

**REPORT OF THE
GOVERNMENT OPERATIONS AND AUDIT COMMITTEE
2023**

COMMITTEE MEMBERS

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Representative Ernie Otten, Vice Chair**

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Representative Drew Peterson
Representative Tim Reisch
Representative Linda Duba**

**Senator David Wheeler
Senator Jean Hunhoff
Senator Tim Reed
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Committee Responsibilities

The Government Operations and Audit Committee was established by South Dakota Codified Law (SDCL) 2-6-2. The Committee is appointed at each regular session of the Legislature. The Committee consists of ten members, five members from the Senate appointed by the President Pro Tempore of the Senate, one of whom shall be a member of the Judiciary Committee and five members from the House appointed by the Speaker of the House, one of whom shall be a member of the Judiciary Committee.

The responsibilities of the Committee are:

- To inquire and review any phase of the operations and the fiscal affairs of any department, institution, board, or agency of the State.
- To examine records and vouchers, summon witnesses, examine expenditures and the general management of departments, as deemed necessary.
- Develop and implement a performance management review process to evaluate the efficiency and effectiveness of State agencies.
- Review limitations on use relating to the University Centers off-campus sites in Pierre, Rapid City, and Sioux Falls and make recommendations to the Legislature regarding these limitations.
- To make a detailed report to the Senate and House of Representatives and submit a copy of its report to the Appropriations Committee of each House of the Legislature at the next succeeding session of the Legislature or any special session of the Legislature upon request of the body.
- To review the following annual reports:
 - Single Audit Report of the State of South Dakota
 - South Dakota 911 Coordination Board
 - South Dakota State Brand Board
 - South Dakota High School Activities Association
 - Obligation Recovery Center
 - Accountability report from the Board of Technical Education
 - Annual reports from each Department administering funds received from the Building South Dakota program
 - Department of Corrections' annual report on abuse and neglect in private placement facilities

- Annual report from juvenile monitor on complaints related to the care provided to youth in the custody or care of certain treatment centers, shelter care facilities or programs
- Habitat Stamp Expenditure Report from Game, Fish and Parks
- Report of compiled authorizations to derive a direct benefit from a contract, as collected by the Bureau of Human Resources
- Report of compiled authorizations to derive a direct benefit from a State authority, board, or commission contract, as collected by the Auditor General
- Report and annual work plan of the State Board of Internal Control

Committee Activity

Performance Reports

Senate Bill 120, 2017 session, assigned the Government Operations and Audit Committee the responsibility to develop and implement a performance management review process. The process is a collaborative effort between the agencies and the Committee. When agencies appear every three years, it is an opportunity for the Committee to revise, add, delete, or accept as is existing agency performance measures. The agency has the mission or vision for the Department as well as the data to track progress and the Committee provides feedback for establishing key performance measures. House Bill 1110, 2020 session, instructed the Government Operations and Audit Committee to develop and provide to each State agency a standardized, uniform template that, beginning January 1, 2021, each agency is to use when presenting information to the Committee. Six agencies appeared before the Committee and with feedback from the Committee developed the following performance measures.

Bureau of Information and Telecommunications

The Commissioner of the Bureau of Information and Telecommunications (BIT) explained their mission is to strive to be partners and technology leaders who enable innovative, secure, and efficient services for our citizens. The Commissioner described goal one to provide a reliable, secure, and modern infrastructure. To ensure success the BIT identified the following measures:

- Average uptime per month/year
- SD.net live delivery hours
- State employee email assessment annual failure rate
- Payment Card Industry (PCI) standard annual average score
- Meet internal security patch goals

The Commissioner described goal two to deliver valuable services at economical costs. To ensure success the BIT identified the following measures:

- Planned vs. unplanned work for development
- Service desk meets service-level agreements
- Satisfactory/neutral customer overall ratings after service desk experience
- Move analog phone lines to VOIP

The Deputy Commissioner described goal three to build and retain a highly skilled workforce. To ensure success the BIT identified the following measures:

- Annual staff turnover rate
- Employee engagement

The Committee approved the performance metrics.

Department of Revenue

The Secretary of the Department of Revenue (DOR) explained their mission is to serve South Dakota to provide fair, efficient, and reliable revenue administration with our partners to help fund public service statewide. The Secretary described goal one to provide consistent service to every customer, every time, and be adaptable with our customer service methods. To ensure success the following activities were identified:

- Activity A – Provide timely service and response to customer
- Activity B – Employ, train, and retain qualified staff
- Activity C – Provide service channel options to meet customer needs

The Department's second goal is to ensure that all DOR stakeholders understand the laws and regulations through education efforts. To ensure success the following activity was identified:

- Activity A – Business partner outreach and education

The Department's third goal is to provide critical funding for state and local governments through compliance and efficiency. To ensure success the following activities were identified:

- Activity A – Compliance efforts
- Activity B – Funding improvement or measurement

The Committee approved the performance metrics.

Bureau of Human Resources

The Commissioner of the Bureau of Human Resources explained their mission is to build, develop, and support a high-performing and healthy workforce. The Commissioner described goal one to promote employee wellbeing. To ensure success the following activities were identified:

- Activity A – Understand the employee’s health
- Activity B – Enhance the employee’s health and knowledge through tools and programs

The Bureau’s second goal is effective recruiting. To ensure success the following activities were identified:

- Activity A – Participating in active recruitment activities
- Activity B – Improving selection

The Bureau’s third goal is to develop and retain employees. To ensure success the following activities were identified:

- Activity A – Building better leaders
- Activity B – Developing employee skills
- Activity C – Promotions and career development

The Committee approved the performance metrics.

Department of Health

The Secretary of the Department of Health explained their mission is working together to promote, protect, and improve health. The Department’s first goal is healthy beginnings. To ensure success the following activities were identified:

- Activity A – Pediatric obesity rate
- Activity B – Childhood immunization rates

The Department’s second goal is maternal and child health. To ensure success the following activities were identified:

- Activity A – Infant mortality
- Activity B – Maternal mortality
- Activity C – Breastfeeding

The Department's third goal is injury harm prevention. To ensure success the following activities were identified:

- Activity A – Suicide deaths
- Activity B – Unintentional overdoses

The Department's fourth goal is access to care. To ensure success the following activities were identified:

- Activity A – Average scene time for ground EMS agencies
- Activity B – Healthcare professional licensees

The Committee noted a correction to be made to a status box in goal four and approved the Department's performance measures contingent upon fixing that error.

Department of Social Services

The Secretary of the Department of Social Services described their mission as dedicated to strengthening families to foster health, wellbeing, and independence. The Department's first goal is to ensure access to services for our customers. To ensure success the following objectives were identified:

- Objective A – Enhance opportunities to access services
- Objective B – Services and programs are needs driven, customer responsive and culturally relevant

The Department's second goal is to promote and support the health, wellbeing and safety of our customers. To ensure success the following objectives were identified:

- Objective A – Reduce risk factors and enhance protective capacities
- Objective B – Protect individuals from abuse, neglect and exploitation
- Objective C – Provide effective services to individuals who have been abused, neglected and exploited

The Department's third goal is to foster partnerships to maximize resources for our customers. To ensure success the following objective was identified:

- Objective A – Encourage and support partnerships to provide cost effective services

The Department's fourth goal is to support customers in achieving meaningful outcomes. To ensure success the following objective was identified:

- Objective A – Ensure the Department helps individuals and families achieve meaningful outcomes

The Department's fifth goal is to strengthen and align our team to accomplish our mission. To ensure success the following objective was identified:

- Objective A – Enhance recruitment and retention efforts that results in a workforce that possesses the values and competencies necessary to accomplish the Department's mission

The Committee approved the performance metrics.

Department of Labor and Regulation

The Secretary of the Department of Labor and Regulation (DLR) explained their mission is to promote economic opportunity and financial security for individuals and businesses through quality, responsive, and expert services; fair and equitable employment solutions; and safe and sound business practices. The Secretary described goal one to deliver quality, responsive, and excellent services. To ensure success the following activities were identified:

- Activity A – Deliver services efficiently
- Activity B – Deliver services satisfactorily

The Department's second goal is to achieve a skilled workforce contributing to economic development by serving businesses, job seekers, and community partners. To ensure success the following activities were identified:

- Activity A – Partner with the Department of Education to implement a regional model of career advising and work-based learning opportunities for students
- Activity B – Build the skillset of South Dakota residents to meet business' workforce needs
- Activity C – Connect businesses to untapped labor pools

The Department's third goal is to ensure safe and sound business environments and practices. To ensure success the following activities were identified:

- Activity A – Provide regulatory and supervision oversight
- Activity B – Ensure compliance with federal and state regulations and laws

The Department's fourth goal is to develop a sustainable, skilled Department of Labor and Regulation workforce. To ensure success the following activities were identified:

- Activity A – Recruit and retain qualified candidates
- Activity B – Maintain employee competency

The Committee approved the performance metrics.

Specific Matters Pertaining to Various State Agencies

South Dakota State Brand Board

The Director of the South Dakota State Brand Board was present to provide the Committee the State Brand Board Annual Report and answer Committee questions. She reported that the State Brand Board receives no General Fund appropriations and operates entirely on funds from the brand registration program and the brand ownership inspection program.

The annual report contained information on the number of livestock inspected during the calendar year, deposits for inspections, missing or stolen livestock, recovered strays, brand board holds, livestock investigations, and brand program registration activity. The Director reported that 1,675,636 head of livestock were inspected in calendar year 2022, as compared to 1,817,952 inspected in calendar year 2021. The Director stated that brands are renewed every five years and the next renewal period will be in 2025. The Director explained they are always looking for ways to improve the program. The Director reported the Brand Board is made up of five members and they currently have a staff of 11 full-time brand inspectors, four office staff, three brand enforcement investigators and approximately 120 part-time local brand inspectors. The Committee accepted the State Brand Board's annual report as presented.

The Building South Dakota Programs (BSD)

The Finance Director for the Governor's Office of Economic Development (GOED) provided an overview of the programs under the GOED. The Director presented the Building South Dakota Funds report, reviewing the Local Infrastructure Improvement Program (LIIP), the Economic Development Partnership Program (EDPP), the Reinvestment Payment Program (RPP), and the South Dakota Jobs Grants Program (JGP).

The Director explained the two primary purposes of the Economic Development Partnership Program (EDPP): 1) to help local economic development programs with training needs, and 2) to help local economic development programs recapitalize local revolving loan funds. Currently, the EDPP does not receive any new funding. Three grants were awarded totaling \$2,335 during fiscal year 2023.

The Director provided an overview of the Local Infrastructure Improvement Program (LIIP). The program provides grants to assist in funding the construction and reconstruction of infrastructure for the purpose of serving economic development projects. The LIIP awarded two grants during fiscal year 2023 totaling \$933,440. The Director explained the fluctuation in the number of awards is due to timing with how projects develop. The projected number of jobs created or retained was 219.

The Director provided an overview of the Reinvestment Payment Program (RPP). The program is available to assist companies in offsetting the upfront costs associated with relocating or expanding operations and/or upgrading equipment in South Dakota. This program allows for

project owners to receive a reinvestment payment, not to exceed the sales and use tax paid on project costs, for new or expanded facilities with project costs in excess of \$20 million, or for equipment upgrades with project costs in excess of \$2 million. The RPP awarded fourteen grants during fiscal year 2023 totaling \$29,565,048. The projected number of jobs created or retained was 917.

The Director provided an overview of the South Dakota Jobs Grant Program (JGP). The program is available to assist companies in offsetting the upfront costs associated with relocating or expanding operations and/or upgrading equipment in South Dakota. The unobligated balance is about \$1.5 million. There were no applications received and no awards made during fiscal year 2023.

The Executive Director of the South Dakota Housing Development Authority (SDHDA) was present to address the Committee regarding the South Dakota Housing Opportunity Fund (HOF). The SDHDA distributes HOF funds geographically throughout the State with 30% of the funds targeted for cities with a population of 50,000 or more and 70% of the funds targeted for the rest of the State. From the applications received in fiscal year 2023, 25 projects and programs were funded, which is anticipated to assist more than 220 households. In fiscal year 2023, \$3.8 million was awarded by SDHDA. The Director advised that every year SDHDA receives far more requests for program funding than what is available.

The Director of the Division of Career and Technical Education with the Department of Education (DOE) reviewed the Workforce Education Fund (WEF) Annual Report and provided an overview of the WEF. The 2018 Legislature passed Senate Bill 81, which limited the fund to providing grants for new and existing secondary career and technical education programs. The Director discussed the secondary career and technical education grants or workforce education grants, their requirements and provided a list of grants awarded, with five being awarded in 2023. The Director advised that this year's funded projects are a mix of equipment and construction. To date, they have awarded approximately \$7.4 million in grants. The Director advised that DOE does not have the ability to track where CTE students end up, but they do know that the students are proceeding on to post-secondary education at a high rate.

The Committee accepted the reports as presented.

State Board of Internal Control

The Statewide Internal Control Officer with the Bureau of Finance and Management (BFM) presented the annual report of the State Board of Internal Control (SBIC) and provided the Committee an update on the activity of the SBIC. They presented highlights from the reporting period, which included:

- Five subrecipient audits reviewed
- Implemented the Internal Control Framework to four agencies
- Updated Internal Control Training Materials

The SBIC plans to start working with the Department of Human Services, Board of Regents, and the Department of Labor and Regulation in fiscal year 2024. The Committee asked that more details from the subrecipient audit report reviews be included in future reports. The Committee will monitor the State Board of Internal Control's activity on an annual basis.

The Committee accepted the report as presented.

South Dakota 9-1-1 Coordination Board

The Director of the Division of Criminal Justice Services for the Department of Public Safety presented the 9-1-1 Coordination Board Report, which is submitted each year. The South Dakota 9-1-1 Coordination Board continues to function as required. The State's deployment of its NextGen 9-1-1 network makes it possible to implement more accurate call routing and location information with geospatial call routing.

The Board completed evaluations and compliance reviews of fourteen Public Safety Answering Points (PSAPs) and all were in compliance. The Board also reviewed and approved 74 annual financial reports submitted by counties and PSAPs.

The Committee accepted the 9-1-1 Annual Report as presented.

Game, Fish and Parks annual report of habitat stamp revenue and expenditures

During the 2020 session, the Legislature authorized a habitat stamp fee on resident and nonresident hunting and fishing licenses. Revenue generated by the fee is to be used to enhance terrestrial habitat on public lands, provide additional access to private lands, and enhance aquatic habitat on public waters. The legislation requires the Department of Game, Fish and Parks (GFP) to deliver an annual itemized expenditure report to the Committee. The Director of Wildlife explained GFP's process for distributing funds and prioritizing projects. The Director provided a map of locations of completed projects on game production areas, correlating with the fact that about two-thirds to three-quarters of South Dakota's game production areas are in eastern South Dakota. The Director also discussed how the Habitat Stamp funds are used for the James River Watershed Conservation Reserve Enhancement Program (CREP) and Big Sioux River Watershed CREP. The Director provided data on the game production area accomplishments based on calendar years and advised they believe the current fees are adequate to cover the ongoing projects and activities they are doing.

The Committee accepted the report as presented.

Board of Regents

University Centers

In accordance with South Dakota Codified Law 13-51-1.4, the Committee reviewed the annual accountability reports of Black Hills State University – Rapid City and the University of South Dakota – Sioux Falls.

The Vice President for Finance and Administration with Black Hills State University provided an update on the West River Health Science Center and reviewed the mission adjustment for Black Hills State University – Rapid City (BHSU-RC) including four goals for the overall project. She provided the BHSU-RC operating statement for fiscal year 2023. They ended the year with a positive net revenue.

The President of the University of South Dakota reported the University of South Dakota – Sioux Falls (USD-SF) is on track with their five-year plan and that a lot of opportunity remains in Sioux Falls. The Vice President of USD-SF stated that they have been aggressively marketing themselves and engaging members in the Sioux Falls area. He described ways they are addressing regional workforce needs and unique partnerships they have formed. Finally, the Vice President for Finance and Administration with USD provided the USD-SF operating statement and advised the financials are tracking fairly closely with the new model they are using.

The Committee plans to continue monitoring the financial condition of the University Centers.

Compliance with SDCL 13-51-1.3

The System Vice President of Finance and Administration with the Board of Regents (BOR) advised that the BOR is in compliance with SDCL 13-51-1.3.

The Committee accepted the report as presented.

South Dakota Board of Technical Education Accountability Report

The Executive Director of the Board of Technical Education and the four Presidents from the technical colleges presented to the Committee. The Director advised they are in a season of strategic planning focusing on attainment, affordability, and alignment. The Director reported on graduate outcomes, enrollment, and retention.

The system produced 2,236 graduates during the 2021-22 academic year, with an on-time completion rate of 66.4%. According to the 2022 graduate outcomes report, which had an 96.9% response rate, the system's placement rate was 97.9% (2,117). The placement rate includes those who are employed, continuing their education, or joining the military. The 2022 rate is a slight decrease from the 98.4% placement rate in 2021. Among those graduates who

responded (2,168), 88.5% (1,919) remained in South Dakota after graduation. In academic year 2022-23, the system produced 2,598 graduates.

According to the system's fall 2023 enrollment report, unduplicated enrollment (full-time, part-time and dual-credit) decreased by 325 students (7,240 students to 6,915). The number of students participating in the dual-credit program decreased by 172 (1,346 students to 1,174), driving much of the enrollment decline.

The system's retention rate, which measures the number of students who enroll in the institution one fall and return (or complete) the following fall, was at 78% in the fall of 2022. Lake Area Technical College had a retention rate of 81%, Mitchell Technical College had a rate of 82%, Southeast Technical College had a retention rate of 75%, and Western Dakota Technical College had a rate of 71%.

The Director thanked the Legislature for the additional appropriations to the technical college system through Instructor Salary Support funding, Tuition Freeze/Salary Increase dollars, and the implementation of a multi-year Maintenance and Repair funding plan. The Committee accepted the annual accountability report.

Conflicts of Interest

Bureau of Human Resources and Administration

The Committee reviewed the annual report of Conflict-of-Interest Authorizations called for in SDCL 5-18A-17.2. Under this law, a governing body may authorize an officer or employee of a State agency to benefit from a contract if the contract is fair, reasonable, and not contrary to the public interest; these authorizations are required to be filed with the Commissioner of the Bureau of Human Resources and Administration and presented to the Committee annually. The Committee reviewed four approved authorizations (waivers) for the July 1, 2022 through June 30, 2023 reporting period. The Committee accepted the report as presented and plans to review approved waivers annually.

Auditor General

The Auditor General presented a Compilation of Conflict-of-Interest Disclosures for State Authorities, Boards and Commissions for fiscal year 2023 (SDCL 3-23-3). He advised that he is going to reach out to all the State Boards and Commissions to make sure they are remembering to file these. He did not see any concerns when viewing them from an auditor's perspective. The Committee accepted the report as presented and plans to review the disclosures annually.

Obligation Recovery Center

House Bill 1228 was passed during the 2015 Legislative Session (codified in SDCL 1-55) and created the Obligation Recovery Center (Center). The Center began operations on July 15,

2016. The Director of the Executive Management Finance Office with the Bureau of Finance and Management provided the annual report of the activities of the Obligation Recovery Center. The Center has entered into a memorandum of understanding with each agency that uses the Center to collect debt to ensure agency specific requirements are considered. She advised that the Center contracts with a company called Reliant Capital Solutions, and they subcontract with Government Performance Solutions. She reported debt recoveries of \$3,664,051 in fiscal year 2023. The Committee accepted the report and will continue to review the activity of the Center on an annual basis.

Juvenile Abuse, Neglect and Grievance Reports

Department of Corrections

The Committee is charged with the responsibility to review any allegations of abuse or neglect of individuals under the jurisdiction of the Department of Corrections within private contracted facilities per SDCL 26-11A-33.1.

The Director of the Juvenile Division presented the report for the time period from July 1, 2022 through June 30, 2023. Eleven cases were reported to the Committee during the period.

The Committee accepted the report as presented.

MWI Health – Monitor for Youth in Treatment Facilities

The Committee is charged with the responsibility to review a monitor report that contains a confidential addendum of investigations, specific findings and recommendations of the monitor, and the responses of the Department of Social Services to the recommendations (SDCL 26-6-52(5)).

A Registered Nurse with MWI Health (Monitor) presented the report to the committee in executive session. The Youth Services Grievance Monitor Program launched on July 1, 2022, and responds to grievances received from youth placed in shelter care facilities, group care centers for minors, residential treatment centers, intensive residential treatment centers, and independent living preparation programs. She provided program milestones and reviewed their on-site visits to the facilities. Raising awareness with participants at the facilities and with the public at large is ongoing and one of their larger goals for the coming year.

The Committee accepted the report as presented.

Audit Reports

South Dakota Single Audit Report for FY22

The Committee reviewed the South Dakota Single Audit Report for the fiscal year ended June 30, 2022.

Financial and compliance audits involve testing financial transactions of the State to determine that money is properly accounted for and expended in accordance with State and federal laws and regulations. All audits conducted of State agencies were consolidated and reported in the Single Audit Report. The Single Audit Report includes the Annual Comprehensive Financial Report for the State of South Dakota prepared by the Bureau of Finance and Management, a schedule showing the federal awards administered by the State and related expenditures, and audit findings and recommendations issued by the Department of Legislative Audit.

The Single Audit Report was issued in accordance with auditing standards generally accepted in the United States of America, Government Auditing Standards issued by Comptroller General of the United States, U.S. Office of Management and Budget (OMB) Uniform Guidance, and South Dakota Codified Laws. A copy of this report may be obtained from the Department of Legislative Audit.

The Committee reviewed the audit findings and corrective action plans in the Single Audit:

- Finding No. 2022-001 – Science and Technology Authority – A material weakness in internal controls over construction in process.
- Finding No. 2022-002 – Science and Technology Authority – A significant deficiency in internal controls over compliance.
- Finding No. 2022-003 – Department of Transportation – A material weakness and non-compliance in internal controls over Federal Financial Reports.
- Finding No. 2022-004 – Department of Human Services – A significant deficiency in internal controls over subrecipient monitoring of Nutrition Service Providers.
- Finding No. 2022-005 – Soybean Research and Promotion Council – A significant deficiency in the preparation of financial statements.
- Finding No. 2022-006 – South Dakota Public Broadcasting – A material weakness in internal control over segregation of duties.
- Finding No. 2022-007 – South Dakota Corn Utilization Council – A material weakness in internal controls in the preparation of financial statements and restatement.
- Finding No. 2022-008 – South Dakota Corn Utilization Council – A material weakness in internal controls over the segregation of duties.

The Department of Legislative Audit will follow-up on the audit findings and report back to the Committee regarding the implementation of the corrective action.

South Dakota High School Activities Association

The Executive Director of the South Dakota High School Activities Association (SDHSAA) reviewed the Fiscal Year 2022 audit report with the Committee. He reported that it was a clean audit with no findings. The Committee accepted the report as presented.



















Senator Dean Wink, Chair
Government Operations and Audit Committee

Bureau of Information & Telecommunications

Agency's Mission Statement: The Bureau of Information and Telecommunications (BIT) strives to be partners and technology leaders who enable **innovative, secure, and efficient services for our citizens.**











Goals, activities, and measures need to be developed by the agency, in consultation with the Governor's Office, and agreed to by the Legislature (Government Operations and Audit Committee).

Goal 1: Provide a Reliable, Secure, and Modern Infrastructure

	Performance Measures				Historical Data Section				
	Trend	Status	Actual	Target	FY19	FY20	FY21	FY22	FY23 (as of April 27, 2023)
Activity A. What activities are you doing to accomplish Goal 1?									
Maintain 99.8% average uptime per month, year (Private Cloud)			100.00%	>99.8%	99.86%	100%	100%	100%	100%
Maintain 99.8% average uptime per month, year (Mainframe)			100.00%	>99.8%	99.93%	100%	100%	100%	100%
SDPB uptime			99.95%	>99.8%	99.99%	99.99%	99.90%	99.88%	99.95%
SD.net live delivery hours			1416	>750 hours	948	1,046	1,896	1,864	1,416
SDPB FM uptime			99.91%	>99.8%	99.89%	99.98%	99.89%	99.94%	99.91%
State employee email assessment annual failure rate			7.1%	<5%	7.1%	3.4%	3.5%	2.2%	7.1%
Payment Card Industry (PCI) standards annual average score			100%	>99.8%	100%	100%	100%	100%	100%
Meeting internal security patch goals			7.5	<10 days - 90% install	10.83	8.75	8.50	7.38	7.5







Agency comments regarding the accomplishment of Goal 1: Citizen services and employee productivity are hindered when networks are down. Keeping the state's network running and its data safe is our essential service to our customers.

Goal 2: Deliver Valuable Services at Economical Costs.

	Performance Measures				Historical Data Section				
	Trend	Status	Actual	Target	FY19	FY20	FY21	FY22	FY23 (as of April 27, 2023)
Activity A. What activities are you doing to accomplish Goal 2?									
Planned vs. unplanned work for Development									
Planned work			41%	>66%	64%	51%	59%	60%	41%
Unplanned work			59%	<33%	36%	49%	41%	40%	59%
Service Desk meets service-level agreements			92%	≥95%	82%	91%	91%	93%	92%
Satisfactory/neutral customer overall ratings after Service Desk experience			98%	≥95%	N/A	98%	95%	97%	98%
Move analog phone lines to VoIP			16%	10%/yr	47%	32%	22%	16%	16%




Agency comments regarding the accomplishment of Goal 2: Although we continue to move away from analog phone lines, we are simultaneously converting users to Teams Voice, which will maximize our investment in Microsoft Office365 and enables team members to make and receive calls from anywhere through their computer or cell phone.

Goal 3: Build and Retain a Highly Skilled Workforce

	Performance Measures				Historical Data Section				
	Trend	Status	Actual	Target	FY19	FY20	FY21	FY22	FY23 (as of April 27, 2023)
Activity A. What activities are you doing to accomplish Goal 3?									
Annual staff turnover			8.7%	<10%	12.9%	7.7%	6.6%	12.9%	8.7%
Employee engagement (every two-year survey by BHR)									
Engaged employees			30%	≥30%	20%			30%	
Moderately engaged employees			49%	≥45%	50%			49%	

Agency comments regarding the accomplishment of Goal 3: (BHR conducts the employee engagement survey every other year, so there will be no results for FY23.) Employee turnover was significantly higher in FY22. COVID likely led to the artificially low numbers in FY20 and FY21. Unfortunately, we are now competing for talent nationally, not just locally. Several team members have left state government for higher-paying positions for

Status Indicator:

-  = Green - the historical trend line indicates improved performance and the target has been met.
-  = Yellow - the historical trend line indicates improved performance, but the target has not been met.
-  = Red - the historical trend line does not indicate improved performance and the target has not been met.

Department of Revenue

Agency's Mission Statement: Serving South Dakota to provide fair, efficient, and reliable revenue administration with our partners to help fund public service statewide.

Below are the goals, activities, and measures for the agency. Goals, activities, and measures need to be developed by the agency, in consultation with the Governor's Office, and agreed to by the Legislature (Government Operations and Audit Committee).













Goal 1. Provide consistent service to every customer, every time. Be adaptable with our customer service methods.										
	Performance Measures				Historical Data Section					
	Trend	Status	Actual FY23	FY23 Target	FY17	FY18	FY19	FY20	FY21	FY22
Activity A. Provide Timely Service and Response to Customer										
i. Motor Vehicle Title Turnaround in calendar days			33.97	<= 15	14.1	13.2	16.5	16.7	18.3	15.4
ii. Business Tax Abandoned Rates										
iia. Business Tax Abandoned Call Rate			2.8%	< 3%	5.6%	4.0%	2.8%	4.2%	2.8%	2.7%
iib. Business Tax Abandoned Chat Rate			0.2%	< 3%				2.4%	0.9%	0.7%
iii. Motor Vehicles Abandoned Rates										
iiia. Motor Vehicles Abandoned Call Rate			9.6%	< 3%	4.3%	7.2%	3.8%	4.5%	3.5%	4.1%
iiib. Motor Vehicles Abandoned Chat Rate			1.6%	< 3%					1.6%	0.7%
Activity B. Employ, train, and retain qualified staff										
i. BHR Bi-Annual Employee Survey Response Rate				80%	87%		79%		79%*	94%
ii. % of Engaged DOR Employees from BHR Bi-Annual Survey				80%	84%		72%		79%*	76%
iii. Courses Completed by Employees in the Learning Management System			1727	1507			514	2044	1384	1463
iv. Employee Turnover Percentage			13%	< 10%	10.9%	15.9%	14.6%	12.7%	8.1%	11%
Activity C. Provide Service Channel Options to Meet Customer Needs										
i. Business Tax Returns filed electronically			84%	>= 82%	66%	69%	73%	77%	80%	82%
ii. Business Tax Revenue collected electronically			96%	>= 96%	91%	92%	93%	95%	95%	96%
iii. Motor Vehicle Registrations Renewed via SST or SD Cars			15%	>= 20%	8%	10%	11%	16%	16%	17%
iv. Property Tax Forms Submitted Electronically to DOR and Counties			5,133	5,060				2,678	4,770	5,866

Agency comments regarding the accomplishment of Goal 1:

- A-i. The FY23 target was not met due to continued staffing issues in FY23. Additional non-motor vehicle staff have been trained in title processing, summer temporary staff were hired to help process titles, and overtime is being utilized to try and get the days back under control. For FY24, the measure may be switched from calendar days to business days and the target may be adjusted to a more maintainable target of 15-18 days.
- A-iii-a. The FY21 goal was 5%. The FY22 target was set to 3% after attaining the previous benchmark for both business tax and motor vehicles. After missing the 3% goal in motor vehicles and analyzing the staff-to-call ratios for motor vehicles, it has been determined that 3% is not a maintainable goal. After the Department further evaluated the data, it was determined the motor vehicle abandoned call rate goal will be set at 5% for FY24.
- B-i and B-ii. The last three engagement surveys were administered by three different entities and may not be comparable. *Since BHR did not do the FY21 employee engagement survey, the FY22 survey response rate and engagement percentage results were from a DOR-only engagement survey administered by Guidehouse for strategic planning.
- B-iii. A DOR Strategic Planning group implemented professional development requirements for all employees.
- C-ii. 84% of the returns filed electronically account for 96% of the Business Tax revenue collected.
- C.iii. The State of South Dakota is currently in a plate reissue year and people are less likely to pay the plate mailing fee, resulting in a decreased rate of registration renewals via SST or SD Cars. The Department will continue to evaluate the motor vehicle registrations renewed via SST and SD Cars for FY24 without any revisions to the target.
- C-iv. DOR uses electronic submission for forms submitted centrally and offers the technology to the counties and taxpayers to utilize at their own discretion and preference.

Department of Revenue

Goal 2. Ensure that all DOR stakeholders understand the laws and regulations through education efforts.

	Performance Measures				Historical Data Section					
	Trend	Status	FY23 Actual	FY23 Target	FY17	FY18	FY19	FY20	FY21	FY22
Activity A. Business Partner Outreach and Education										
i. Number of DOR Provided Seminars and Classes			69	>= 60	101	104	73	33	41	57
ii. Attendees of DOR Provided Seminars and Classes			2212	>= 1,532	1960	2104	1005	954	1045	1688
iii. Routine License Reviews										
iiia. Business Tax License Reviews			266	>= 250	217	336	251	217	155	262
iiib. Motor Fuel License Reviews			71	100						75
iiic. Tobacco Inspections/License Reviews			660	600	980	776	710	472	190	712
v. Property Tax Division Hours Focused on Education			101	140					136	133

Agency comments regarding the accomplishment of Goal 2:

A-i & A-ii. DOR offers a variety of in-person and online options for education events.













A-iii-b. This was a new performance metric in FY22. A motor fuel agent was deployed for a significant portion of FY22 and FY23. Cross-training is being implemented to assist with meeting the target.

A-iii-c. Tobacco Inspections are completed in accordance with the Master Settlement Agreement. *FY22 was the first fiscal year that agents completed these reviews during their business processes.*





A-v. The Property Tax Division did not hold a Topics class or Ag Land Assessment classes for assessors in FY23 which decreased education hours. The need for those classes is determined by the South Dakota Association of Assessing Officers (SDAAO) Education Committee and the number of new assessors.

Department of Revenue

Goal 3. Provide critical funding for state and local governments through compliance and efficiency.

	Performance Measures				Historical Data Section					
	Trend	Status	FY23 Actual	FY23 Target	FY17	FY18	FY19	FY20	FY21	FY22
Activity A. Compliance Efforts.										
i. Percentage of Audit Hours Spent on Zero Audits			11%	<= 10%	9.8%	13.0%	11.8%	12.7%	14.0%	12%
ii. Percentage of Quality Distinct Audits			83%	>= 75%	57%	63%	69%	71%	72%	78%
iii. Business Tax Return Delinquency Rate			10.8%	<= 10%	9.4%	9.8%	10.1%	10.2%	9.2%	9.7%
iv. Motor Fuel Tax Return Delinquency Rate			0.8%	<= 10%						
v. Tax Discovery Leads Closed			14,966	22,000	26,103	35,133	25,818	22,688	29,843	18,445
vi. Property Tax Division - Average Form Turnaround Time (County Levy) in Calendar Days			44	45					35	46

Activity B. Funding Improvement or Measurement

i. Increased General Fund Revenues through Lottery Sales										
ia. Instant Ticket Net Proceeds			\$5,971,394	\$5,367,995	\$5,240,567	\$6,399,685	\$6,896,813	\$5,053,476	\$5,059,850	\$10,348,489
ib. On-line Net Proceeds			\$11,838,568	\$7,818,775	\$7,044,532	\$8,395,339	\$8,256,004	\$6,894,061	\$7,969,368	\$7,591,044

Agency comments regarding the accomplishment of Goal 3:

A-v. The Tax Discovery unit has received fewer leads to work than in years past, partially due to more remote sellers being licensed. Remote sellers continue to come forward voluntarily and the DOR continues to license them without the need to create or work leads.

A-vi. FY23 Levy Verification was performed manually and electronically to validate the new electronic software solution (E-File). The target will be reassessed with only electronic filing going forward.

B-i. The decrease from FY19 to FY20 in Instant Tickets net proceeds was due to system upgrades. FY21 Instant Ticket net proceeds were low due to COVID issues. FY22 Instant Ticket net proceeds were high due to a low transfer in FY21 and a large unclaimed prize.

B-ia. Instant Ticket Net Proceeds vary based on the timing of games closing and unclaimed prizes.





















B-ib. On-line Net Proceeds are driven by jackpots. This revenue can be unpredictable.

Bureau of Human Resources

Agency's Mission Statement: Build, develop, and support a high-performing and healthy workforce.









Below are the goals, activities, and measures for the agency. Goals, activities, and measures need to be developed by the agency, in consultation with the Governor's Office, and agreed to by the Legislature (Government Operations and Audit Committee).

Goal 1: Promoting Employee Wellbeing

	Performance Measures				Historical Data Section				
	Trend	Status	Actual	Target	FY19	FY20	FY21	FY22	FY23
Activity A. What activities are you doing to accomplish Goal 1?									
i. Percent of male employees or dependent spouses getting an annual physical from a primary care physician.			56%	≥ 60%			33%	27%	56%
ii. Percent of female employees or dependent spouses getting an annual physical from a primary care physician.			89%	≥ 75%			49%	47%	89%
iii. Percent of employees completing online risk assessment.			60%	≥ 65%	69%	72%	34%	65%	60%
Activity B. What activities are you doing to accomplish Goal 1?									
i. Percent of eligible plan members participating in disease management.			39%	≥ 50%	31%	30%	25%	30%	39%
ii. Percent of employees considered high risk from health screening.			16%	≤ 10%			29%	22%	16%
iii. Employee Assistance Program participation.			6.3%	≥ 8%	6.2%	6.8%	5.2%	6.2%	6.3%
iv. Participation in LiveWell SD challenges.			28%	≥ 30%			NA	30%	28%
v. Percent of employees participating in a wellness challenge or activity.			55%	≥ 30%			2%	49%	55%
vi. Percent of employees contributing to their Health Savings Account.			72%	≥ 75%	45%	68%	66%	82%	72%
vii. Percent of employees contributing to their Supplemental Retirement Plan.			67%	≥ 70%			67%	68%	67%

Agency comments regarding the accomplishment of Goal 1: A one-year-only change in the wellbeing incentive plan for FY21 significantly increased the number of employees getting an annual onsite wellness screening. That same change dropped the number of employees completing the online risk assessment by more than half. In FY22 the plan will go back to pre-21 design with a longer window for participation which is intended to maintain screening participation and increase the risk assessment to better inform our wellbeing programming. Over time, we will work to increase the number of employees obtaining a physical from their primary care physician which is of particular importance as people age. Employees contributed to their HSA at a significantly higher rate in FY21 as a higher level of education was provided throughout the year. Vendor transitions and their ability to measure impact other scores information which may drive not only changes in our work and programming but our goals for success to be more achievable. It was announced in FY23 that this year would be the last of onsite screenings and the numbers dropped accordingly. The more valuable Primary Care Provider visit numbers went up significantly. The partnerships for disease management and prevention in our well-being program are moving growing participation.

Goal 2: Effectively Recruiting















	Performance Measures				Historical Data Section				
	Trend	Status	Actual	Target	FY19	FY20	FY21	FY22	FY23
Activity A. Participating in active recruitment activities									
i. Campus visits including job fairs, class visits, career events, etc.			48	≥ 50			15	10	48
ii. Native American outreach activities including career fairs, college visits, events, etc.			0	≥ 10			0	0	0
iii. Number of interns hired as permanent employees			31	≥ 30		0.13	33	10	31
Activity B. Improving selection									
i. Time to fill jobs.			60	≤ 55 days	54	58	57	59	60

Bureau of Human Resources




ii. New employee performance scores.		3.8	≥ 2	3.8
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Agency comments regarding the accomplishment of Goal 2: COVID-19 shut down access to college campuses and reservations for much of the year. The visits that we could have were done virtually. Internships provided a much higher number of new employees in FY21 partly due to a lower level of competition on campus and because offers were made earlier to capture the most successful interns. Time to fill remained about the same but still above our target. A number of factors contribute but a labor shortage is likely to make this worse not better. We are unable to measure this due to system changes. FY23 Given record low unemployment, time to fill just above our historic numbers is reasonable and expected. The Talent Acquisition team has expanded to better meet the needs of state government and provide for activity to increase.

Goal 3: Develop and Retain Employees

	Performance Measures		Historical Data Section						
	Trend	Status	Actual	Target	FY19	FY20	FY21	FY22	FY23
Activity A. Building better leaders									
i. Overall employee rating of supervisor effectiveness (1-6 scale).			4.9	≥ 5	4.8	4.8	4.8	4.9	4.9
ii. Percent of managers participating in leadership and supervision development.			36%	≥ 50%			54%	68%	36%
Activity B. Developing employee skills									
i. Net Promoter Score			51	≥ 50			47	50	51
ii. Percent executive branch employees participating in BHR trainings.			37%	≥ 40%			23%		37%
iii. Overall state retention rate, excluding retirement.			88%	≥ 88%	88%	89%	89%	89%	88%
Activity C. Promotions and career development									
i. Career development and movement.			593	≥ 500		427	441	549	593
ii. Overall employee engagement.			29%	≥ 33%	21%	21%	21%	29%	29%
Agency comments regarding the accomplishment of Goal 3: Supervisor effectiveness and employee engagement were measured in 2017 and 2019. The next survey will be taken in January 2022 and each two									

Status Indicator:





















-  = Green - the historical trend line indicates improved performance and the target has been met.
-  = Yellow - the historical trend line indicates improved performance, but the target has not been met.
-  = Red - the historical trend line does not indicate improved performance and the target has not been met.

Bureau of Human Resources

Agency's Mission Statement: Build, develop, and support a high-performing and healthy workforce.







Below are the goals, activities, and measures for the agency. Goals, activities, and measures need to be developed by the agency, in consultation with the Governor's Office, and agreed to by the Legislature (Government Operations and Audit Committee).

Goal 1: Promoting Employee Wellbeing

	Performance Measures				Historical Data Section				
	Trend	Status	Actual	Target	FY20	FY21	FY22	FY23	FY24
Activity A. What activities are you doing to accomplish Goal 1?									
i. Percent of male employee or dependent spouses getting an annual physical from a primary care provider.				60.0%	NA	33%	27%	56%	
ii. Percent of female employee or dependent spouses getting an annual physical from a primary care provider.				75.0%	NA	49%	47%	89%	
iii. Percent of employees completing online risk assessment.				65.0%	72%	34%	65%	60%	
Activity B. What activities are you doing to accomplish Goal 1?									
i. Percent of eligible plan members participating in disease management.				50%	30%	25%	30%	39%	
ii. Percent of employees considered high risk.				10%	NA	29%	22%	16%	
iii. Employee Assistance Program participation.				8%	6.8%	5.2%	6.2%	6.3%	
iv. Percent of employees participating in LiveWellSD challenges or programs.				30%	NA	2%	49%	55%	
v. Percent of eligible employees participating in specific partner program, i.e. pre-diabetes, pregnancy support, weight loss, etc.				30%	NA	NA	30%	28%	
v. Percent of employees contributing to their Health Savings Account.				75%	68%	66%	82%	72%	
vi. Percent of employees contributing to their Supplemental Retirement Plan.				70%	NA	67%	67%	67%	


Agency comments

Goal 2: Effectively Recruiting

	Performance Measures				Historical Data Section				
	Trend	Status	Actual	Target	FY20	FY21	FY22	FY23	FY24
Activity A. Participating in active recruitment activities									
i. Educational and recruiting visits including job fairs, class visits, career events, etc.				50	NA	NA	15	10	48
ii. Native American outreach visits including organizations, career fairs, college visits, events, etc.				10	NA	NA	0	0	0
iii. Number of interns hired as permanent employees				30	NA		33	10	31















Bureau of Human Resources

Activity B. Improving selection




i. Time to fill jobs.			55	54	58	57	59	60
ii. New employee performance scores.			>2	NA	NA	NA	NA	3.8

Agency comments

Goal 3: Develop and Retain Employees

	Performance Measures		Historical Data Section						
	Trend	Status	Actual	Target	FY20	FY21	FY22	FY23	FY24
<u>Activity A. Building better leaders</u>									
i. Overall employee rating of supervisor effectiveness (1-6 scale).				5	4.8	4.8	4.9	4.9	
ii. Percent of managers participating in leadership and supervision development.				50%		54%	68%	36%	
<u>Activity B. Developing employee skills</u>									
i. Net Promoter Score				50	NA	47	50	51	
ii. Percent executive branch employees participating in professional development offered through BHR, i.e. SDLearn, delivered training, events				40%	NA	23%		37%	
iii. Overall state retention rate, excluding retirement.				88%	89%	89%	89%	88%	
<u>Activity C. Promotions and career development</u>									
i. Number of executive branch employees promoted or accepting new positions, i.e. lateral transfer, promotion in or out of agency				500	NA	NA	NA	NA	
iii. Overall employee engagement.				33%	21%	21%	29%	29%	

Status Indicator:

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-  = Red - the historical trend line does not indicate improved performance and the target has not been met.

Department of Health

Agency's Mission Statement: Working together to promote, protect, and improve health

Below are the goals, activities, and measures for the agency. Goals, activities, and measures need to be developed by the agency, in consultation with the Governor's Office, and agreed to by the Legislature (Government Operations and Audit Committee).

Goal 1: Healthy Beginnings

	Performance Measures				Historical Data Section				
	Trend	Status	Actual	Target	CY18	CY19	CY20	CY21	CY22
Activity A. Pediatric Obesity Rate Reduce the percentage of WIC participants, aged 2 through 4, with obesity from 15.6% in 2019 to 14% by 2025.			16.2%	14.0%	15.7%	15.6%	16.9%	16.2%	17.0%
Activity B. Childhood Immunization Rates Increase the percentage of children vaccinated for MMR at kindergarten entry from 92.7% in 2022 to 95% by 2025.			92.7%	95.0%	96.2%	96.0%	94.6%	93.7%	92.7%

Agency comments regarding the accomplishment of Goal 1: Activity A - CY22 data is provisional

Goal 2. Maternal and Child Health

	Performance Measures				Historical Data Section				
	Trend	Status	Actual	Target	CY18	CY19	CY20	CY21	CY22
Activity A. Infant Mortality Reduce 5-year infant mortality rate from 6.3 infant deaths per 1,000 live birth (2014-2018) to 5.8 per 1,000 live births (2021-2025).			6.9	5.8	6.3	6.5	6.5	6.9	6.9
Activity B. Maternal Mortality Reduce 5-year maternal mortality rate from 16.4 maternal deaths per 100,000 live births (2014-2018) to 15.6 maternal deaths per 100,000 live births (2021-2025).			25.9	15.6	16.4	16.6	18.7	25.9	
Activity C. Breastfeeding Increase the percentage of infants still breastfeeding at 8 weeks from 75.7% from 2018 to 76.2% in 2025.			72.4%	75.0%	75.7%	74.1%	74.4%	72.4%	

Agency comments regarding the accomplishment of Goal 2: Activity A and B - Data is 5-year rate (CY18 - 2014-18; CY19 - 2015-19; CY20-2016-20; CY21 - 2017-21; CY 22 - 2018-2022); 2018-2022 infant mortality rate is provisional. 2022 data for maternal mortality and breastfeeding is not available.

Goal 3. Injury and Harm Prevention

	Performance Measures				Historical Data Section				
	Trend	Status	Actual	Target	CY18	CY19	CY20	CY21	CY22
Activity A. Suicide Deaths Decrease the crude suicide death rate in South Dakota from 20.7 per 100,000 in 2020 to 18.6 per 100,000 in 2025.			21.4	18.6	19.0	20.9	20.7	22.6	21.4
Activity B. Unintentional Overdoses Decrease the crude unintentional overdose death rate in South Dakota from 7.8 per 100,000 in 2020 to 7.0 per 100,000 in 2025.			9.2	7.0	4.9	8.0	7.8	9.6	9.2



Department of Health

Agency comments regarding the accomplishment of Goal 3: Activity A - 2022 data is provisional. Activity B - 2022 data is provisional

Goal 4. Access to Care




Activity A. Average Scene Time for Ground EMS Agencies

Achieve and maintain an average scene time for ground EMS agencies of 16 minutes.

Performance Measures				Historical Data Section				
Trend	Status	Actual	Target	FY19	FY20	FY21	FY22	FY23
		16.4	16.0	17.8	16.2	16.7	16.8	16.4




Activity B. Healthcare Professional Licensees













































Increase the number of health professionals licensed in South Dakota

Physicians		5728	6295	4459				5723
RNs/LPNs		22328	24560	21214	21250	21502	21922	22328
Advanced practice nurses		2590	2849	1669	1822	2003	2258	2590
Physician assistants		773	731	654				773
Advanced life support		969	1066	900				969

Agency comments regarding the accomplishment of Goal 4: Activity B - data not available for 2020-2022.

































Status Indicator:

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-  = Red - the historical trend line does not indicate improved performance and the target has not been met.

1	2022 Department of Social Services									
2	The South Dakota Department of Social Services is dedicated to strengthening families to foster health, wellbeing, and independence. Below are the goals, activities, and measures for the agency. Goals, activities, and measures need to be developed by the agency, in consultation with the Governor's Office, and agreed to by the Legislature (Government Operations and Audit Committee).					Status Indicator:		= Green - the historical trend line indicates improved performance and the target has been met.		
= Yellow - the historical trend line indicates improved performance, but the target has not been met.										
= Red - the historical trend line does not indicate improved performance and the target has not been met.										
Indicates metric not available due to implementation dates or availability of data (SFY, FFY vs CY).										
3										
4										
5										
6	Goal 1: Ensure access to services for our customers.									
7										
8		Performance Measures								
		Trend	Status	Actual	Target	FY18	FY19	FY20	FY21	FY22
9	Objective A: Enhance opportunities to access services.									
10	Identify and develop integrated opportunities to access services and supports within the Department.									
11	Maximize federal policy change related to 100% Medicaid FMAP for American Indians and reinvest savings into the Medicaid program.									
12	i. Care Coordination Savings from Federal Medical Assistance Percentage (FMAP) Savings Report. 100% of savings have been reinvested in the Medicaid program. Majority of funds invested in provider rate increases.			\$10.5	\$10.5	\$4.6	\$8.4	\$9.3	\$10.0	\$10.5
13	ii. Number of enhanced Community Health Worker, additional Behavioral Health, and Substance Use Disorder treatment providers that have enrolled in Medicaid.			114	100	-	70	122	147	114
14	iii. Number of eligible providers that have provided services.			95	100	-	61	117	138	95
15	iv. Number of recipients who received Community Health Worker, Mental Health, or Substance Use Disorder services.			3,101	2,000	-	230	1,071	2,454	3,101
16	v. Number of Native American recipients who received Community Health Worker, Mental Health, or Substance Use Disorder services.			1,044	1,353	-	283	586	755	1,044
17	Increase the use of technology in providing access to information and services.									
18	Pilot telehealth sites to support and enhance access to services.									
19										
20	i. Monitor utilization of mental health telehealth services to ensure appropriate use.			5,972	2,400	731	834	4,694	6,723	5,972
21	ii. Monitor utilization of substance use disorder telehealth services to ensure appropriate use.			1,186	500	-	252	1,079	1,761	1,186
22	iii. Telehealth claims in Medicaid increased from a monthly average of 227 in FY 2018 to a monthly average of 2,625 in FY 2022.			2,625	1,000	227	199	1,910	4,722	2,625
23	Implement a customer web portal for recipients and providers of Medicaid.									
24	i. Number of individuals with Primary Care Provider (PCP) or Health Home (HH) selection web forms submitted by Medicaid recipients.			6,080	6,000	-	-	3,602	4,363	6,080
25	ii. Number of Medicaid providers utilizing the portal to submit, view, and modify claims.			5,339	5,000	-	6,439	7,558	8,558	5,339
26	Enhance the Department's website and develop relevant decision support tools that better assist customers in accessing appropriate services.									
27										
28	i. Increased number of DSS website users.			79,594	50,460	-	-	47,184	50,460	79,594
29	ii. Increased number of sessions per user.			1.57	2	-	-	1.79	2.45	1.57
30	iii. Increased number of page previews.			542,449	560,318	-	-	206,224	560,318	542,449
31	Implement digital foster adoptive family training statewide to improve access for prospective foster adoptive parents.									
32	i. Number of newly licensed foster families.			302	300	194	204	238	163	302
33	Access to Healthcare.									
34	The Consumer Assessment of Healthcare Providers and Systems (CAHPS) Survey by the Centers for Medicare and Medicaid Services indicates SD exceeds the national average for children across two key measures of access. SD meets or exceeds the national average for adults across three key measures of access.									
35	i. Children got appointments with specialists as soon as needed.			79%	81%	87%	83%	77%	76%	79%
36	ii. Adults got appointments with specialists as soon as needed.			74%	82%	-	81%	79%	85%	74%
37	iii. Easy for children to get needed care, tests, or treatment.			90%	90%	87%	90%	86%	87%	90%
38	iv. Easy for adults to get needed care, tests, or treatment.			85%	86%	-	81%	83%	85%	85%
39	v. Children got routine appointment at doctor's office or clinic as soon as needed.			86%	84%	88%	90%	90%	87%	86%
40	vi. Adults got routine appointment at doctor's office or clinic as soon as needed.			84%	81%	-	75%	78%	81%	84%
41	vii. Children got urgent care for illness, injury or condition as soon as needed.			95%	91%	90%	92%	95%	91%	95%
42	viii. Adults got urgent care for illness, injury or condition as soon as needed.			85%	83%	-	82%	90%	80%	85%

		Performance Measures				FY18	FY19	FY20	FY21	FY22
		Trend	Status	Actual	Target					
43										
44										
45	Objective B: Services and programs are needs driven, customer responsive and culturally relevant.									
46	Clients and other stakeholders experience timely and convenient access to services.									
47	i. Percentage of stakeholders surveyed that reported the location of behavioral health services was convenient for their clients.			85%	80%	82%	85%	89%	88%	85%
48	ii. Percentage of stakeholders surveyed that reported behavioral health services were available at times convenient for clients.			83%	80%	82%	80%	84%	80%	83%
49	iii. Percentage of adult clients served in substance use disorder services who reported ease and convenience when accessing services.			90%	90%	92%	92%	93%	94%	90%
50	iv. Percentage of youth clients who reported ease and convenience when accessing substance use disorder services.			87%	80%	80%	81%	85%	88%	87%
51	v. Percentage of adult clients served in mental health services who reported ease and convenience when accessing services, exceeding the national average of 87.8% for FY22.			93%	90%	96%	96%	96%	96%	93%
52	vi. Percentage of youth clients who reported ease and convenience when accessing mental health services, exceeding national average of 89.8% for FY22.			90%	90%	95%	92%	95%	95%	90%
53	Implement evidence-based model for individuals with methamphetamine substance use disorders in need of intensive-long-term treatment services.									
54	i. Monitor the percentage of clients served that report they have the motivation to not use substances at discharge.			89%	84%	74%	92%	88%	87%	89%
55	ii. Monitor the percentage of clients served that report they have the ability to control their substance use at discharge.			98%	96%	96%	100%	94%	96%	98%
56	iii. South Dakota successful discharge rate for IMT services is 10% higher than the national average (28%) for substance use treatment services.			37%	28%	41%	31%	35%	40%	37%
57	Support Community Behavioral Health Centers implementing and/or utilizing Zero Suicide approach and support other suicide prevention efforts.									
58	i. Increase the average monthly number of unique users who visit the SD Suicide Prevention website. Target is 4,638 by 2025.			2,030	4,638	1,964	2,178	1,798	2,291	2,030
59	ii. Maintain or increase the number of agencies that have been trained to implement the Zero Suicide approach. Total number of agencies, including HSC, implementing the Zero Suicide approach.			21	15	17	20	21	21	21
60	iii. Increase the number of annual gatekeeper trainings funded. Target is 71 by 2025.			105	71	-	-	56	29	105
61	iv. Increase the number of individuals trained. Target is to train 1,367 individuals annually by 2025.			3,572	1,367	-	-	767	637	3,572
62	v. Increase the number of calls from South Dakotans to the National Suicide Prevention Lifeline. Target is 4,661 calls by 2025. FY 2018 is a partial year (started January of FY 2018).			3,261	4,661	787	3,343	3,868	3,437	3,261
63	Agency comments regarding the accomplishment of Goal 1:									
64										
65	Goal 2. Promote and support the health, wellbeing and safety of our customers.									
66	Objective A: Reduce risk factors and enhance protective capacities.									
67	Implement Screening, Brief Intervention and Referral for Treatment (SBIRT) model in targeted primary care clinics across the state and monitor effectiveness of the model.									
68	i. Maintain or increase the number of primary care clinics implementing the SBIRT process.			4	2	4	6	6	5	4
69	ii. Increase the number of individuals screened at primary clinics.			18,100	11,775	6,036	11,775	12,462	6,633	18,100
70	Collaborate with DOH and other key stakeholders to develop a statewide strategic plan to focus on addressing Opioid use/misuse in South Dakota.									
71	i. Number of Medicaid recipients taking >90 Morphine Equivalent Doses (MEDs) of Opioids (June 30 of each SFY). Cancer patients excluded. Indian Health Service (IHS) data was added Q1 of 2020.			210	200	273	255	209	204	210
72	ii. Percent decrease of Opioid utilizing Medicaid members.			1%	0%	-	-18%	-9%	-12%	1%
73	iii. Percent decrease of Opioid utilizing Medicaid members with 3+ pharmacies (poly-pharmacy shoppers).			0%	0%	-	-	-9%	-2%	0%

		Performance Measures				FY18	FY19	FY20	FY21	FY22
		Trend	Status	Actual	Target					
74										
75										
76	Identify and implement strategies to notify program recipients of Medical, SNAP and TANF about wellness/prevention tips.									
77	i. The number of lessons accessed through SDSU and UND's collaborative nutrition education and food budgeting micro-lessons (The Dish) online platform.			487	350	-	-	-	389	487
78	ii. A pilot program provides families with activities and materials designed to engage children and their families in wellness activities. Number of families from Cheyenne River reservation that are participating in the pilot program. (The pilot program required Tribal approval and the program began August 21, 2021.)			9	60	-	-	-	0	9
79	Objective B: Protect individuals from abuse, neglect and exploitation.									
80	Permanency and Safety for Children									
81	Child Protection Services' goal is to reunify families whenever possible.									
82	i. Results: Of children reunited, 64% were reunited within 12 months of removal during SFY 2022. When that is not possible, we work to establish guardianship or adoption to divert from foster care placement.			64%	70%	74%	75%	75%	71%	64%
83	ii. During FFY 2021, 94% of caseworker visits happened where the child resides - exceeding the federal requirement of 50% by 44%. FFY 2022 data not available until December 2022.			94%	80%	96%	96%	95%	94%	94%
84	Objective C: Provide effective services to individuals who have been abused, neglected and exploited.									
85	Implement Permanency Round Tables statewide to expedite permanency for children in placement.									
86	i. Implemented Permanency Round Tables in 6 of the 7 regions to expedite permanency for children in placement.			6	7	-	-	5	6	6
87	Permanency Outcomes.									
88	i. Number of reunifications.			489	482	672	612	617	518	489
89	ii. Percentage of outcomes being reunifications.			49%	49%	57%	57%	55%	49%	49%
90	iii. Number of children placed for adoption.			267	203	195	178	204	262	267
91	iv. Number of finalized adoptions.			238	176	173	144	176	227	238
92	v. Percentage of outcomes being adoptions.			24%	16%	15%	13%	16%	21%	24%
93	vi. Number of guardianships.			116	118	104	125	116	135	116
94	vii. Percentage of outcomes being guardianships.			12%	11%	9%	11%	10%	13%	12%
95	Agency comments regarding the accomplishment of Goal 2:									
96										
97	Goal 3. Foster partnerships to maximize resources for our customers.									
98	Objective A: Encourage and support partnerships to provide cost effective services.									
99	Implementation of Prenatal/Primary Care Innovation Grants.									
100	i. Avera helps pregnant women in South Dakota diagnosed with gestational diabetes by providing remote blood sugar monitoring, specialized test strips and video visits with a diabetic educator. Goal is to improve access to OB care and treatment of gestational diabetes; reduce the number of c-sections, birth complications, and infant/mother mortality; and increase rates of healthy birth weight babies and the number of babies who are delivered at full term. The total number of people served during the grant was 299.			299	150	-	-	49	188	299
101	ii. Center for Family Medicine provides patients with a birth center/pregnancy health home approach to provide a full array of prenatal and postnatal care. This project will also train family medicine resident physicians in innovative, evidence-based prenatal care models. Goal is to improve screening services for those with increased risk for gestational diabetes and preeclampsia; and decrease rates of prenatal hospitalization and c-section, pre-term delivery, NICU stays, and other complications. The total number of people served during the grant was 251.			251	150	-	-	36	175	251
102	Agency comments regarding the accomplishment of Goal 3:									
103										

		Performance Measures				FY18	FY19	FY20	FY21	FY22
		Trend	Status	Actual	Target					
104										
105										
106	Goal 4. Support customers in achieving meaningful outcomes.									
107	Objective A: Ensure the Department helps individuals and families achieve meaningful outcomes.									
108	Connections to Work.									
109	i. For participants who must meet work requirements for Supplemental Nutrition Assistance (SNAP), percentage employed 30 days after starting job, the majority full-time.			82%	94%	93%	92%	94%	90%	82%
110	ii. For participants who must meet work requirements for Temporary Assistance for Needy Families (TANF), percentage employed 30 days after starting job, the majority full-time.			84%	89%	88%	85%	85%	83%	84%
111	iii. Community Based Adult Mental Health Services - Percentage of clients who reported employment compared to national average (target).			35%	25%	24%	24%	25%	34%	35%
112	iv. Community Based Adult Substance Use Disorder Treatment Services - Percentage of clients who reported employment at discharge compared to national average (target).			37%	18%	32%	29%	27%	26%	37%
113	Caring for People in the Most Cost Effective Manner.									
114	About 7,100 Medicaid recipients with high-cost chronic conditions and risk factors participate in the Health Home program. The goal of the program is to improve health outcomes and avoid high-cost care and includes incentive-based payments to high performing providers. Program has reached target for participants with a person-centered care plan. The program led to \$11.1 million in net cost avoidance in CY 2021.									
115	i. Health Home Program - Net cost avoidance in millions primarily due to a reduction in avoidable inpatient admissions and emergency department visits.			\$11.2	\$7.5	\$7.7	\$7.3	\$8.0	\$6.9	\$11.2
116	ii. Health Home recipients with an active person-centered care plan.			73%	70%	63%	73%	75%	73%	73%
117	Money Follows the Person - Implemented in 2014. Provides funding and supports to transition individuals from nursing home or other institutional settings back to their homes and communities.									
118	i. Number of individuals who transitioned from nursing home or other institutional settings back to their homes and communities.			27	26	34	22	24	24	27
119	ii. Number of individuals remaining in the community - 365 days later.			26	19	30	21	23	22	26
120	Geriatric Psychiatric Treatment - Clinicians from the Human Services Center provided psychiatric review and consultation services for 16 individuals.									
121	i. Percentage of individuals who did not require admission to HSC due to psychiatric review and consultation services provided by clinicians from the Human Services Center.			100%	80%	82%	82%	84%	94%	100%
122	Develop a process to identify, utilize and share key behavioral data with stakeholders.									
123	i. Maintain or improve the percentage of HSC patients who had an opportunity to talk with his/her doctor or therapist from the community prior to discharge.			60%	62%	60%	62%	58%	63%	60%
124	ii. Maintain or improve the percentage of HSC patients who reported participating in their planning discharge.			82%	79%	79%	75%	78%	80%	82%
125	iii. Maintain or improve the percentage of HSC patients who reported both they and their doctor or therapist from the community were actively involved in their hospital treatment plan.			75%	70%	68%	59%	70%	72%	75%
126	Community Based Adult Mental Health Services. Providing counseling, psychiatric treatment and case management services to individuals, decreasing reliance on publicly funded services.									
127	i. CARE and IMPACT Outcome Measures: Percent reduction in the percentage of clients who visited an emergency room for a psychiatric or emotional problem six months after start of services.			-12%	-12%	-15%	-13%	-13%	-12%	-12%
128	ii. CARE and IMPACT Outcome Measures: Percent reduction in the percentage of clients who spent night in the hospital six months after start of services.			-12%	-12%	-17%	-17%	-14%	-11%	-12%
129	iii. CARE and IMPACT Outcome Measures: Percent reduction in the percentage of clients who reported spending at least one night in a correctional facility six months after start of services.			-10%	-9%	-15%	-15%	-15%	-13%	-10%
130	iv. CARE and IMPACT Outcome Measures: Percent reduction in the percentage of clients who reported one or more arrests in the past 30 days 6 months after start of services.			-10%	-9%	-5%	-5%	-7%	-7%	-10%

