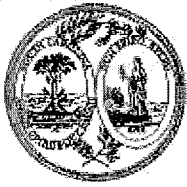


Agency Name:	School For The Deaf And The Blind		
Agency Code:	H750	Section:	6



Fiscal Year FY 2025-2026

Agency Budget Plan

FORM A - BUDGET PLAN SUMMARY

OPERATING REQUESTS (FORM B1)	For FY 2025-2026, my agency is (mark "X"):	
	<input checked="" type="checkbox"/>	Requesting General Fund Appropriations.
	<input type="checkbox"/>	Requesting Federal/Other Authorization.
	<input type="checkbox"/>	Not requesting any changes.

NON-RECURRING REQUESTS (FORM B2)	For FY 2025-2026, my agency is (mark "X"):	
	<input type="checkbox"/>	Requesting Non-Recurring Appropriations.
	<input type="checkbox"/>	Requesting Non-Recurring Federal/Other Authorization.
	<input checked="" type="checkbox"/>	Not requesting any changes.

CAPITAL REQUESTS (FORM C)	For FY 2025-2026, my agency is (mark "X"):	
	<input checked="" type="checkbox"/>	Requesting funding for Capital Projects.
	<input type="checkbox"/>	Not requesting any changes.

PROVISOS (FORM D)	For FY 2025-2026, 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:	Ben Riddle	(864) 577-7544	briddle@scsdb.org
SECONDARY CONTACT:	Scott Ramsey	(864) 577-7522	sramsey@scsdb.org

I have reviewed and approved the enclosed FY 2025-2026 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:		

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

Agency Name:	<u>School For The Deaf And The Blind</u>
Agency Code:	H750
Section:	6

<u>BUDGET REQUESTS</u>			<u>FUNDING</u>					<u>FTES</u>				
Priority	Request Type	Request Title	State	Federal	Earmarked	Restricted	Total	State	Federal	Earmarked	Restricted	Total
1	C - Capital	CLRC - Roof Repairs	1,000,000	0	0	0	1,000,000	0.00	0.00	0.00	0.00	0.00
2	C - Capital	Walker Hall Kitchen	500,000	0	0	0	500,000	0.00	0.00	0.00	0.00	0.00
3	C - Capital	HVAC - Memminger Hall, CLRC and Dobson House	1,000,000	0	0	0	1,000,000	0.00	0.00	0.00	0.00	0.00
4	B1 - Recurring	IT security and maintenance upgrades	350,000	0	0	0	350,000	0.00	0.00	0.00	0.00	0.00
TOTALS			2,850,000	0	0	0	2,850,000	0.00	0.00	0.00	0.00	0.00

Agency Name:	School For The Deaf And The Blind		
Agency Code:	H750	Section:	6

FORM B1 – RECURRING OPERATING REQUEST

AGENCY PRIORITY	4
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	IT security and maintenance upgrades
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Provide a brief, descriptive title for this request.

AMOUNT	<p>General: \$350,000</p> <p>Federal: \$0</p> <p>Other: \$0</p> <p>Total: \$350,000</p>
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What is the net change in requested appropriations for FY 2025-2026? This amount should correspond to the total for all funding sources on the Executive Summary.

NEW POSITIONS	0.00
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Please provide the total number of new positions needed for this request.

FACTORS ASSOCIATED WITH THE REQUEST	<p>Mark “X” for all that apply:</p> <table> <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 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>HR/Personnel Related</td></tr> <tr><td><input type="checkbox"/></td><td>Consulted DTO during development</td></tr> <tr><td><input type="checkbox"/></td><td>Related to a Non-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 type="checkbox"/>	Exhaustion of fund balances previously used to support program	<input checked="" type="checkbox"/>	IT Technology/Security related	<input type="checkbox"/>	HR/Personnel Related	<input type="checkbox"/>	Consulted DTO during development	<input type="checkbox"/>	Related to a Non-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"/>	HR/Personnel Related																						
<input type="checkbox"/>	Consulted DTO during development																						
<input type="checkbox"/>	Related to a Non-Recurring request – If so, Priority #																						

STATEWIDE ENTERPRISE STRATEGIC OBJECTIVES	<p>Mark “X” for primary applicable Statewide Enterprise Strategic Objective:</p> <table> <tr><td><input checked="" 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 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 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
<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										

ACCOUNTABILITY OF FUNDS	This request supports all areas of the Agency.
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What specific strategy, as outlined in the most recent Strategic Planning and Performance Measurement template of agency’s accountability report, does this funding request support? How would this request advance that strategy? How would the use of these funds be evaluated?

RECIPIENTS OF	Funds would be spent in accordance with the South Carolina Procurement Code with qualified vendors in such areas as systems maintenance, cyber security, maintenance of system data and hardware.
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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?

**JUSTIFICATION OF
REQUEST**

This request will allow SCSDB to address critical and ongoing IT security needs. These funds will be used to maintain and upgrade our firewall, protecting the overall network infrastructure, ensuring the security of student and staff devices and maintain and replace student device inventory. Given the sensitive nature of student data, the increasing prevalence of cyber threats and the reliance on technology for accessible learning, this investment is crucial to safeguard our school community and maintain a secure and effective digital learning environment.

Please thoroughly explain the request to include the justification for funds, potential offsets, matching funds, and method of calculation. Please include any explanation of impact if funds are not received. If new positions have been requested, explain why existing vacancies are not sufficient.

Agency Name:	School For The Deaf And The Blind		
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FORM C – CAPITAL REQUEST

AGENCY PRIORITY	<div>1</div> <div>Provide the Agency Priority Ranking from the Executive Summary.</div>
TITLE	<div>CLRC - Roof Repairs</div> <div>Provide a brief, descriptive title for this request.</div>
AMOUNT	<div>\$1,000,000</div> <div>How much is requested for this project in FY FY 2025-2026? This amount should correspond to the total for all funding sources on the Executive Summary.</div>
CPIP PRIORITY	<div>This request is not related to a CPIP priority. Extensive structural damage to roof trusses was discovered recently. The building is closed to students and staff as a result.</div> <div>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.</div>
OTHER APPROVALS	<div>This project was given emergency approval to proceed. A project will need to be established.</div> <div>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.)</div>
LONG-TERM PLANNING AND SUSTAINABILITY	<div>SCSDB has stared structural design work for the repairs utilizing our current state appropriations. No other requests will be made in future years.</div> <div>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?</div>
	<div>CLRC is the main Library/Media Center on campus. It is a K-12 facility that is used daily by both students and staff. It houses the offices of the Media Center staff as well as Interpreters and ASL instructors. The roof appears to have sustained major structural damage either due to natural events or design. We have closed CLRC to all activity and relocated a small amount of instructional material to another location for temporary use. This request is to fund the repairs necessary to make the facility functional again.</div>

SUMMARY

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

Agency Name:	School For The Deaf And The Blind		
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FORM C – CAPITAL REQUEST

AGENCY PRIORITY

2

Provide the Agency Priority Ranking from the Executive Summary.

TITLE

Walker Hall Kitchen

Provide a brief, descriptive title for this request.

AMOUNT

\$500,000

How much is requested for this project in FY FY 2025-2026? This amount should correspond to the total for all funding sources on the Executive Summary.

CPIP PRIORITY

This is priority 1 of 5 for plan year 2025. This project was originally included in the 2021 CPIP.

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

OTHER APPROVALS

If funds are appropriated, Admin level approval will be required to increase the budget and revise the scope of the current Campus Wide Improvements project (9552).

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

LONG-TERM PLANNING AND SUSTAINABILITY

No other funds have been invested in this project. No other request will be made in the future.

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?

This request is for the replacement of kitchen appliances and equipment at Walker Hall. Walker Hall is SCSDB's main dinning facility serving Breakfast, Lunch and Dinner 5 days a week. In addition, the kitchen at Walker Hall produces meals for the students at the Blind School and Cedar Springs Academy. The space is small, the equipment is old and much of it is no longer in use due to old age or risk. For many years we have been able to get by with repairs however these measures will only be an option for a short time longer. This facility is the heart of Campus and vital to our ability to carry out the mission of SCSDB. We are seeking these funds to add to an existing Campus Wide Improvement Project (9552).

SUMMARY

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

Agency Name:	School For The Deaf And The Blind		
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FORM C – CAPITAL REQUEST

AGENCY PRIORITY	3
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Provide the Agency Priority Ranking from the Executive Summary.

TITLE	HVAC - Memminger Hall, CLRC and Dobson House
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Provide a brief, descriptive title for this request.

AMOUNT	\$1,000,000
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How much is requested for this project in FY FY 2025-2026? This amount should correspond to the total for all funding sources on the Executive Summary.

CPIP PRIORITY	This project is priority 2 of five for plan year 2025. This project was originally included in the 2021 CPIP. If state funding is not available this year we will continue to perform short term maintenance options.
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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.

OTHER APPROVALS	If funds are appropriated for this request it will require admin level approval to increase the budget of project 9553 and revise the scope to include CLRC, Memminger Hall and Dobson House.
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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.)

LONG-TERM PLANNING AND SUSTAINABILITY	No other funds have been invested into the replacement of these units. State funds have been spent to maintain and repair each. Should this request be funded, no future requests will be made.
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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?

	We are seeking additional funds to include the replacement of HVAC units located at Memminger Hall, CLRC Media Center and the Dobson House to our existing Campus wide HVAC project (9553). This project was established to upgrade aging HVAC units throughout campus. Memminger Hall is the location of the Deaf School. This unit is well past its expected life cycle and has been kept running with repair after repair. CLRC is the main Media Center. The HVAC unit here is 25+ years old and in similar condition of others on campus that have either been replaced or are in the process of replacement. The Dobson House is the residence of SCSDB President's and their families. The unit at this location is older and is the cause of moisture issues that have lead to mold as well as other maintenance issues.
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SUMMARY

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

Agency Name:	School For The Deaf And The Blind		
Agency Code:	H750	Section:	6

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

TITLE	Agency Cost Savings and General Fund Reduction Contingency Plan
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AMOUNT	\$573,155
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What is the General Fund 3% reduction amount? This amount should correspond to the reduction spreadsheet prepared by EBO.

ASSOCIATED FTE REDUCTIONS	None
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How many FTEs would be reduced in association with this General Fund reduction?

PROGRAM / ACTIVITY IMPACT	<p>The operating budget from the general fund will be reduced. The reduction will be realized by each division/department.</p>
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What programs or activities are supported by the General Funds identified?

SUMMARY	<p>SCSDB will reduce its overall operating budget by 573,155 to cover a 3% general fund reduction if necessary.</p>
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AGENCY COST SAVINGS PLANS

Should the need arise, SCSDDB will implement an across the board 3% reduction in operating expenditures by reducing operating budgets in each division. Upon implementation, expenditures will be reviewed to ensure funds are being spent on essential needs corresponding to the agency's goals and objectives outlined in the accountability report.

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?