

STRATEGIC PLAN

GOAL 1: Provide & facilitate individualized services to support people with disabilities to meet the goals they choose.

GOAL 2: Raise awareness of the resources available to people with disabilities for making an informed choice.

MISSION STATEMENT

DHS enhances the quality of life of people with disabilities in partnership with its stakeholders.

GOAL 3: Retain & support a knowledgeable, engaged, and prepared workforce.

GOAL 4: Integrate a culture of exceptional service with both internal and external stakeholders.

Goal 1
Provide & facilitate individualized services to support people with disabilities to meet the goals they choose.

Objectives

1. Increase the number of students receiving Pre-Employment Transition Services by 10% by Federal Fiscal Year (FFY) end 2020.
2. Increase the percentage of Medicaid expenditures going to HCBS for individuals with disabilities from 47.9% in 2015 to 55% by Federal Fiscal Year (FFY) end 2020.
3. Ensure 100% of individuals with disabilities receiving Home and Community Based Services (HCBS) will have a person-centered plan that contributes to a good life as defined by that person by year end (YE) 2020.

Goal 2
Raise awareness of the resources available to people with disabilities for making an informed choice.

Objectives

1. Increase the number of contacts to Dakota at Home, South Dakota's Aging and Disability Resource Center (ADRC), to 14,000 by Federal Fiscal Year (FFY) end 2020.
2. Expand service options by increasing the number of program participants receiving supports through Shared Living by 25 people by Federal Fiscal Year (FFY) end 2020.

Goal 3
Retain & support a knowledgeable, engaged, and prepared workforce

Objectives

1. Increase the availability of respite care providers listed on the Respite Care directory from 0 in Federal Fiscal Year 2017 (FFY) to 50 across the state by Federal Fiscal Year (FFY) end 2020.
2. Increase the number of waiver participants utilizing technology by 10% and reduce the reliance on paid supports by 10% by Federal Fiscal Year (FFY) end 2020.
3. Expand Department-wide Person Centered Training knowledge and skills by increasing the number of coaches 20% by year end (YE) 2020.

Goal 4
Integrate a culture of exceptional service with both internal & external stakeholders.

Objectives

1. Ensure a 95% satisfaction rate for customers who make contact to Dakota at Home, South Dakota's Aging & Disability Resource Center (ADRC), by Federal Fiscal Year (FFY) end 2020.
2. Increase the number of Medicaid enrolled providers that offer services for more than one of South Dakota's Home and Community Based Services (HCBS) Waiver programs to 10 by Federal Fiscal Year (FFY) end 2020.

Appendix A

Pre-Employment Transition Services

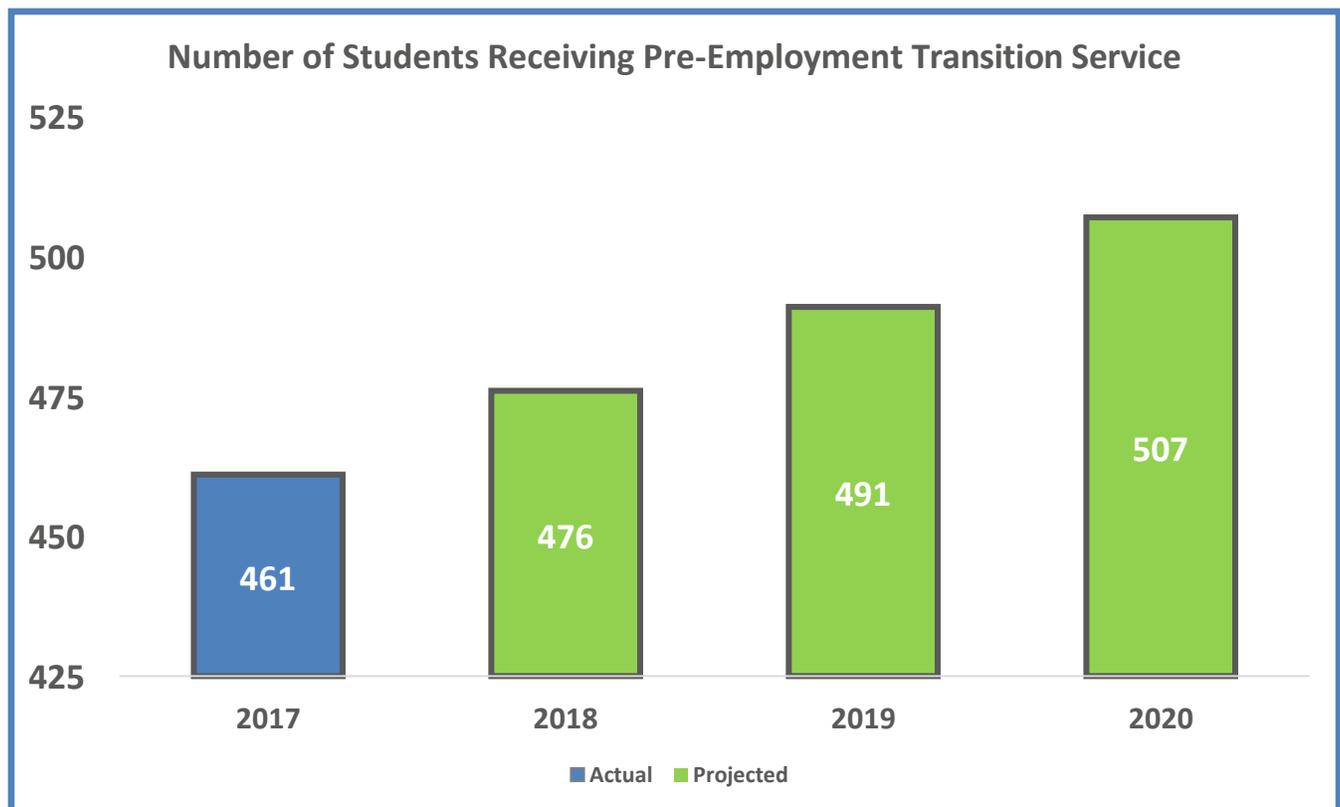
Increase the number of students receiving Pre-Employment Transition Services by 10% by Federal Fiscal Year (FFY) year end 2020.

Current Number of Students	DHS Target
461	507

Significance: Research shows that South Dakota students with disabilities who participate in Vocational Rehabilitation and receive Pre-Employment Transition Services are 60% more likely to be employed or in post-secondary education after they graduate from high school. Under the Workforce Innovation and Opportunity Act, 15% of the VR funds must be used for services that facilitate the transition of such students from the receipt of educational services in school to postsecondary life.

Definition: Pre-Employment Transition Services defined in 34CFR§361.48(a)(2) includes job exploration counseling, work-based learning experiences, counseling on opportunities for postsecondary, workplace readiness, and self-advocacy trainings.

Data Source: VR Federal Case Service Report.



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Goal One Objective Two

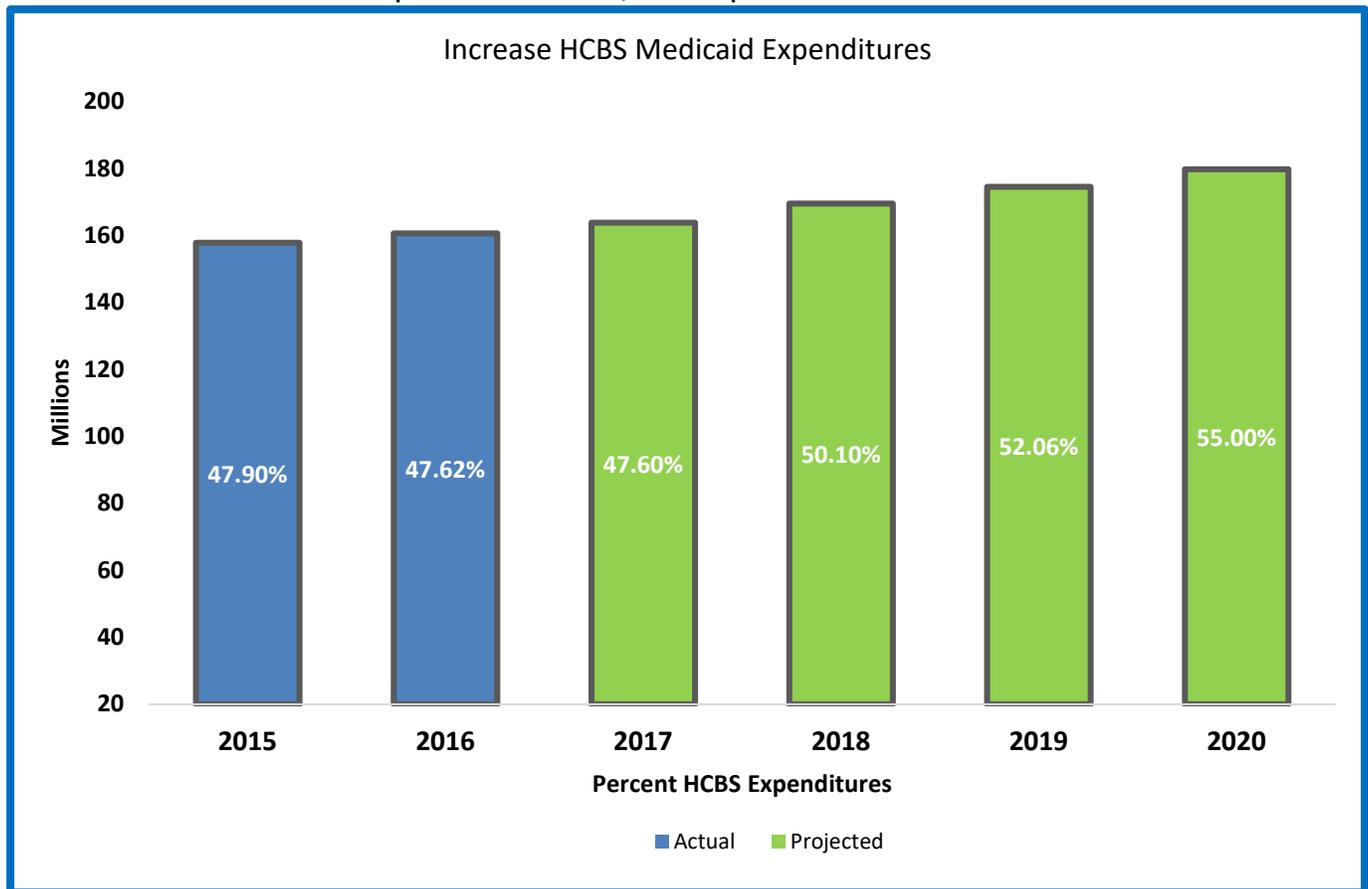
Rebalancing of Medicaid Expenditures

Increase the percentage of Medicaid expenditures going to HCBS for individuals with disabilities from 47.9% in 2016 to 55% by Federal Fiscal Year (FFY) end 2020.

SD 2015 HCBS*	2020 Target	U.S. Median
47.9%	55%	*51%

Significance: Despite an overwhelming preference among people to receive services in their home and communities, many Medicaid expenditures continue to be spent on institutional care. As people live longer and grow older, the need for supports will increase significantly. Developing and sustaining a high- performing system of care, complete with robust home and community options, will be imperative for sustainability of the long-term services and supports system.

Data Source: Medicaid Expenditure Data, SD Department of Social Services.



* Medicaid.gov – community-based services by state

Person Centered Planning

Ensure 100% of individuals with disabilities receiving Home and Community Based Services (HCBS) will have a person-centered plan that contributes to a good life as defined by that person by year end (YE) 2020.

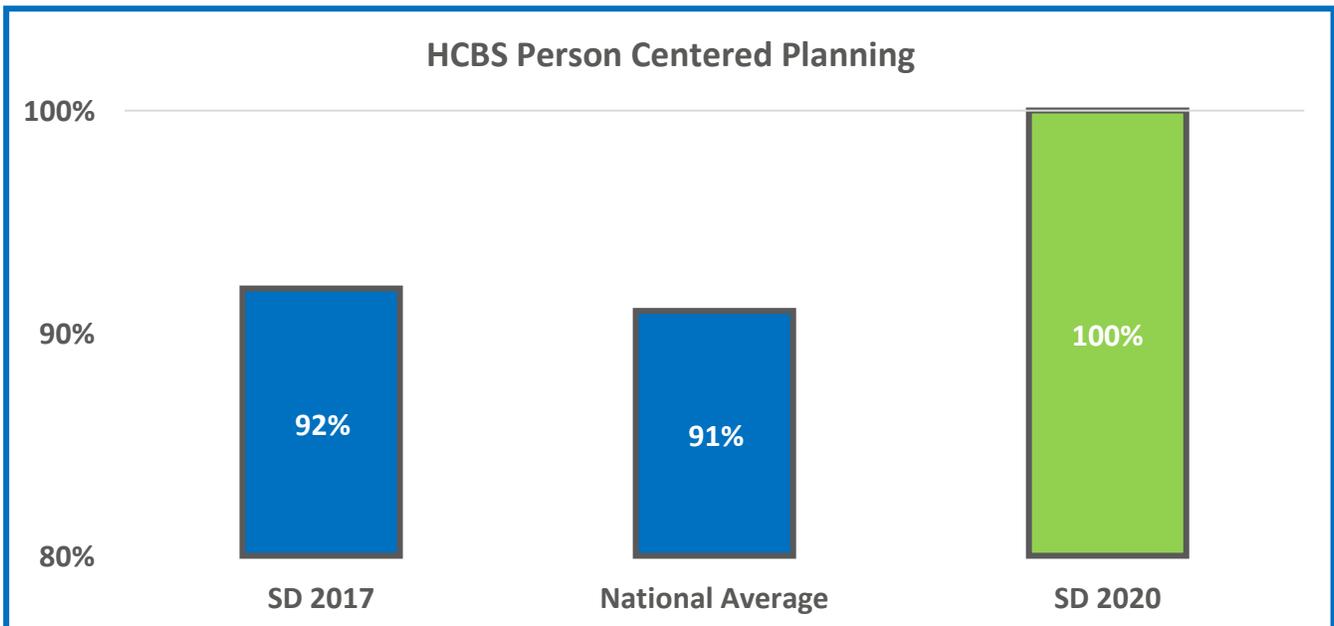
Current Rate	2020 Target	U.S. Average
92%	100%	91%

Definition: Percent waiver participants who have a good life as they define it as a result of HCBS services and supports.

Significance: The Home and Community Based Services Settings Final Rule requires “person centered planning that that addresses health and long-term services and support needs in a manner that reflects individual preferences and goals, reflects services and supports (paid and unpaid) provided, and assists the individual in achieving personally defined outcomes in the most integrated community setting.” All services and supports provided or facilitated by DHS should be designed in a manner that is directed by the individual with disabilities with the contribution others chosen by the individual.

Data Source: National Core Indicators Adult Consumer Survey 2015-2016.

Statistical Trend:



**DHS Strategic Plan
LTSS HCBS Workgroup**

Goal Two Objective One

**Aging and Disability Resource Center Contacts:
Dakota at Home**

Increase the number of contacts to Dakota at Home, South Dakota’s Aging and Disability Resource Center (ADRC), to 14,000 by Federal Fiscal Year end 2020.

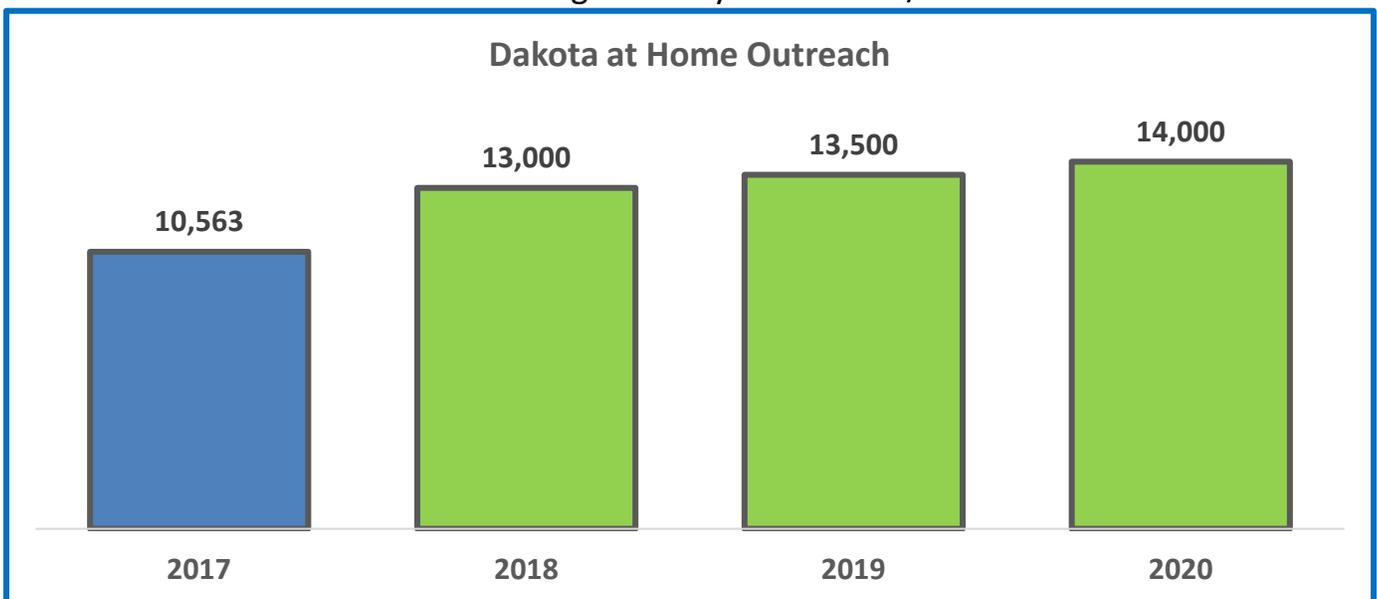
Dakota at Home 2017 Contacts	2020 Target
10,563	14,000

Significance: South Dakota’s No Wrong Door system streamlines access to Long Term Services and Support options for all populations and all payers. Tailored support is the heart of the Person and Family Centered Practice approach and an essential component of the No Wrong Door network.

No-cost options counseling services through Dakota at Home minimize confusion, enhance individual and family choices, and support informed decision making through program outreach, referrals, assessments, functional and financial eligibility determinations.

Definition: Contacts including phone calls, email or in-person visits to the ADRC center per federal fiscal year.

Data Source: Social Assistance Management System Intake/Referral Data Center.



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Goal Two Objective Two

Expanding Service Options

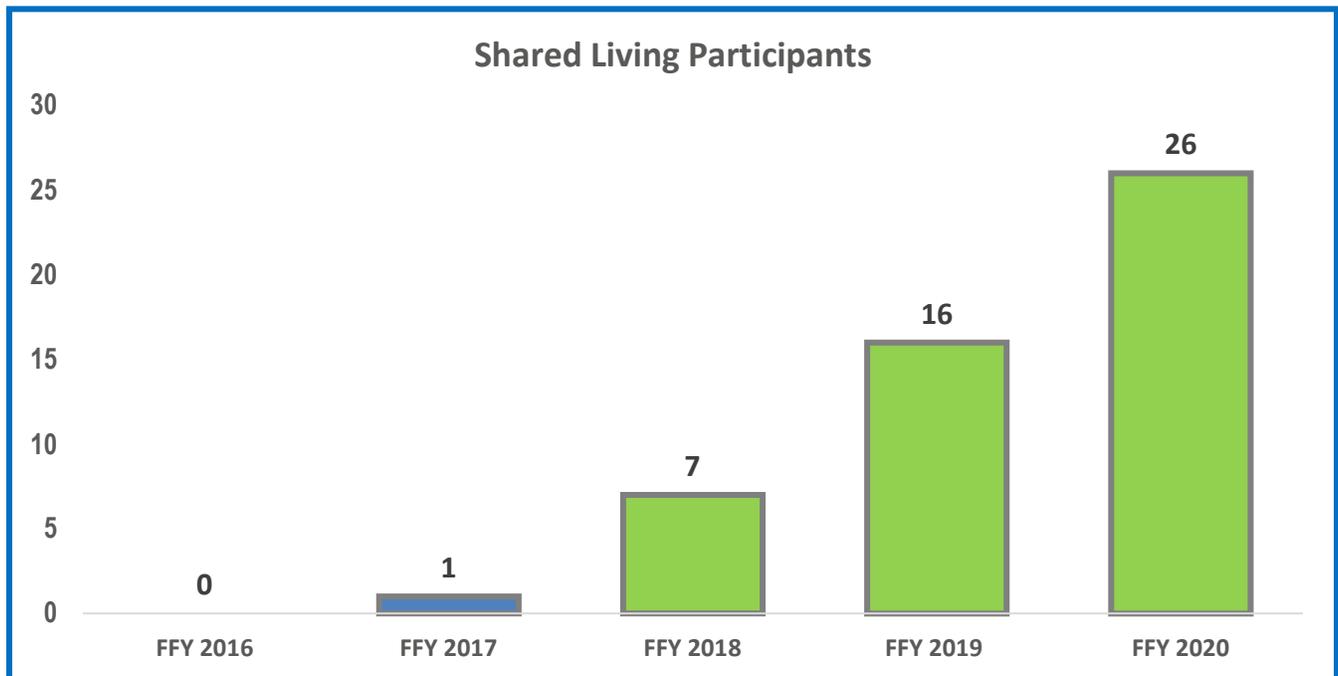
Expand service options by increasing the number of program participants receiving supports through Shared Living by 25 people by Federal Fiscal Year (FFY) end 2020.

2017 Shared Living Participants	2020 Target
1	26

Significance: Shared Living offers an independent and person-centered approach to delivering the supports a person with a disability needs to remain successful in their community. Shared Living is a cooperative sharing of space and supports between adults. The person with a disability becomes part of the fabric of the Shared Living Home Provider’s life, the provider’s family, home and community. The Shared Living model is proven to be a good means for providing true inclusion in a person’s community when the individual is matched and well supported by the Shared Living Home Provider.

Definition: A person without a disability becomes the support caregiver for the person with a disability. Shared Living can include Host Family Homes Companion Care Structured Family Caregiving, and Community Living Homes.

Data Sources: Data sources includes DDD and LTSS waiver performance.



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Goal Three Objective One

Respite Care Provider Directory

Increase the availability of respite care providers listed on the Respite Care directory from 0 in Federal Fiscal Year (FFY) 2017 to 50 across the state by FFY end 2020.

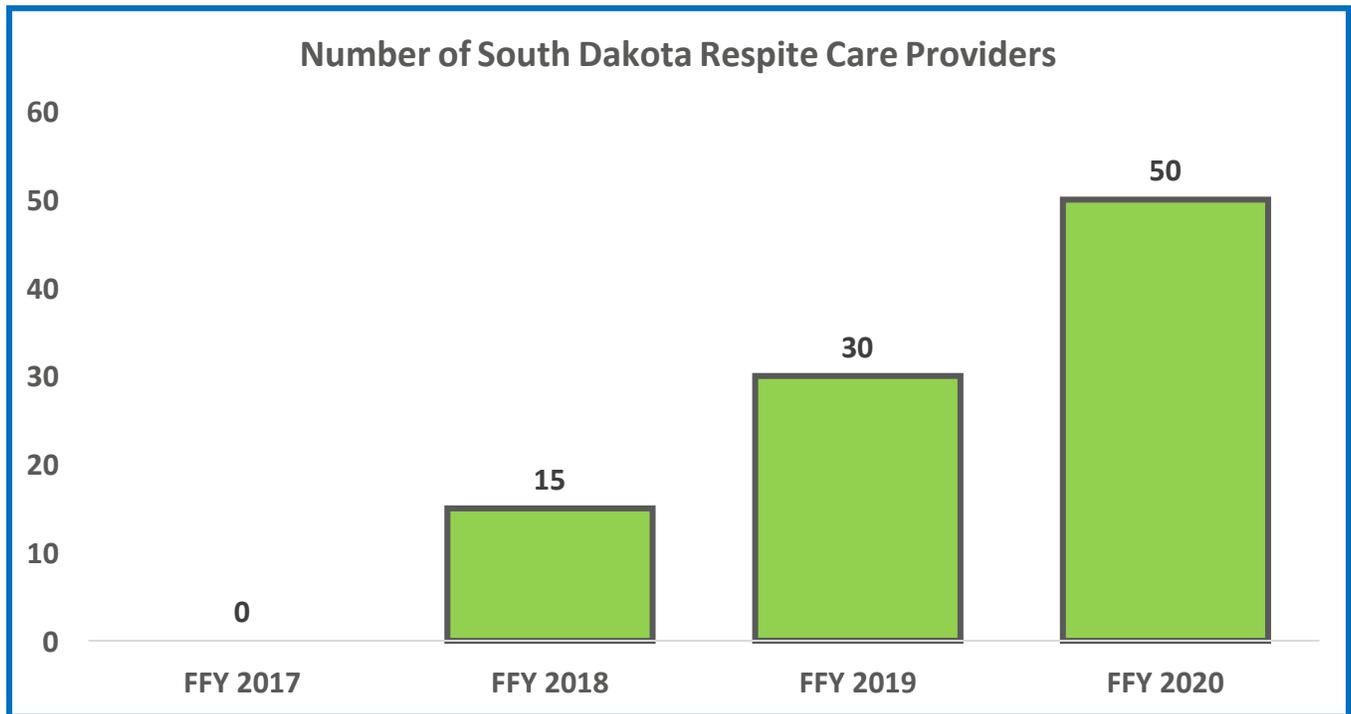
2017	2020 Target
0	50

Significance: Respite is one of the most important components in alleviating caregiver stress; respite breaks add longevity to a caregiver’s ability to support their loved ones and family at home for lengthy periods of time.

Definition: Individuals providing respite (excluding agency providers) included on the South Dakota Respite Coalition Directory that are experienced, able and willing to provide respite care.

Data Source: South Dakota Respite Coalition Respite Provider Directory.

Statistical Trend: FFY (Oct 1-Sept 30).



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Goal Three Objective Two

Supporting People Through Technology

Increase the percentage of waiver participants utilizing technology that promotes independence and reduces reliance on paid supports 10% by Federal Fiscal Year (FFY) end 2020.

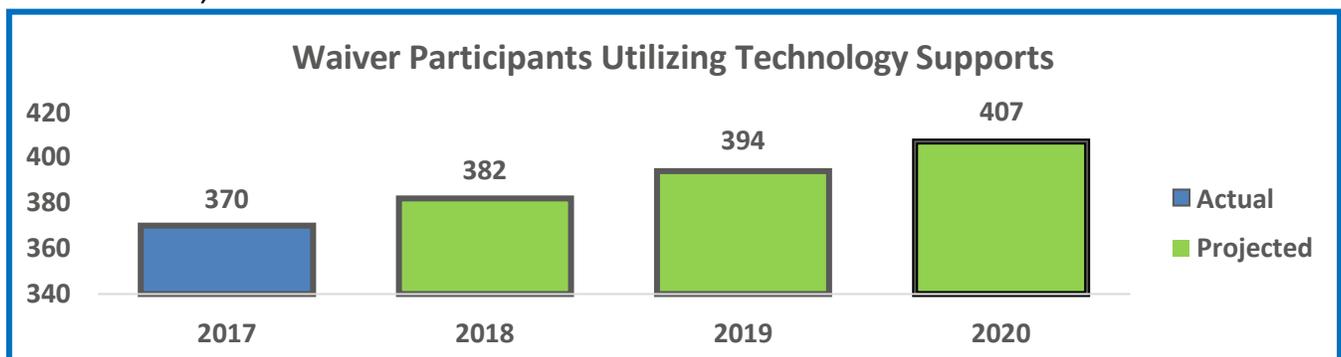
2017 Tech Supported Participants	2020 Target
370	407

Significance: Technology is an integral part of contemporary lifestyles; a majority people rely on various devices and applications to assist them in daily life. Technology is another tool to support persons with disabilities on their terms. DHS envisions waiver participants living independently or with their families as valued members of the community. Technology also offers support providers flexibility to reallocate staff resources and increase the goal of community integration.

Definition: High-tech devices can help those with disabilities lead full and fulfilling lives. For the purposes of this goal, the DHS monitors the use of the following technologies:

- Remote supervision to include: sensors, cameras, or similar real-time supervision
- Personal Emergency Response Systems (PERS)
- Telehealth
- Applications (apps) that assist a person to complete daily activities more independently (reminders, instructions, transportation directions, etc.)
- Medication Administration devices

Data Sources: Division of Developmental Disabilities technology programs within CHOICES waiver; Division of Long Term Services and Supports technology service within HOPE waiver, and Division of Rehabilitation Services within ADLS waiver.



DHS Strategic Plan

Goal Three Objective Three

Expand Departmentwide Person Centered Training

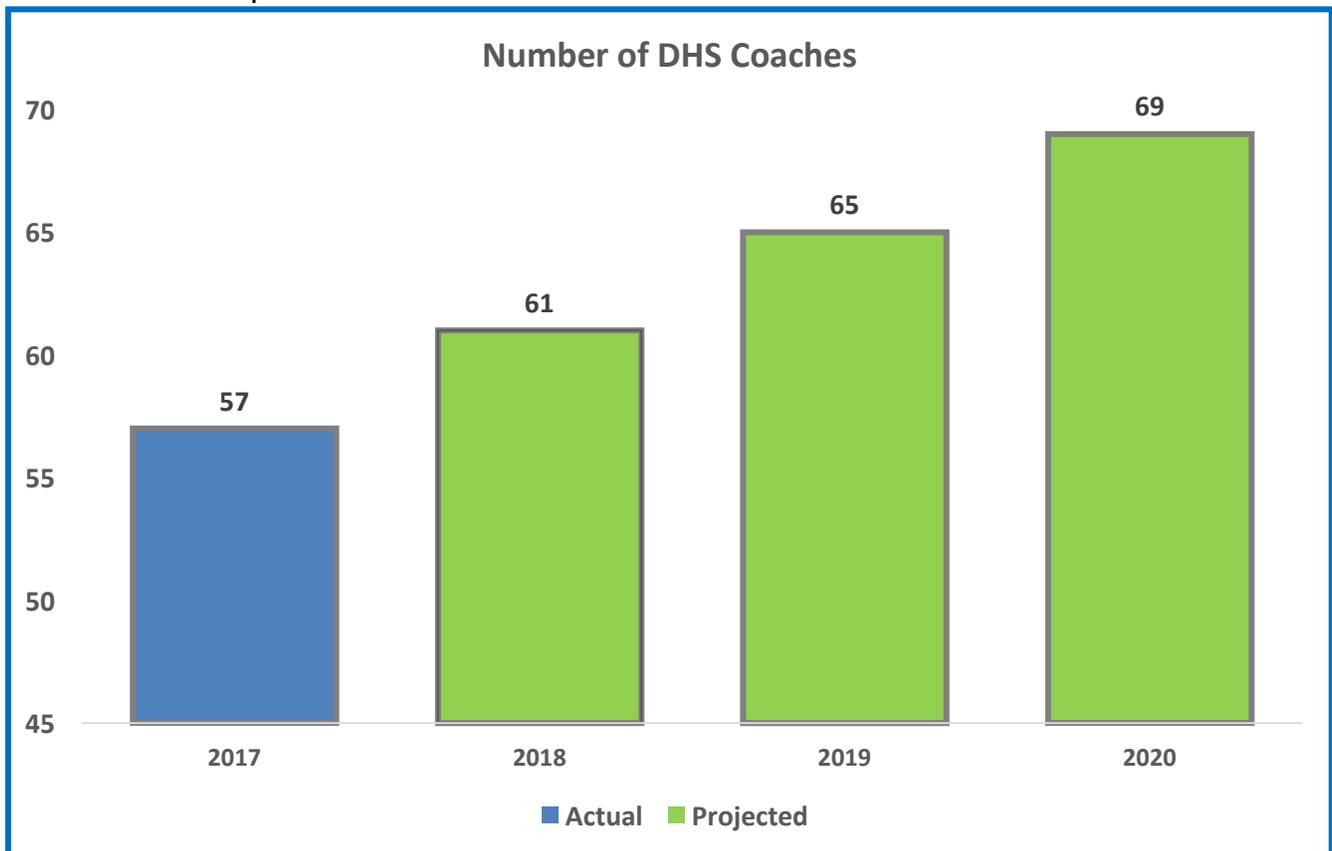
Expand Person Centered Training knowledge and skills department-wide by increasing the number of coaches 20% by year end (YE) 2020.

Number of Coaches in 2017	2020 Projected Number of Coaches
57	69

Significance: Employees who complete the Person Centered Coaches Training are prepared as mentors to implement person centered practices that result in collaborative, integrated, and more desirable outcomes for supported individuals.

Definition: The number of staff completing the Person Centered Training Program who become a coach.

Data Sources: Department of Human Services Records.



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Goal Four Objective One

Dakota at Home Customer Satisfaction

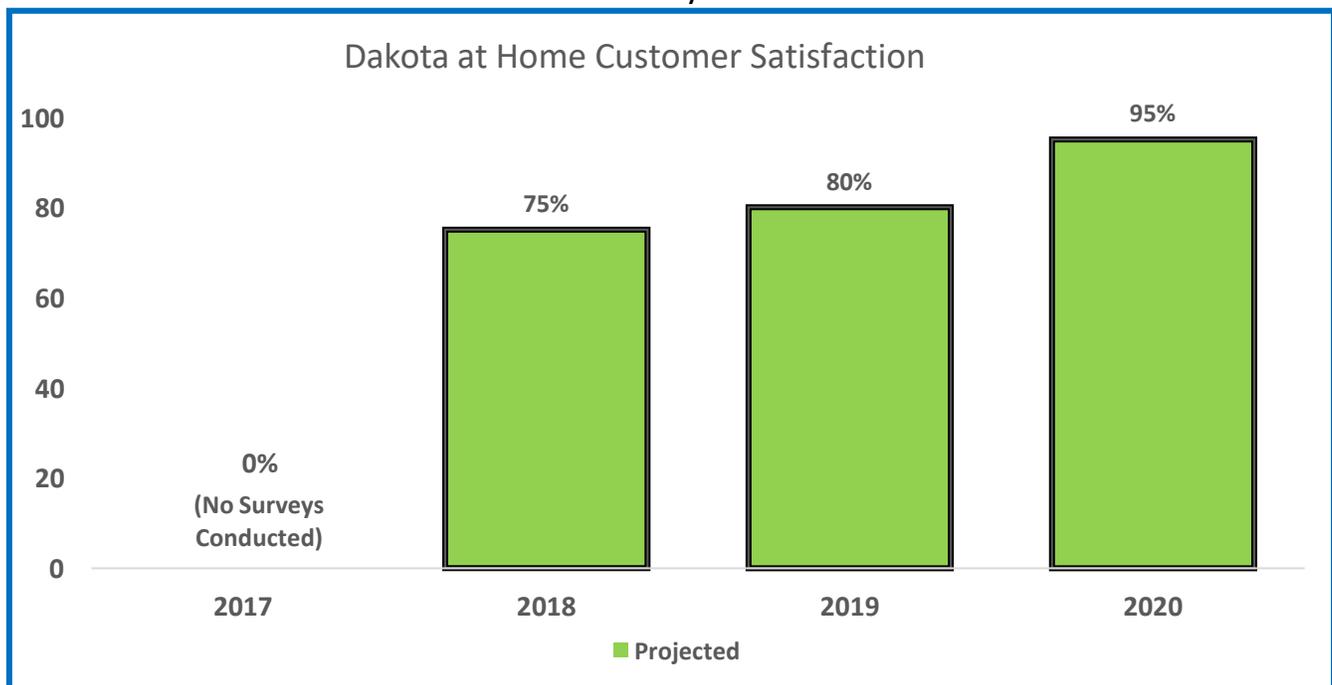
Ensure a 95% satisfaction rate for customers who make contact to Dakota at Home, South Dakota’s Aging and Disability Resource Center (ADRC), by end of Federal Fiscal Year (FFY) 2020.

2017 Satisfaction Rate	2020 Target Rate
Not Applicable	95%

Significance: Promoting the No Wrong Door system through Dakota at Home is a state initiative that streamlines access to long term services and supports for all populations regardless of support needs. Dakota at Home contacts satisfied during their initial call are likely to share positive feedback with others and call back for future assistance. The Division of Long Term Services and Supports has developed a survey process for a percentage of received calls to assess and monitor customer experience and satisfaction.

Definition: Ongoing and random follow ups made monthly to customers communicating with Dakota at Home.

Data Source: Dakota at Home call back surveys.



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Goal Four Objective Two

Expand Service Delivery Models

Increase the number of Medicaid enrolled providers that offer services for more than one of South Dakota’s Home and Community Based Services (HCBS) Waiver programs from 1 in 2016 to 10 by Federal Fiscal Year (FFY) end 2020.

FFY 2016	2020 Target
1	10

Significance: To augment South Dakota Medicaid serving more individuals in their homes and communities, with better cost-effectiveness, it is vital for Medicaid providers to increase the range of services offered and expand beyond their typical clientele.

Definition: Medicaid enrolled in-home services providers who provide services for South Dakota’s four HCBS Waiver programs, including the HOPE waiver, CHOICES waiver, Family Support 360 waiver, and ADLS waiver.

Data Source: Medicaid Provider Enrollment Database.

Statistical Trend: Number of providers who are enrolled with SD Medicaid to provide services under more than one HCBS.

