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Henry McMaster Governor

William H. Floyd, III Executive Director

STATE INSTRUCTION NUMBER 25-04

To: Local Workforce Area Signatory Officials

Local Workforce Area Board Chairs Local Workforce Area Administrators

DEW Area Directors DEW Regional Managers DEW Program Managers

Subject: Physical Security Requirements in SC Works Centers

Issuance Date: November 21, 2025

Effective Date: Immediately

<u>Purpose</u>: To establish the minimum physical security standards, procedures, and training requirements in SC Works centers.

References:

- Workforce Innovations and Opportunity Act, Public Law 113-128
- 20 CFR §§ 678.300 678.315
- South Carolina Code of Laws, Title 40, Chapter 18
- State Instructions 24-01 and 24-07
- Best Practices for Planning and Managing Physical Security Resources: An Interagency Security Committee Guide

<u>Background</u>: The Department of Employment and Workforce (DEW) is committed to the safety and security of all staff, partners, and customers in the SC Works centers across South Carolina. DEW encourages all employees to exhibit a courteous, professional manner in dealing with the public; however, disruptive, violent, or destructive behavior will not be tolerated, and employees should not jeopardize their safety or the safety of others in dealing with such behavior.

Physical security is an essential part of ensuring that SC Works centers remain welcoming and productive places for workforce services. Prevention of any situation that would compromise

State Instruction 25-04 Physical Security Requirements in SC Works Centers November 21, 2025 Page 2 of 5

physical safety and security is to be prioritized, followed by arrest and prosecution, should an incident occur.

The following terms will be used to define the physical security standards in the SC Works centers:

- Security Equipment: Physical items, such as cameras, alarms, and panic buttons, that support security operations and have a useful life exceeding one year
- Security System: The integrated combination of security equipment, security personnel, and procedures that collectively maintain the security level of each SC Works center

<u>Policy</u>: Local Workforce Development Areas (LWDAs) must adhere to the requirements outlined in this state instruction to establish and implement physical security standards in all SC Works Comprehensive and Affiliate centers. Local Workforce Development Boards (LWDBs), during the process of selecting and establishing new centers, must ensure that the center is able to meet the security requirements set forth in this state instruction.

Center Security

SC Works Comprehensive Centers

All comprehensive centers must schedule an armed security guard at the point of entry during the hours of public accessibility. Armed security guards are trained and licensed professionals responsible for protecting people, property, and assets by use of force, firearm, or other weapons when necessary. The role of an armed security guard includes, but is not limited to, the following responsibilities:

- Deterrence: The presence of an armed guard can deter potential criminals or troublemakers from engaging in unlawful activities.
- Access Control: Armed guards monitor entrances and exits, ensuring the safety of those within the centers.
- Emergency Response: In the event of a security breach, an armed guard may be required to respond quickly to protect people and property.
- Crisis Management: Armed guards are trained to handle crisis situations to minimize harm and maintain order.
- Report Writing: Documentation of security incidents and activities is a crucial part of an armed security guard's duties, as it may be used as evidence or for future reference.

NOTE: Security guards are NOT to be repurposed to assist in administrative tasks or any other office duty for the center. They must remain in their assigned area of responsibility to maintain and enforce physical security in the center.

State Instruction 25-04 Physical Security Requirements in SC Works Centers November 21, 2025 Page 3 of 5

Armed security in the SC Works comprehensive centers does not negate or diminish the need for other/additional security measures identified at the direction of the LWDBs.

SC Works Affiliate Centers

At a minimum, all affiliate centers must have an instant notification process to which all SC Works center staff have access. This process is to conduct emergency communication in the event of a safety incident, such as a panic button or text notification to law enforcement/security personnel.

LWDAs can determine if they believe it is necessary to have additional security measures above and beyond the minimum requirements for Comprehensive and Affiliate Centers, based on factors including, but not limited to:

- Foot traffic, both for unique users and return customers
- Location of the center
- Crime rates in the area
- Number of days the center is open
- Any past incidents that compromised the physical security of the center
- Emergent situations, such as natural disasters
- Availability of law enforcement
- Terms of the property lease and applicable state and local laws and ordinances

Roles and Responsibilities

Local Boards. LWDBs are responsible for securing a licensed, bonded, and insured vendor for armed security, in which they must follow local procurement procedures. LWDBs must conduct a full physical security evaluation at least once every three years in line with the SC Works Certification Standards. Beginning Program Year 2026, a review of the security system must be conducted at least annually through the LWDA Physical Security Attestation Form (attached) sent to workforceSupport@dew.sc.gov by June 30th of the program year.

Center Operators. Center Operators must maintain the center security system and at least annually ensure all security equipment functions properly. Training on when and how to use the instant notification process—required in Affiliate Centers—must be conducted <u>at least annually</u> for all existing and new staff.

Security Incident Report. The Center Operator must be notified as soon as practical when an incident occurs and are responsible for writing the Security Incident Report (attached). The Center Operator must notify the Regional Manager of the incident and determine how to proceed. If the Center Operator is not available, the Regional Manager is responsible for writing the Security Incident Report. All reports must be filled out and emailed as soon as possible and no later than 24 hours after the date of the incident to IncidentReport@dew.sc.gov and copied to the

State Instruction 25-04 Physical Security Requirements in SC Works Centers November 21, 2025 Page 4 of 5

appropriate partner agency manager if partner staff are involved. In emergency situations, SC Works center staff are expected to take reasonable action to protect life and property, relying heavily on the recommendations of local law enforcement authorities. When an incident occurs, all staff in the center at the time of the incident are responsible to liaise with law enforcement.

Security Training

LWDAs must conduct training in both SC Works Comprehensive and Affiliate Centers on security situations at least annually for all new and existing DEW staff and SC Works center staff and partners. The training should include, but is not limited to, the following:

- Procedures to address disorderly conduct
- Preventing and managing aggressive behavior
- Laws governing behavior on public property
- Fire safety procedures
- Bomb threat procedures
- Procedures for handling injuries to clients
- Threatening telephone calls or in-person situations
- Guidance for handling crisis situations, such as:
 - Active shooter event
 - Response to mental health situations
 - Response to emergency medical situations
- De-escalation techniques
- Guidance for handling situations with youth individuals

Monitoring

DEW's Office of Internal Audit conducts routine monitoring, using the expectations outlined in this policy to determine the security standards of the SC Works centers.

<u>Action</u>: Please ensure that all appropriate staff receive and understand this policy.

<u>Inquiries</u>: Questions may be directed to <u>WorkforcePolicy@dew.sc.gov</u>.

Nina Staggers, Assistant Executive Director Workforce Development Division

Diana Goldwire, Assistant Executive Director Employment Services Division

State Instruction 25-04 Physical Security Requirements in SC Works Centers November 21, 2025 Page 5 of 5

Attachments

- LWDA Physical Security Attestation
- Security Incident Report Form

Physical Security in SC Works Centers

LWDA Self-Attestation of Physical Security

| LWDA: Click or tap here to enter text. | | |
|---|---|--|
| Authorized Representative: Click or tap here to enter text. | Title: Click or tap here to enter text. | |
| Phone: Click or tap here to enter text. Extension: Click or tap here to enter | Email: Click or tap here to enter text. | |

Physical Security Standards Definitions

LWDBs are required to review the security system at least annually. As stated in State Instruction 25-04, *Physical Security Requirements in SC Works Centers*, a security system is defined as the integrated combination of security equipment, security personnel, and procedures that collectively maintain the security level of each SC Works center. Use the following table to document the annual review, noting the date of review, the name of the reviewer, any issues identified during the review, and the action taken to resolve the stated issue. **Please write "N/A" if no issues are found.**

| Center | Review Date | Reviewer | Any Issues Identified | Action Taken to Resolve Issues |
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Attestation

I, Click or tap here to enter text., Authorized Representative for Click or tap here to enter text., attest that the comprehensive and affiliate SC Works centers in the LWDA, Click or tap here to enter text., adhere to the requirements outlined in State Instruction 25-04.

I understand that all comprehensive centers must schedule an armed security guard at the point of entry during the hours of public accessibility. I understand that armed security guards are trained and licensed professionals responsible for protecting people, property, and assets by use of force, firearm, or other weapons when necessary. I understand that security guards must not be repurposed for administrative or other office duties.

I also understand that, at a minimum, all affiliate centers must have an instant notification process to which all SC Works center staff have access.

| Signature: | Title: Click or tap here to enter text. |
|--|---|
| Print Name: Click or tap here to enter text. | Date: Click or tap to enter a date. |

SECURITY INCIDENT REPORT

Instructions: The Center Operator or Regional Manager must complete this form when an incident occurs in the SC Works center. This form must be filled out and submitted as soon as possible, but no later than 24 hours after the date of the incident, by email to lncidentReport@dew.sc.gov and copied to the appropriate partner agency manager if partner staff is involved. If additional space is needed, please attach a separate sheet of paper.

Incident Information

| DATE | TIME | LOCATION | | | COST CENTER (if applicable) |
|--|----------------------------|--------------------|--------------------------------------|-----------------|-------------------------------------|
| | | | | | |
| NAME | | | CIRCLE ONE: Employee | Custo | mer Vendor |
| | | | Visitor | Partner | Other |
| NAME OF PARENT/GUARDIA | N (IF MINOR) | | DATE OF BIRTH | | PHONE NUMBER |
| | | | | | |
| ADDRESS | | | EMAIL ADDRESS | | |
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| LIST TYPE OF INCIDENT OR II | NJURY, DESCRIBING AS MA | NY DETAILS AS P | DSSIBLE (use addition | nal pages if ne | ecessary) |
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| WAS THE INCIDENT ALCOHO | L OR DRUG RELATED? (circ | le one) | YES | | NO |
| DESCRIBE BODY PART(S) AFF | ECTED, IF APPLICABLE. INC | LUDE DESCRIPTION | I ON OF INJURY BY INJ | URED PARTY (| (use additional pages if necessary) |
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| DID THE INJURED PARTY REF | USE TO GIVE A STATEMENT | T? (circle one) | YES | | NO |
| DID THE INDIVIDUAL | | · · · | ME AND ADDRESS | | |
| MEDICAL TREATMENT? (circ | • | L PROVIDERS NA | VIE AND ADDRESS | | |
| YES NO | | | | | |
| | | | | 1 | |
| WAS LAW ENFORCEMENT NOTIFIED? (circle one) | YES | NO | WAS HOUSEKEEPII NOTIFIED? (circle of | | YES NO |
| HOW WAS THE INCIDENT RE | SOLVED? (use additional pa | ages if necessary) | ` | , | |
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Witness Information

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| WITNESS STATEMENT | | | | |
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| WITNESS REFUSES TO GIVE STATE | MENT (circle one) | YES | NO | |
| COMPLETED BY | | DATE | | |
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| | Witness Ir | nformation | | |
| NAME | ADDRESS | | PHONE NUMBER | |
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| CAUSE OF INCIDENT ACCORDING | TO WITNESS | IS WITNESS RELATED TO AN INJUR | RED PARTY? EXPLAIN | |
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| COMPLETED BY | | DATE | | |
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