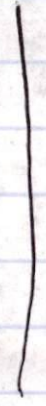


Supplemental Designation
of Matter on
Appeal
Cover

1. (Exhibit B1) Pennsylvania Bureau of Disability Determination, Clinical Psychological Disability Evaluation (nine) pages
2. (Exhibit P1) York County Clerk of Court office Letter dated November 5, 2025, case no: 2025-CP46-04348) notice: "This case has been sealed pursuant to 30-9-30 s.c. code ann) (one) page
3. S.C.D.C. Policy OP-21.04. Sec. 28.4.6. and Sec. 28.4.9. (one) page (Exh B18)

Index

(Exh B1)	p. 15, -23,
(Exh P1)	p. 25,
SCDC policy (Exh B18)	p. 24,



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B-1

LIST OF EXHIBITS

16

Claimant: Ben Robert Stewart, III SSN: 4959

Wage Earner: Ben R Stewart Xref SSN: 5464

Exh. Part No. No.	Description	No. of Pages
----------------------	-------------	-----------------

MEDICAL RECORDS

- | | | | |
|---|---|---|----|
| 1 | F | Development Summary Worksheets | 4 |
| | F | Letter from The Children's Hospital of Philadelphia dated December 1, 2005, stating patient last seen in 1994, no records since that date | 1 |
| 3 | F | Consultative (Clinical Psychological) Examination with Medical Source Statement dated January 19, 2006 by Charles Johnson, PSY.D., with professional qualifications | 7 |
| 4 | F | RFC - Residual Functional Capacity Assessment - Mental dated January 24, 2006 | 3 |
| 5 | F | Psychiatric Review Technique Form dated January 24, 2006 | 13 |



PENNSYLVANIA BUREAU OF DISABILITY DETERMINATION
264 Highland Park Blvd., Wilkes-Barre, PA 18703
TRANSCRIPTION OF TELERECORDED MESSAGE

CHARLES JOHNSON, PSY.D.
44TH ST.
PHILA, PA 19104

ADJUDICATOR: J. SAITA

RE: STEWART, BEN

SSN: 4959

PHONE: -----

DATE: 01/20/2006

REPORT NUMBER: 698688

TDN#:



CLINICAL PSYCHOLOGICAL DISABILITY EVALUATION

BEHAVIOR OBSERVATION:

Ben Stewart is a 19-year-old, African-American male who was punctual for his appointment. He arrived by a car with his mother. He was the sole source of the information derived from this evaluation. His reporting reliability would be judged as adequate. Authorization document indicates a disability claim of dyslexia and bipolar disorder.

PRESENTING COMPLAINTS:

Ben stated that, "It's hard to remember, anger - I have a quick temper, I find myself being bored all the time, and I can't sleep." His mother added that Ben tends to walk "all the time, has plenty of energy."

Ben indicated that he has been experiencing the above for the past five years since around the age of 10. As a result of this condition, he claims, "I forget things - things that I'm told to do." Note: He indicates that he at times does feel hyper, tending to pace and pacing around the room.

SUBSTANCE USE HISTORY:

Ben indicated he began drinking alcohol at the age of 18 with "occasional use," e.g. on holidays. He last had four-five shots on New Year's Eve. He did experiment with marijuana at the age of 16, but claimed that he has not used any marijuana since that age.

(18)

PSYCHOSOCIAL HISTORY:

Ben was born and reared in Philadelphia. His biological father died in 2003 from emphysema. He has 10 half brothers and sisters. He is currently in the twelfth grade, attending Bartram High School, special education program. He did work part time for Pathmark during the summer in 2004; however, he quit after working one month, stating he did not like the job. He feels that he can work sometimes, other times he feels "it's too hard." He is currently living with his mother and stepfather.

MEDICAL/PSYCHIATRIC HISTORY:

Ben indicated that he sustained an injury to his left ear as a result of being bitten by a dog at the age of 4. In addition, he was hit by a car and sustained injury to his teeth, again at the age of 4.

Ben has received psychiatric treatment at CHOP (Children's Hospital of Philadelphia) around the age of 10 for behavioral problems and for "forgetfulness." He received a psychiatric treatment at the JFK Mental Health Clinic, beginning in August 2005. He was receiving help with his anger.

MEDICATIONS:

Ben was prescribed Ritalin but was discontinued, and switched, apparently to albuterol with notable therapeutic benefit; however, he discontinued the medication and attending JFK in December 2005.

MEDICAL ISSUES:

Ben disclaimed having any medical conditions or concerns at this time.

MENTAL STATUS EXAMINATION:

Ben is an average-built male of casual dress, who appeared his stated age. Psychomotor movements were unremarkable. Speech was clear and comprehensible with eye contact. Mood and affect was subdued. Note: He denied feeling depressed but acknowledged feeling bored. He complained of difficulty sleeping with a tendency to average five-six hours a night. He eats once or twice a day, although it is mainly "junk food." Auditory and visual hallucinations were denied. Thought processes were logical and coherent. Thought content was devoid

(19)

of suicidal ideation and delusional themes. Paranoia was acclaimed, e.g., "I feel that people are looking at me." Abstraction of relevant concepts was fair, e.g., he was able to associate the similarity between an orange and a banana, a dog and a lion, and a table and a chair. Attention span and concentration were marginal. He was able to recall four digits forward and three digits backwards. Arithmetic computation was fair, e.g., he was able to subtract \$7.50 from \$18 correctly.

Ben was oriented to time, place and person. Memory for recent, recent past and remote events was intact, e.g., he was able to recall yesterday's dinner in addition to the event of his last birthday in November. Tested social judgment was fair, e.g., he indicated that he would give a stamped, sealed envelope lying on a sidewalk to a mailman and that he would tell someone who worked in a theater in the event that a fire occurred. Impulse control was marginal. Insight was fair.

TYPICAL DAILY FUNCTIONING:

Ben indicated that he spends his day listening to music and doing school homework. He occasionally visits a friend but usually just sits around the house. Note: He does attend school on a daily basis. He does participate in routine housekeeping task, e.g., taking out the trash, washing the dishes and sweeping the floors, although his mother stated that she needs to remind him of these tasks. He is attentive to normal hazards and precautions in routine travel. He can and does utilize public transportation unaccompanied. He feels he can make his own decisions without assistance.

MULTIAXIAL DIAGNOSES:

AXIS I: Cyclothymic Disorder.
Bipolar Disorder, NOS (provisional).
AXIS II: No diagnosis.
AXIS III: No medical condition known.


PROGNOSIS:

Ben presents a guarded prognosis with respects to pursuing psychiatric treatment in the future.

CAPABILITY:

Ben would be expected to require some assistance in a reasonable management of his own funds.

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CHARLES JOHNSON, PSY.D.

CYMED/698688

"THIS TRANSCRIPTION WAS MADE FROM THE RECORDING OF THE VOICE OF CHARLES JOHNSON, PSY.D.-A COPY OF THIS REPORT HAS BEEN SENT TO THE DOCTOR FOR REVIEW AND SIGNATURE."

Dear Doctor:

Thank you for promptly telerecording the preceding medical report. The transcription has been included as evidence in this applicant's disability claim.

Enclosed you will find two (2) copies of transcription. Please review the material and make any necessary revisions on the copies. An amended copy will be sent to you if there are substantial revisions.

Please sign and return one copy WITHIN THREE DAYS; payment of this report will be delayed until we receive your signed copy. The other copy is for your files.

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(1) Is ability to understand, remember, and carry out instructions affected by the impairment? No ✓ Yes
 If "no", go to question #2. If "yes", please check the appropriate block to describe the individual's restriction for the following work-related mental activities.

	None	Slight	Moderate	Marked	Extreme
Understand and remember short, simple instructions.	✓	_____	_____	_____	_____
Carry out short, simple instructions.	✓	_____	_____	_____	_____
Understand and remember detailed instructions.	_____	✓	_____	_____	_____
Carry out detailed instructions.	_____	✓	_____	_____	_____
Make judgments on simple work-related decisions.	_____	_____	✓	_____	_____

What medical/clinical finding(s) support this assessment?

Clinical Interview
Mental Status Exam (Number Recall, Similarities, Soc Judgment, Arith)

(2) Is the ability to respond appropriately to supervision, co-workers, and work pressures in a work setting affected by the impairment? No ✓ Yes
 If "no", go to question #3. If "yes", please check the appropriate block to describe the individual's restriction for the following work-related mental activities.

	None	Slight	Moderate	Marked	Extreme
Interact appropriately with the public.	✓	_____	_____	_____	_____
Interact appropriately with supervisor(s).	_____	_____	✓	_____	_____
Interact appropriately with co-workers.	_____	✓	_____	_____	_____
Respond appropriately to work pressures in a usual work setting.	_____	_____	✓	_____	_____
Respond appropriately to changes in a routine work setting.	_____	_____	✓	_____	_____

What medical/clinical finding(s) support this assessment?

Clinical Interview



1/24/06
 JSM

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(3) Are any other capabilities affected by the impairment? No Yes
If "yes", please identify the capability and describe how it is affected.

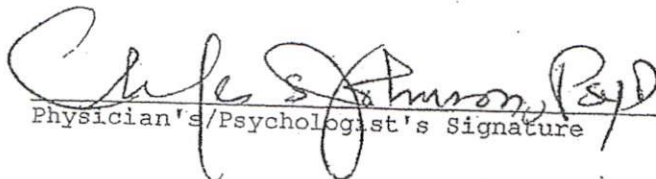
Capability	Effect
_____	_____
_____	_____
_____	_____

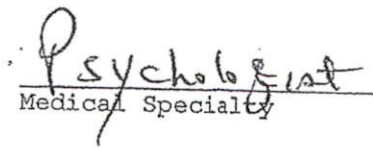
What medical/clinical findings support this assessment?

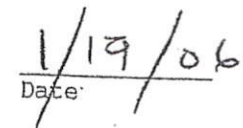
(4) If the claimant's impairment(s) include alcohol and/or substance abuse, do these impairments contribute to any of the claimant's limitations as set forth above? If so, please list the specific limitations caused.

(5) If you have concluded that the medical record indicates that the claimant's alcohol and/or substance use/abuse contributes to any limitations as set forth above, please identify and explain what changes you would make to your answers if the claimant was totally abstinent from alcohol and/or substance use/abuse.

(6) Can the individual manage benefits in his/her own best interest?
 No Yes


 Physician's/Psychologist's Signature


 Medical Specialty


 Date



6

PROFESSIONAL QUALIFICATIONS

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1. Name:

Charles S. Johnson, PSYD
First/Middle/Last

Address:

Spruce Street

Philadelphia, PA 19104

Cannot be found in: (circle # of book searched)

1. American Medical Association 36th Edition - CD Rom
2. Directory of American Psychological Association 1997 Edition
3. American Osteopathic Yearbook and Directory 200/01

prejudice, and any detainer based thereon will cease to be of any force or effect. The CC Program Coordinator will send a letter requesting resolution documentation to the prosecuting attorney, and will remove and return the detainer once this information is received from the prosecuting attorney.

- 28.4.3 At the earliest possible time after trial and sentencing are completed in the receiving state, the inmate must be returned to the custody of officials in the sending state and notified of the disposition of the charges.
- 28.4.4 **Escape from Custody:** An inmate's request for final disposition will become void when an inmate escapes from the sending state's custody before transfer.
- 28.4.5 **Tolling of Prisoner's Earned Work Credit (EWC)/Earned Educational Credit (EEC):** An inmate's time of imprisonment will continue to run while the inmate is subject to temporary custody of the receiving state. The inmate will continue to earn good time (GT) but will not earn earned work credits and/or earned educational credit.
- 28.4.6 **Other Claims:** An inmate may be prosecuted in the receiving state only for charges upon which the detainer is based. Crimes for which no detainer has been lodged may not be prosecuted while inmate is in temporary custody.
- 28.4.7 **Costs:** The costs of transportation and housing an inmate who is transferred under the IAD will be borne by the receiving state.
- 28.4.8 **Tolling of Time Periods for Trial:** When an inmate is able to stand trial, there will be 180 day time limit (inmate request) and 120 day time limit (prosecutor request). This toll will begin when the prosecutor for the receiving state receives all paperwork.
- 28.4.9 **Mental Illness:** An inmate who is medically determined to be mentally ill cannot be transferred under the IAD. The inmate's CONVICT screen should be reviewed for Guilty but Mentally Ill (GBMI) finding.

29. OTHER JURISDICTION INMATES:

29.1 Other Jurisdiction (OJ) refers to an inmate that has either a concurrent or consecutive South Carolina (SC) sentence and is currently incarcerated in the other jurisdiction serving another state or federal sentence.

29.2 The *Reception and Evaluation Center (R&E)* receives commitment orders from the Solicitors, County Clerks of Clerk, parole/probation revocations from the S.C. Department of Probation, Parole and Pardon Services, or from other jurisdiction facilities where an inmate is incarcerated. The S.C. sentence must be 91 days or more.

29.3 All YOA Parole Revocations on inmates in OJ status are forwarded to the *Division of Young Offender Parole And Reentry Services (YOPRS) Manager of Administrative Services*, S.C. Department of Corrections (SCDC), to determine the length of time left to serve on the YOA sentence and if a detainer is required. The *Division of Young Offender Parole And Reentry Services (YOPRS) Manager Regional Reentry Coordinator* will then advise the *Administrative Review Coordinator* to process the YOA inmate within the OJ guidelines.

29.4 It is the responsibility of the *R&E* to process the commitment order(s) and generate a criminal history rap sheet, and to determine if the inmate is to be assigned his/her previous SCDC inmate number. The *R&E Records Section* will indicate, on the Offender Management Screen (OMS), all appropriate information to include the SCDC inmate number, commitment information, and location. The OJ Program Coordinator is responsible for sending a letter to the S.C. Law Enforcement Division (SLED), listing pertinent information on the OJ inmate, so that SLED can update the inmate's criminal history rap sheet.

29.5 Upon completion of the above, it is the responsibility of the *Division of Young Offender Parole And Reentry Services (YOPRS) Manager Administrative Review Coordinator* to process and forward to the OJ

Exhibit
B-18

29



CLERK OF COURT'S OFFICE

Post Office Box 649, York, South Carolina 29745-0649

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November 5, 2025

Zachary Jones
Office of the Attorney General
PCR Section
P. O. Box 11549
Columbia, SC 29211-1549

RE: Post-Conviction Relief – Ben Robert Stewart #223006
2025CP4604348

Dear Mr. Jones,

Please find enclosed a post-conviction relief application for the above named applicant. Pursuant to a memorandum issued by Chief Justice Toal dated January 12, 2004 the Clerk's office is not to appoint an attorney until directed to do so by the Office of the Attorney General. This case has been sealed so we are unable to provide a copy of the warrant.

*Clerk of Court's Office
Civil Division*

Cc: Kevin Brackett, Solicitor
Ben Robert Stewart, #223006