(Base Adjustment) Realignment within existing programs and lines.
<input type="checkbox"/>	(Base Adjustment) Restructuring of agency programs – <i>requires pre-approval.</i>
<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, Decision Package # _____
<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 type="checkbox"/>	Exhaustion of fund balances previously used to support program.

RECIPIENTS OF FUNDS

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?

AGENCY NAME:	SC Commission for the Blind		
AGENCY CODE:	L240	SECTION:	39

ACCOUNTABILITY OF FUNDS

Required decision package

What specific agency objective, as outlined in the agency's accountability report, does this funding request support? How would this request advance that objective?

POTENTIAL OFFSETS

Required decision package

For decision packages that request non-mandatory funding increases to programs or initiatives, please identify a potential offset within an existing lower priority or ineffective program(s).

MATCHING FUNDS

Required decision package

Would these funds be matched by federal, institutional, philanthropic, or other resources? If so, identify the source, amount, and terms of the match requirement.

FUNDING ALTERNATIVES

Required decision package

What other possible funding sources were considered? Could this request be met in whole or in part with the use of other resources, including fund balances? If so, please comment on the sustainability of such an approach.

AGENCY NAME:

SC Commission for the Blind

AGENCY CODE:

L240

SECTION:

39

SUMMARY

Required decision package to spread health and dental insurance allocation

Using as much detail as necessary to make an informed decision regarding this request, provide a summary of the rationale for the decision package. Why has it been requested? How specifically would the requested funds be used? If the request is related to information security or information technology, explain its relationship to the agency's security or technology plan.

METHOD OF CALCULATION

Required decision package

How was the amount of the request calculated? List the per unit or per FTE costs of implementation. What factors could cause deviations between the request and the amount that could ultimately be required in order to perform the underlying work?

FUTURE IMPACT

Required decision package

Will the state incur any maintenance-of-effort or other obligations by adopting this decision package? What impact will there be on future capital and/or operating budgets if this request is or is not honored? Has a source of any such funds been identified and/or obtained by your agency?

AGENCY NAME:	SC Commission for the Blind		
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PRIORITIZATION

Required decision package

If no or insufficient new funds are available in order to meet this need, how would the agency prefer to proceed? By using fund balances, generating new revenue, cutting other programs, or deferring action on this request in FY 2017-18? Please be specific.

INTENDED IMPACT

Required decision package

What impact is this decision package intended to have on service delivery and program outcomes, and over what period of time?

**PROGRAM
EVALUATION**

Required decision package

How would the use of these funds be evaluated? What specific outcome or performance measures would be used to assess the effectiveness of this program?

AGENCY NAME:

AGENCY CODE:

SECTION:

FORM C – CAPITAL OR NON-RECURRING APPROPRIATION REQUEST

DECISION PACKAGE

Provide the decision package number issued by the PBF system ("Governor's Request").

TITLE

Provide a brief, descriptive title for this request.

AMOUNT

How much is requested for this project in FY 2017-18?

BUDGET PROGRAM

Identify the associated budget program(s) by name and budget section.

FACTORS ASSOCIATED WITH THE REQUEST

Mark "X" for all that apply:

- IT Technology/Security related
- Consulted DTO during development
- Related to a Recurring request – If so, Decision Package # _____
- Capital Request
- Included in CPIP – If so, CPIP Priority # _____
- Non-recurring request for funding
- Non-recurring request for authorization to spend existing cash/revenue

SUMMARY

Purchase a customized mobile unit to travel the state of South Carolina to provide assessments, vision screenings, testing and to allow a team to bring services to rural area consumers of South Carolina.

Provide a summary of the project and explain why it is necessary. If the request is related to information security or information technology, explain its relationship to the agency's security or technology plan.

AGENCY NAME:

AGENCY CODE:

SECTION:

CLASSIFICATION OF FUNDS

This is a non-recurring request. This is our second in priority for non-recurring requests.

Is this request in support of a capital project or is it in support of other non-recurring expenditures? If this request is for a capital project, is it included in the agency's CPIP (please include CPIP year and priority)? How does this project rank in priority to all other nonrecurring agency requests?

MATCHING FUNDS

None

Would these funds be matched by federal, institutional, philanthropic, or other resources? If so, identify the source and amount.

FUNDING ALTERNATIVES

Vocational Rehabilitation grant funds were considered, but due to grant regulations and restrictions that means that we would have to limit what consumers we are able to serve.

What other possible funding sources were considered?

LONG-TERM PLANNING AND SUSTAINABILITY

There are no funds already invested in this project. The only recurring funds needed for this project are operating funds that are already available from the individual programs.

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?

OTHER APPROVALS

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

AGENCY NAME:

AGENCY CODE:

SECTION:

FORM C – CAPITAL OR NON-RECURRING APPROPRIATION REQUEST

DECISION PACKAGE

Provide the decision package number issued by the PBF system ("Governor's Request").

TITLE

Provide a brief, descriptive title for this request.

AMOUNT

How much is requested for this project in FY 2017-18?

BUDGET PROGRAM

Identify the associated budget program(s) by name and budget section.

FACTORS ASSOCIATED WITH THE REQUEST

Mark "X" for all that apply:

<input type="checkbox"/>	IT Technology/Security related
<input type="checkbox"/>	Consulted DTO during development
<input type="checkbox"/>	Related to a Recurring request – If so, Decision Package # _____
<input type="checkbox"/>	Capital Request
<input type="checkbox"/>	Included in CPIP – If so, CPIP Priority # _____
<input checked="" type="checkbox"/>	Non-recurring request for funding
<input type="checkbox"/>	Non-recurring request for authorization to spend existing cash/revenue

SUMMARY

Customizing our case management software, AWARE, will reduce time needed for counselors and service providers to enter information. It will also provide better communication amongst providers which will allow for better service coordination for consumers. This would increase productivity and open up more hours for counselors and service providers to spend in face to face contact with consumers. Interfacing the case management software with financial software will reduce time needed to enter purchase authorizations and increase accuracy for federal and state reports as information would only need to be entered one time instead of individually into two systems as it is now. Interfacing the two programs would then allow AWARE to produce reports in a fraction of the time that is required to manually calculate information as it has to be done at this time. The overall process will increase consumer service provision, accuracy of services provided, and increase productivity in Quality Assurance, Counselor time, service provider time, and finance time and accuracy.

Provide a summary of the project and explain why it is necessary. If the request is related to information security or information technology, explain its relationship to the agency's security or technology plan.

AGENCY NAME:			
AGENCY CODE:		SECTION:	

CLASSIFICATION OF FUNDS

This is a non-recurring request. This is our most important non-recurring request.

Is this request in support of a capital project or is it in support of other non-recurring expenditures? If this request is for a capital project, is it included in the agency's CPIP (please include CPIP year and priority)? How does this project rank in priority to all other nonrecurring agency requests?

MATCHING FUNDS

None

Would these funds be matched by federal, institutional, philanthropic, or other resources? If so, identify the source and amount.

FUNDING ALTERNATIVES

None

What other possible funding sources were considered?

LONG-TERM PLANNING AND SUSTAINABILITY

There would only be the one-time cost of doing customizations and interfacing. Once complete the process of updates and maintenance would be included in our current AWARE maintenance yearly fees.

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?

OTHER APPROVALS

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

Provide the decision package number issued by the PBF system ("Governor's Request").

AGENCY NAME:			
AGENCY CODE:		SECTION:	

AGENCY NAME:

AGENCY CODE:

SECTION:

FORM E – 3% GENERAL FUND REDUCTION

DECISION PACKAGE

Provide the decision package number issued by the PBF system ("Governor's Request").

TITLE

Agency General Fund Reduction Analysis

Provide a brief, descriptive title for this request.

AMOUNT

104,956

What is the General Fund reduction amount (minimum based on the FY 2016-17 recurring appropriations)? This amount should correspond to the decision package's total in PBF.

**METHOD OF
CALCULATION**

General Fund Reduction Analysis provided by the Department of Administration.

Describe the method of calculation for determining the reduction in General Funds.

**ASSOCIATED FTE
REDUCTIONS**

None

How many FTEs would be reduced in association with this General Fund reduction?

**PROGRAM/ACTIVITY
IMPACT**

This reduction will impact the Vocational Rehabilitation program. This will be seen as a reduction in case services funds available to spend for consumer needs.

What programs or activities are supported by the General Funds identified?

AGENCY NAME:

AGENCY CODE:

SECTION:

This will be seen as a reduction in case services funds available to spend for consumer needs.

SUMMARY

Please provide a detailed summary of service delivery impact caused by a reduction in General Fund Appropriations.

10 Years of State Appropriations



Impact from Hurricane Matthew

Service delivery was delayed for approximately one month for some of our consumers, due to flooding and property damage from the storm. However, to date, we have not received requests to replace any supplies or adaptive devices/equipment.

Agency Accomplishments

1. Assisted 108 blind individuals in obtaining competitive integrated employment.
2. Initiated the Career Boost Demonstration Project providing Pre-Employment Transition Services to students with disabilities across the state.
3. The agency's Low Vision Clinic assisted over five hundred consumers, who benefitted from a variety of low vision magnification aids and devices and protective eyewear.
4. Our Older Blind Program worked with over seven hundred senior consumers during this past fiscal year, established a number of community partnerships, exceeding our goals, collaborated with the NFB to offer two camping/training opportunities for fifty individuals, and coordinated needed resources for consumers affected by the hurricane damage.
5. Several staff received certification and the establishment of Global Career Development Facilitator Certificate for our employment consultants as a part of our department credential process and retention.
6. Three Blind Licensed Vendor stands at rest stops were renovated.
7. A major challenge that was met in the past year was the creation of a new Debt Collection Policy and Procedure for the Business Enterprise program.
8. With the focus of WIOA being on the youth population and the potential of increasing employment and education success by offering specialized services at an earlier age, we also need to look at what happens prior to age 14. The Children's Services program primarily serves children ages 3 to 13 and coordinates services with schools and community organizations. The counselors in this program regularly visit preschools, daycare centers, and elementary schools to provide information about their services. This outreach has created an increase of 5% in referrals this year.

Use of funding increases received

1. We were able to continue serving all eligible adults by using the funds to backfill the federally required 15% set aside for Pre-Employment Transition Services without going on an Order of Selection
2. We directly assisted nearly forty consumers, sponsoring cataract and retinal detachment surgeries.
3. It provided us with the opportunity to promote awareness of our reinstated Prevention of Blindness Program through a statewide ad campaign. The information encouraged individuals who may be at risk of developing vision issues, due to other health concerns (high blood pressure, diabetes, etc) to have their eyes examined and also provided other important health related information.