

IOWA DEPARTMENT of ELDER AFFAIRS

PERFORMANCE REPORT

December 14, 2004

Performance Results Achieved
for Fiscal Year 2004

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INTRODUCTION

I am pleased to present the fiscal year 2004 (July 1, 2003 - June 30, 2004) performance report for the Iowa Department of Elder Affairs. This report contains information about the services Iowa Department of Elder Affairs and its partners provided for Iowans during the past fiscal year in the area of services for older Iowans, in relationship to requirements under Iowa's Accountable Government Act and in an effort for the Department to review, analyze and improve our performance planning and results.

The report includes major accomplishments as well as a review of how we did compared to our planned results. In summary:

The Department of Elder Affairs, through the Area Agencies on Aging and the Iowa Aging Network provided services to over 61,225 older Iowans needing at least one home and community based service under the federal Older Americans Act (OAA) and associated state funded programs, for which client registration is needed. Services include case management, assisted transportation to doctors and pharmacies, home delivered and congregate meals, chore, personal home health care and homemaker, respite, and adult day services, as well as dozens of other services that don't require client registration, serving many thousands of additional older Iowans. The average annual cost, based upon registered clients was less than \$500 per client.

Over 14,000, low and moderate income older Iowans were also

provided services under the Senior Living Program. This funding source is only available to older Iowans meeting specific income restrictions. As with OAA funding many but not all of the services provided under this program assist older Iowans in remaining living independently (with support) and delay or avoid costly nursing home care. The average annual cost per client under this program was less than \$590.

Our Network also provided access to the Iowa Department of Human Services Medicaid Elderly Waiver for over 6,200 older Iowans. Low income older Iowans, whose needs would qualify them for nursing home care, gain access to the Elderly Waiver through the Case Management Program for the Frail Elderly (CMPFE) and maintain them in their own homes or apartments. Under the Elderly Waiver the average client cost was \$504 per month, far less than the average monthly nursing home cost of over \$3,000 per month.

Major cuts in budgets and staff, impacted our ability to meet many of our performance goals for FY04. However, we still had some many good results. Of particular note:

- A smaller percent of older Iowans served by the Case Management Program for the Frail Elderly (CMPFE) left the program to enter a nursing home, which means we were able to reduce the overall cost of long term care and assist many frail older Iowans in avoiding premature or unnecessary institutional care.

- Through aggressive grant writing efforts we not only maintained our overall level of resources but also increased them slightly. It is important to note that most of these grant efforts relate to long-term system change or improvement efforts, rather than actual service funding for older lowans.

One of the major lessons learned during this first official attempt to do Performance Planning related to the Accountable Government Act is that measures should be built upon existing processes and reporting mechanisms, rather than attempting to create new data sources and processes. This is particularly true during times of budget cuts and diminished staff resources.

You'll see many cases when we were unable to attain our targets or measures because the data and systems to collect data we wanted to rely on were not readily available and/or no resources were available to analyze data. Whenever possible we need to tie our measures to existing data and reporting systems to avoid creating costly redundant data collection, even though we may not have as much control over the implementation or changes in those systems. To do otherwise necessitates taking funding away from services to Older lowans in order to pay for the collection or analysis of duplicative data; this is simply an approach we find contrary to the mission of the department.

Key strategic challenges the agency is working to address are:

- An apparent general lack of understanding or acceptance of the fact that our primary funding

source (the federal Older Americans Act) requires that we advocate on behalf of older lowans regarding public policy, state laws and rules which impact them.

- Continued and increasing documented unmet needs for older lowans
- Inadequate resources to address critical service and system needs of older lowans
- Iowa will experience a rapid growth of aging population and needs to plan for the impact it will cause across various our society
- Changing expectations of older lowans and their families and communities
- A continued political, financial and systematic bias and support of nursing home and other institutional service settings over lower cost home and community based services, which are preferred by most older lowans.
- In 2003, the department was given responsibility to establish policy for assisted living, adult day services and elder group homes with no appropriation. Already limited department resources are being diverted to support this mandate.

We invite all citizens, businesses, and non-profit organizations in Iowa to join with Iowa Department of Elder Affairs and its partners to make Iowa a healthy, safe, productive and enjoyable place to live and work for older lowans and all our citizens.

Sincerely,

Mark A. Haverland
Director, Iowa Department of Elder Affairs

AGENCY OVERVIEW

Vision: Iowa Department of Elder Affairs (IDEA) envisions a future where: "Iowa will be a destination for older people where they find a welcoming community that offers ample opportunities to live, work, recreate, learn, and volunteer."

The Iowa Department of Elder Affairs exists to respond to the needs and opportunities of an aging society by promoting and providing a continuum of services and choices for older Iowans. We provide leadership to both empower and enhance the lives of older persons through choices, services, protection and respect. As Iowa's aging population continues to increase, we must be prepared to meet, and exceed older Iowans' changing needs while being cognizant of such effects on families and communities.

Under both the Older American's Act and the Elder Iowans Act, the Department has the responsibility to serve as an effective and visible advocate for older individuals. This is to be accomplished by reviewing and commenting upon all state plans, budgets, and policies which affect older individuals and providing technical assistance to any agency, organization, association, or individual representing the needs of older individuals. The Department develops, submits and administers a state plan under the Act in cooperation with the Administration on Aging. Elder Affairs is primarily responsible for the planning, policy development, administration, coordination, priority setting, and evaluation of all state activities related to the objectives of

these Acts along with administering dozens of other associated activities.

Mission: To provide advocacy, educational, and prevention services to older Iowans so they can find Iowa a healthy, safe, productive, and enjoyable place to live and work.

Partners in achieving the vision and mission include the Area Agencies on Aging, Long-term Care Facility industry, Alzheimer's Association Chapters, Assisted Living Programs, adult day services, the department commissioners and many other colleagues and organizations committed to providing quality services to all Older Iowans, their families and caregivers, both in the home and community based service settings as well as, facility based service settings. In addition to targeting services to frail, vulnerable, and underserved elders, we fund and provide supportive services to elders, their families, and caregivers so older Iowans receive appropriate care in the setting of their choice.

IDEA's Core Functions:

Advocacy - Advocates for changes in policy, practices and programs that potentially or actually impact specific populations of Iowans. Activities may include public hearings; policy development; conferences; awareness presentations and seminars; research, analysis and information dissemination; outreach and referral; coalition building; and empowerment.

Health Care and Support Services - Provide individual, community based and facility based prevention services, health care, long-term health care, mental health, and substance abuse prevention

and treatment. Activities may include funding community based services and prevention, targeted case management, acute psychiatric inpatient care, and outpatient psychiatric, outpatient and in-patient substance abuse and chemical dependency treatment, nursing, food and nutrition, pharmacy, and medical services. May also include the provision of publicly funded children and adult health insurance coverage and partnering with public and private entities to secure access to services.

Research, analysis and information management - Provides relevant information and technical services in a timely manner to customers, stakeholders and policy makers to help make informed decisions. Activities may include collection, analysis, management, interpretation and dissemination of information.

Resource Management - Provides all vital infrastructure needs necessary to administer and support agency operations. Key activities may include financial and personnel services such as payroll, accounting and budget; purchasing of goods and services; media management; information technology enhancement, management and support; staff development; leadership; planning; policy development; maintenance of physical infrastructure and governance system development to achieve results for Iowans.

IDEA is a department within the executive branch of Iowa state government, as established by Iowa Code Chapter 231. The Department of Elder Affairs has 7 citizen and 4 legislative Commissioners and had 27.75 authorized FTEs (Full Time

Employees) of which 26 were filled for most of the fiscal year. All IDEA staff are housed in our Des Moines, Iowa office in located at 200 10th Street, Clemens Building, 3rd Floor.

IDEA is an administrative and advocacy organization, which partners with many organizations affiliated with the aging network such as the thirteen Area Agencies on Aging, Alzheimer's Association Chapters, and a variety of other public and private sector organizations. Additionally, there is extensive ongoing collaboration with the Departments of Human Services, Public Health, Workforce Development, and Inspections and Appeals on many long-term care policies and program issues. These partnerships are the cornerstone for enhancing a comprehensive and coordinated delivery system for older persons and their families. Components of this long-term care system include creating a safe environment, making services accessible and providing alternatives and balance between institutional and non-institutional services.

Services, Programs and Activities

IDEA maintains contractual relationships with the network of thirteen designated local Area Agencies on Aging (AAA) within 16 regions of Iowa. Each AAA has at least one full-service office. Some AAA offices are housed in locations serving multiple functions, such as senior citizen centers, congregate meal sites, community colleges and others. Together with the local AAA service providers we provide the following types of Services, Programs and Activities:

- Advocacy on behalf of older Iowans;
- Administer internal & external functions;
- Education, training and public awareness regarding elder issues,

including enhanced access to public benefits;

- Mature Worker Program and Advocacy
- Development of grants and grant management
- Program management;
- Monitoring, accountability & assessment;
- Nutrition Services;
- Case Management Services
- Home and Community Based Services;
- Resident Advocate Committees on behalf of residents of licensed long term care facilities;
- Elder Abuse Prevention Services; and
- Assisted Living, Elder Group Home, Adult Day Service and other Policy Development.

Through a comprehensive web site, we also provide customer access to major services, 24 hours a day, seven days a week. The IDEA Web site is found at: www.state.ia.us/elderaffairs providing information about the department in general.

The regulatory environment influencing the organization includes:

Older Americans Act (OAA);
Administration on Aging;
Iowa Code;
Administrative Rules;
Grant Guidelines
Generally Accepted Accounting Principles (GAAP) Audit;
Department of Labor;
Legislative Mandates;
State and Federal audits;
Department of Administrative Services (DAS); and
Department of Management (DOM).

The Department relies on services from other state agencies such as: Revenue and Finance, Attorney General's Office, State Fire Marshall, Department of Administrative Services, Treasurer's Office, Department of Management, and the Legislative Service Agency.

STRATEGIC PLAN RESULTS

STRATEGIC PLAN

Key Strategic Challenges and Opportunities: Iowans increasingly want to remain in their homes for longer periods which means that they enter long term care facilities at a later age, stay for shorter periods of time and are more infirm while there. This requires that people have more services delivered to their homes or in congregate settings in the community, that caregivers shoulder more responsibility for care and that care providers at all points in the continuum deal with people who need high levels of care. This means that DEA will have to provide additional and more intense services to the frail elderly.

Goal # 1: The DEA will increase the percent of eligible Iowans who receive Long Term Care services in their homes and congregate community settings.

Strategies: DEA will expand the support services and case management services for the frail elderly, their families and caregivers.

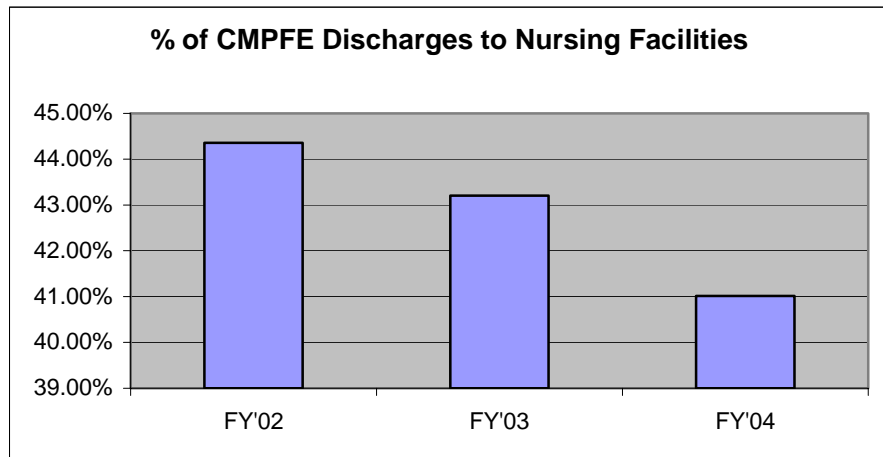
Results

Performance Measure:

% of those discharged from the Case Management Program for the Frail Elderly (CMPFE) who are transferred to a nursing home.

Data Sources:

Iowa Department of Elder Affairs Monthly CMPFE Reports



Data reliability: The data has been collected reliably for many years from the thirteen Area Agencies on Aging administering a uniform assessment of frail Iowans age sixty and older, developing and managing their individualized care plans so they can continue living independently in their own homes and community.

What was achieved: The goal was achieved since the intent of CMPFE is to defer or eliminate the need for nursing home placement.

Analysis of results: Despite lowering the percent of older Iowans being discharged from CMPFE to a nursing home, a better measure of success is the rate per 1000 older Iowans who access the Medicaid Elderly Waiver through the CMPFE program and maintain their independence in their own homes. These older Iowans are: 1) 65 years of age and older, 2) low income and 3) meet the same health status criteria as persons on Medicaid in nursing homes. The average monthly service cost to Medicaid is approximately \$500 versus nearly \$3,000 in the nursing home setting.

Link(s) to Enterprise Plan: None

STRATEGIC PLAN RESULTS

STRATEGIC PLAN

Key Strategic Challenges and Opportunities: People are healthier and more active for more years after the traditional retirement age. They will want, demand and require additional services not now provided for the well elderly.

Goal # 1: The DEA will expand opportunities for employment, lifelong learning, volunteerism and recreation for the well elderly.

Strategies: The DEA will expand the programs and participation at Senior Centers

Results

Performance Measure:

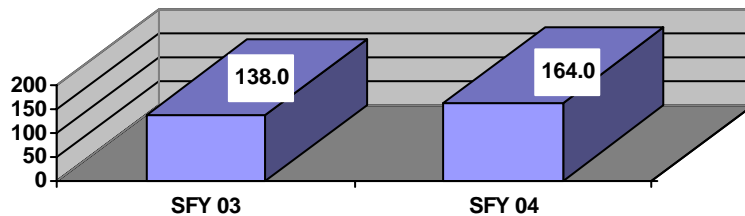
of elderly congregate meal participants

	Participants
SFY 03	76,873
SFY 04	91,476

Data Sources:

Quarterly National Aging Program information System (NAPIS) reports from the thirteen Area Agencies on Aging (AAAs)

Congregate Meal Program
Rate Per 1000 60+



Data reliability: The NAPIS system has been in place for over a decade, though it has experienced some infrequent changes in reporting software and reporting expectations. It is quite stable as a multi-year source.

What was achieved: The rate per 1000 of 60+ older lowans receiving congregate meals from Iowa Aging Networks nutrition programs have increased from 138 to 164. The number of all congregate meal participants increased from 76,873 in SFY03 to 91,476 SFY 04.

Analysis of results: The data collected and analyzed was somewhat more expansive than the original concept. It included not only congregate meals, but also home delivered meals and nutrition counseling, from the perspective of the rate of older lowans per 1000. With growing numbers of older persons, cost efficiencies and creative ways to interest older persons who can benefit from these programs in terms of nutritional and social health need to be continually explored. Other measures originally envisioned were not pursued because of limited resources to collect and analyze data and questionable relevance. They included: # of senior center participants, # of nutrition education participants, and # of AAA volunteers.

Link(s) to Enterprise Plan: None

STRATEGIC PLAN RESULTS

STRATEGIC PLAN

Key Strategic Challenges and Opportunities: People are healthier and more active for more years after the traditional retirement age. They will want, demand and require additional services not now provided for the well elderly.

Goal # 1: The DEA will expand opportunities for employment, lifelong learning, volunteerism and recreation for the well elderly.

Strategies: Re-vitalize and expand the Mature Worker Consortium, Older Worker Council and Senior Internship Program

Results

Performance

Measure:

of unsubsidized placements which last at least six months

of community service hours worked

Data Sources:

Older Americans Act Title V (Senior Community Service Employment Program – SCSEP) reports for the U.S. Department of Labor for the State of Iowa

Adequate data not available.

The estimate is 120,000 to 140,000 hours of community service during FY'04.

Data reliability: This data source continues to be incomplete and somewhat unstable due to continued delays in reporting decisions not being finalized at the federal level.

What was achieved: Due to decreasing resources our mode of operation within the state has been consolidated from twelve regional contractors to four regional contractors. The reporting system was also changed from a paper-based system to a computerized system, with obvious limitations.

Analysis of results: Limited analysis is currently possible due to changing reporting requirements and reporting system.

Link(s) to Enterprise Plan: None

STRATEGIC PLAN RESULTS

STRATEGIC PLAN

Key Strategic Challenges and Opportunities: Increasing numbers of people are caring for infirm and dependent friends and family members who resist institutional placement causing stress for the caregiver and productivity loss for employers of the caregivers.

Goal # 1: The DEA will increase the education, training and support services for family caregivers to enable them to provide care more effectively and with less damage to their own health and welfare.

Strategies: The DEA will distribute and monitor the Title III-E and other available resources to the AAAs for caregiver support and other groups

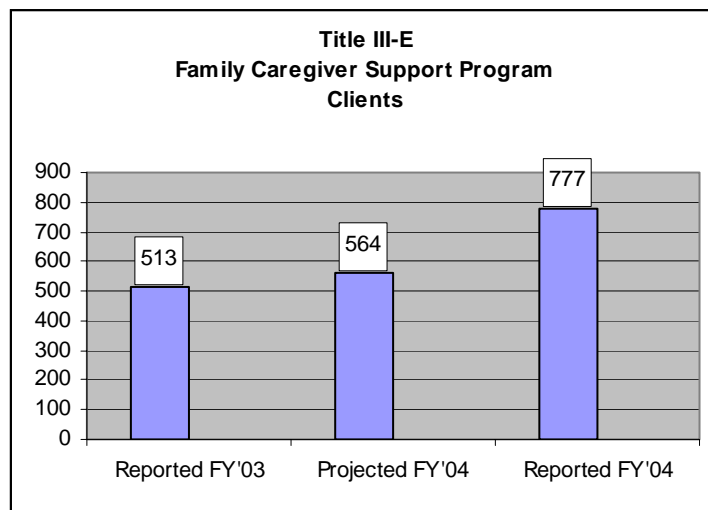
Results

Performance Measure:

Achieve a 10% increase in estimated unduplicated recipients of service

Data Sources:

Iowa NAPIS Reports – registered and estimated unduplicated clients



Data reliability: The federal Administration on Aging did not implement client data collections requirements until after the end of our state FY'04, therefore, much of the expected data for this measure was not available.

What was achieved: We exceeded our target of a 10% increase, instead we had a 51% increase.

Analysis of results: For federal FY '05 (beginning in October of 2004 and beyond) our reporting system implements the new federal requirements. Which will be more accurate than the data reflected above.

Link(s) to Enterprise Plan: None

STRATEGIC PLAN RESULTS

STRATEGIC PLAN

Key Strategic Challenges and Opportunities: Providers find it increasingly difficult to recruit and retain direct care workers thus affecting the quality of care that the frail elderly receive.

Goal # 1: The DEA will improve the quality of care to Iowa’s elderly.

Strategies: We will collaborate with The Iowa Caregivers Association, the long-term care industry providers and other groups to decrease direct care worker turnover rates and increase the supply of direct care workers.

<i>Results</i>	
<p>Performance Measure: Rate of turnover of CNA workers in nursing homes (as well as assisted living and adult day service programs, if appropriate data sources can be identified)</p> <p>Data Sources: <i>Iowa Caregiver’s Association Evaluation of CNA Mentor Program</i></p>	<p>None Available</p>

Data reliability: Methodology appears appropriate

What was achieved: Program was implemented to reduce the rate of turnover of CNA workers in long-term care. The Iowa Caregivers Association implemented a CNA mentor program. CNA’s who received mentor training were still working the same facility three months after they received training. More than one-third reported they had received a pay increase and ninety-seven percent reported being able to use skills learned in the mentor training workshops. All CNA’s were working at the same facility after six months.

Analysis of results: Mentor program appears to have had a positive impact on reducing CNA turnover rate.

Link(s) to Enterprise Plan: None

PERFORMANCE PLAN RESULTS

Name: Advocacy - (Core Function)

Description: Educate, train, inform, empower, and intervene with and on behalf of older persons and their caregivers to ensure full, fair and reasonable access and accommodations to needed public and private programs, services, resources and social and public policy

Why we are doing this:

One of the primary responsibilities under the federal Older Americans Act is to advocate on behalf of the elderly regarding problems, issues and needs they have in maintaining their independence and other issues of importance to the elderly and their families.

What we're doing to achieve results:

In addition to advocating for important legislative changes impacting the elderly, IDEA has been aggressively pursuing discretionary grants, especially those available for "systems change" activities to try to leverage a long-term impact and/or efficiency. We have identified what we believe is a more practical and affordable outcome measure to demonstrate results with existing data sources.

Results

Performance Measure:

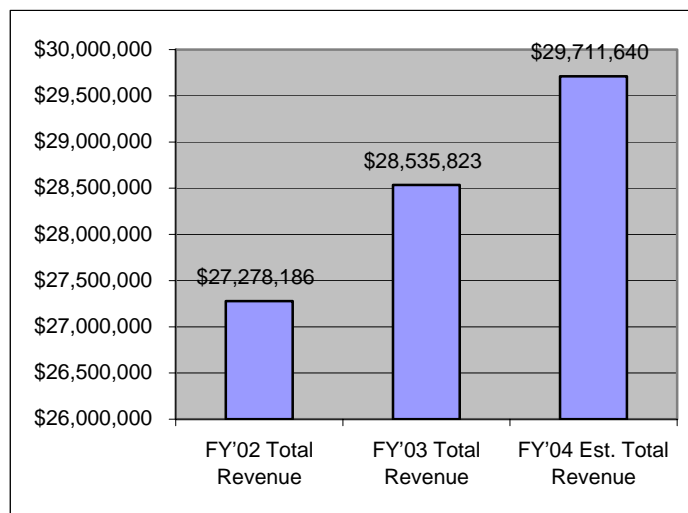
Maintain or increase revenues for department, area agencies and aging network to address needs of Iowa's elderly population.

Performance Target:

To maintain (or increase) the FY'03 financial resources during difficult budget times at both the state and federal level.

Data Sources:

Budget and financial records of the Iowa Department of Elder Affairs.



Data reliability: This is very reliable data, which successfully undergoes an annual financial audit by the Iowa State Auditor's Office.

Why we are using this measure: One measure of successful advocacy is to focus on the resources, which the Congress, General Assembly, Federal and State Executive branches and others appropriate towards issues of the elderly problems and programs intended to address those issues.

What was achieved: IDEA successfully met and exceeded our target, as displayed in the chart above.

Analysis of results: Despite success, we determined it is not a good "Advocacy" measure, since most additional funds have been grants for system improvements vs. elderly services funding. A better measure is a secondary outcome target: "Increase the rate of elderly per 1000 elderly population served"

Factors affecting results: As indicated earlier, IDEA has been aggressively pursuing federal, foundation and other funding sources to leverage "systems change" that impact older lowans.

Resources used: Total resources towards this Core Function were \$4,837,123 and 13.03 FTEs, sources are displayed at the SPA level.

PERFORMANCE PLAN RESULTS

Name: AAA ADVOCACY – (SPA)

Description: None

Why we are doing this: Under the federal Older Americans Act, one of the primary responsibilities of Area Agencies on Aging (AAA) is to advocate on behalf of the elderly regarding problems, issues and needs they have in maintaining their independence and other issues of importance to the elderly and their families.

What we're doing to achieve results: We have identified what we believe is a more practical and affordable outcome measure to demonstrate results with existing data sources.

Results

Performance Measure:

Percentage of recipients who report satisfaction with services.

None

Performance Target:

Establish Baseline

Data Sources:

None

Data reliability: None - The needed data is currently not available and cannot affordably be gathered during time of budget reductions.

Why we are using this measure: The measure was anticipated being established in concert with Federal Performance Outcome Measures, which as of 11/29/04 are still far off.

What was achieved: The measure was not measurable or attainable

Analysis of results: None

Factors affecting results: At least in times of limited resources, it appears the federal authorities have determined they could not proceed with prescribed processes to measure customer satisfaction (for which existing elderly service funding would have had to have been used).

We have identified what we believe is a more practical and affordable outcome measure to demonstrate results with existing data sources. The anticipated measure for FY'05 will be associated with maintaining the ratio of older lowans per 1000 who access one or more services.

Resources used: Resources associated with this SPA, at the Area Agency on Aging level (community) included General Funds of \$278,019, SLP of \$62,609 and \$1,383,938 of federal funds, or a total of \$1,724,566. There are no State FTE's associated with the SPA.

PERFORMANCE PLAN RESULTS

Name: ADVOCACY, INFORMATION & ABUSE AWARENESS – (SPA)

Description: Work for the development of efforts that maintain &/or enhance: a) outreach & intervention services to older lowans (individually & as a whole), their families and caregivers - related to access, rights, protections, programs, & services; b) public awareness, education & training, programs, referral & assistance regarding the rights, programs, services, prevention & intervention related to elder abuse, neglect & exploitation, including administrative oversight of Elder Abuse Initiatives.

Why we are doing this: Under the federal Older Americans Act, one of our primary responsibilities is to advocate on behalf of the elderly regarding problems, issues and needs they have in maintaining their independence and other issues of importance to the elderly and their families.

What we're doing to achieve results: Provide public awareness, training, system enhancements, as well as assessment & coordination of services that support vulnerable older lowans & those who are victims of elder abuse & neglect; while advocating for needed change and or improvements in related legislation and systems.

Results

Performance Measure: *Percentage of recipients who report satisfaction with services.*

Performance Target: 80% of respondents report satisfaction with services

Data Sources:
None

None

Data reliability: None - The needed data is currently not available and cannot affordably be gathered during time of budget reductions.

Why we are using this measure: The measure was anticipated being established in concert with Federal Performance Outcome Measures, which as of 11/29/04 are still far off.

What was achieved: The measure was not measurable or attainable

Analysis of results: None

Factors affecting results: At least in times of limited resources, it appears the federal authorities have determined they could not proceed with prescribed processes to measure customer satisfaction (for which existing elderly service funding would have had to have been used). We have identified what we believe is a more practical and affordable outcome measure to demonstrate results with existing data sources. The anticipated measure for FY'05 will be associated with maintaining the ratio of older lowans per 1000 who access one or more services. In terms of Elder Abuse initiatives, for which we had planned the same type of customer satisfaction targets, our FY'05 plan calls for measuring the % of DHS dependent adult abuse complaint confirmation rates in Elder Abuse Initiative counties vs. non Elder Abuse Initiative Counties.

Resources used: Resources associated with this SPA included \$167,620 General Funds, \$556,952 and \$518,495 of federal funds, or a total of \$1,243,294. There were 7.6 FTE's associated.

PERFORMANCE PLAN RESULTS

Name: OMBUDSMAN Activities – (SPA)

Description: Provide information, training, advocacy and mediation services for lowans in nursing homes so they can be healthy and safe.

Why we are doing this:

Under the Older Americans Act the Long Term Care Ombudsman is charged with advocating for both individuals rights and quality as well as system change that benefit residents of nursing homes and other institutional care settings.

What we're doing to achieve results: For individual residents of facilities the issues are often related to misunderstood “resident rights” as opposed to violations of laws.

Results

Performance Measure:

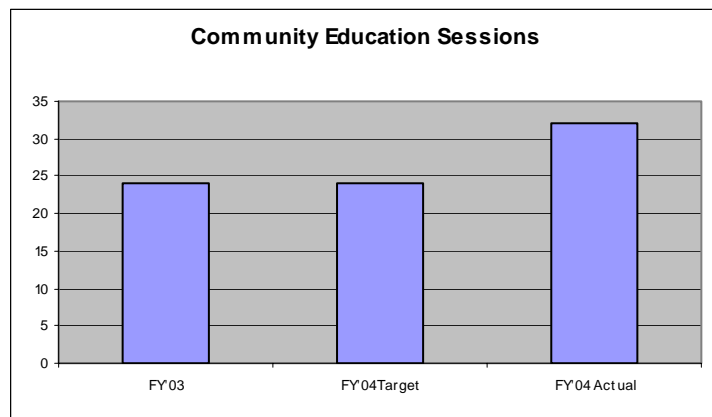
of Comm. Education Sessions

Performance Target:

Maintain the level of 24 sessions provided during FY'03.

Data Sources:

Data maintained by the Office of the Long Term Care Ombudsman.



Data reliability: Consistent and stable, though no longer associated with federal Ombudsman data requirements.

Why we are using this measure: The long-term care ombudsmen work to balance resident rights with facility rules and state and federal regulations to ensure that residents are able to have choices about lifestyles, care and treatment and activities. It is one indicator of activity that focuses on expanding the work of the Office of the long Term Care Ombudsman, who has limited staff so educating families, friends, volunteer advocates, etc., expands the “eyes and ears” of the office of the LTC Ombudsman.

What was achieved: Provided education and information for people regarding the long-term care system, resident rights, facility rules and state and federal regulations

Analysis of results: We exceeded our target and continued calls received from the general public for information and assistance.

Factors affecting results: During this fiscal year, 2 ombudsmen covered the entire state. AoA recommends one ombudsman for each 2,000 beds, and during this fiscal year, each ombudsman had 19,000 beds. With increased staff, more programs can be scheduled.

Resources used: Resources associated with this SPA included \$145,561 General Funds, \$121,836 SLP and \$324,887 of federal funds, or a total of \$592,285. There were 3.97 FTE's associated.

PERFORMANCE PLAN RESULTS

Name: EMPLOYMENT - Senior Internship Program – (SPA)

Description: DEA will expand opportunities for employment, lifelong learning, volunteerism and recreation for the well elderly by revitalizing & expanding the Mature Worker Consortium, Older Worker Council & Senior Internship Program

Why we are doing this: 50% of unsubsidized placements last at least 6 months after placement

What we're doing to achieve results: Identify, monitor and assist contractors who can effectively deliver training & placement services to older lowans so they be successfully employed.

Results

Performance Measure:

% of participants privately employed at least 6 months

Insert chart or graph

Performance Target:

50% of unsubsidized placements last at least 6 months after placement

Data Sources: Department of Labor Quarterly Program Reports

Data reliability: Accurate data for this measure will not be available until after Fiscal Year 2004.

Why we are using this measure: There is a strong case for having retention as a performance measure, especially for the older/mature worker. This program's goal is to insure a good skill match between the employer and the participant. Workplace stability creates a more rewarding experience for the older worker and enhances their overall well-being. Monies spent on recruitment and replacement activities are better spent on creating workplace environments that are valued. Longevity helps to increase profitability, productivity, efficiency and quality.

What was achieved: Sufficient data not available for analysis.

Analysis of results: Sufficient data not available for analysis.

Factors affecting results: Results have been impacted by a new reporting system and new performance measures from Department of Labor, and their delays in implementing their new measures.

Resources used: Resources associated with this SPA included \$70,221 General Funds, \$0.00 SLP and \$1,206,757 of federal funds, or a total of \$1,276,978. There were 1.46 FTE's associated.

PERFORMANCE PLAN RESULTS

Name: Health & Support Services (**Core Function**)

Description: Increase proportion of older lowans accessing home and community based and in turn decrease proportion of older lowans needing nursing facilities, which in turn reduces the average State expenditure per older person receiving services

Why we are doing this: One of the primary responsibilities under the federal Older Americans Act is to advocate on behalf of the elderly regarding problems, issues and needs they have in maintaining their independence and ability to live at home.

What we're doing to achieve results: The DEA will increase the education, training and support services for family caregivers to enable them to provide care more effectively and with less damage to their own health and welfare and deliver case management services to lowans, which delay or avoid admission in nursing homes.

Results

Performance Measure:

The ratio of CMPFE clients and 60+ elders in HCBS service per 1000 vs. age counter parts in nursing homes

Performance Target:

Establish baseline data with a goal of increasing variation between HCBS 60+ ratio and institutionalized 60+ persons

Data Sources:

Iowa Department of Elder Affairs
Monthly CMPFE Reports and US
Census Data for 60+ population in
HCBS, none specifically for 60+ in
care facilities

None – Base line data will be established and reflected in SFY 2005 report.

Data reliability: Data not available on nursing home clients for FY 2004 and will be reported in the FY 2005 report.

Why we are using this measure: This measure aligns with a number of principles that are important to Iowa's elderly population. These basic principles include the right to live as independently as possible with family and community supports while receiving needed services.

What was achieved: Even though data is not available on the number of nursing home clients, we do know that a higher percent of Iowa's frail elderly were able to live a longer period of time in their own homes and communities before being admitted to a nursing facility.

Analysis of results: Reported data showed a 2% decrease in the number of persons that were

discharged from CMPFE to a nursing facility. Forty-one percent of CMPFE clients were discharged to a nursing facility during FY'04 compared to 43% a year ago.

Factors affecting results: While there has been a small decrease in the number of individuals being discharged from CMPFE to enter a nursing facility, resources have not been available to provide any significant training of family caregivers in past years that would enable them to provide care more effectively. Persons with family and community supports are less likely to enter a nursing facility prematurely.

Resources used: Total resources towards this Core Function were \$22,350,143 and 1.39 FTEs, sources are displayed at the SPA level.

PERFORMANCE PLAN RESULTS

Name: Healthy Aging – (SPA)

Description: Work for the development of efforts that maintain &/or enhance: **a)** health related services including Congregate and Home Delivered Meals, Nutrition Education & Counseling; and **b).** preventative health programs and services

Why we are doing this: One of the primary responsibilities under the federal Older Americans Act is to advocate on behalf of the elderly regarding problems, issues and needs they have in maintaining their health.

What we're doing to achieve results: Being responsive, proactive and reactive to issues that arise affecting the elderly at the state, national and local communities.

Results

Performance Measure:

Rate of 60+ persons per 1000 receiving meals compared to general 60+ population compared to previous year

	Participants
SFY 03	88,602
SFY 04	104,207

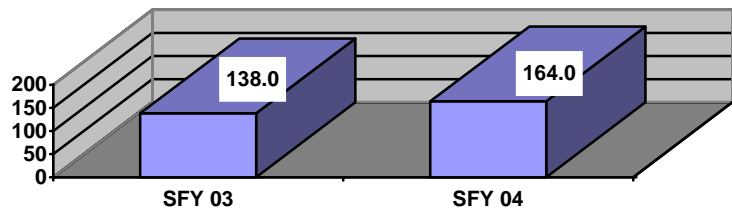
Performance Target:

Maintain or increased Rate

Data Sources:

Quarterly National Aging Program information System (NAPIS) reports form the thirteen Area Agencies on Aging (AAAs)

Congregate Meal Program
Rate Per 1000 60+



Data reliability: The NAPIS system has been in place for over a decade, though it has experienced some infrequent changes in reporting software and reporting expectations.

Why we are using this measure: Because approximately 43% of congregate and 73% of home delivered meal participants are at high risk for malnutrition, it is important to provide meals for more individuals in order to promote health and delay premature institutionalization. Currently, nutrition services are effectively targeted to vulnerable older adults, the majority live alone, or are over 75 years old, and/or low income; are highly rated by respondents; and increase social opportunities. The meal often provides 50% the participants' food intake for the day but is intended to provide only 33% thus illustrating the importance of the meal. The opportunity exists to improve the health of older lowans by expanding participant in the nutrition program.

Individuals within the meal program have access to nutrition education and nutrition counseling so the meal program participation is used as a performance measure.

What was achieved: The nutritional status of individuals receiving meals improved. Assessment of a representative sample of individuals receiving home delivered meals showed 65% improving nutritional status as measured with a ten question nutrition screening tool after receiving meals for six months.

The meal program went under major revision as the 2000 Recommended Dietary Allowances established by the Food and Nutrition Board of the Institute of Medicine of the National Academy of Sciences and Dietary Guidelines for Americans were implemented. Menus were revised to provide additional nutrients. Iowa was a leader among all of the states in making this required change.

The number of individuals receiving meals increased over the past year. Congregate meals increased from 76,873 in 2003 to 91,476 in 2004. Home-delivered meal participation also increased from 11,729 to 12,741.

Analysis of results: Menu revisions resulted in increased meal costs. The average congregate meal cost \$6.17 in 2004 compared to \$5.22 in 2001. The Area Agencies on Aging have implemented program changes to improve efficiency and reduce costs including consolidating kitchens or contracting area wide meal providers. Federal funding has remained flat over that ten years, program income from participants is declining as participation has decreased, and local public funds has increased slightly as has contributions from charitable organizations. State funding provides less than 1% of the budget. The area agencies on aging are exploring options to attract new meal participants. These results reflect a national trend.

Factors affecting results: The numbers within the congregate meal program have increased. The aging clientele of the meal program are gradually shifting from congregate to home delivered meals as their health declines and there is an absence of younger replacements. There are also more of options for meals. Competition for congregate meals includes fast food restaurants, grocery store deli/restaurants and the availability of convenience meals. Individuals aged 60-75 may not see themselves as needing congregate meals and choose other meal options. The provision of meals this past year was impacted by reduced number of volunteers, higher food cost (e.g., beef and milk) and higher gas prices.

The Case Management Program for Frail Elderly (CMPFE) provides the opportunity for older adults to receive home delivered meals funded by Medicaid Elderly Waiver (EW). This will result in an increase of home delivered meals funded through EW. The shifts of payment for meals to third party payment sources are not reported into the NAPIS system.

Resources used: Resources associated with this SPA included \$451,917 General Funds, \$4,939,588 SLP and \$12,998,401 of federal funds, or a total of \$18,389,906. There were .25 FTE's associated. Most expenditures occur at the community level by Area Agencies on Aging and other non-state entities.

PERFORMANCE PLAN RESULTS

Name: Case Management – (SPA)

Description: Deliver case management services to lowans which delay or avoid admission in nursing homes.

Why we are doing this: One of the primary responsibilities under the federal Older Americans Act is to advocate on behalf of the elderly regarding problems, issues and needs they have in maintaining their independence and ability to live at home.

What we're doing to achieve results: Make proposals work for an affective re-design of the Long Term Care system, to include CMPFE, Title 19 Elderly Waiver and other waivers, and improvements in pre-admission screening

Results

Performance Measure:

Change in participation rate per 1000 60+ lowans in CMPFE vs. 60+ lowans in nursing homes

None – Base line data will be established and reflected in SFY 2005 report

Performance Target:

Increase in participation rate

Data Sources:

Iowa Department of Elder Affairs
Monthly CMPFE Reports and US
Census Data

Data reliability: The data has been collected reliably for many years from the thirteen Area Agencies on Aging administering a uniform assessment of frail lowans age sixty and older, developing and managing their individualized care plans so they can continue living independently in their own homes and community. Data not available on nursing home clients for FY 2004 and will be reported in the FY 2005 report.

Why we are using this measure: The goals of Iowa's frail elderly are to live their lives with dignity and independence and to live in the least restrictive setting possible. Case management offers a coordination of needed services in the home and community. These individualized services are needed to prevent or delay institutionalization.

What was achieved: Nursing home admission data is not currently available, The Annual CMPFE Activity report shows an increase in the number of consumers supported by the CMPFE program in FY 04. There were over 4,000 NEW consumers admitted to the CMPFE program in FY 04. Area Agency Case Managers served over 12,500 elderly consumers in some capacity this fiscal year.

Analysis of results: There is currently a national trend to focus more on increased home and community-based services and to have less reliance on institutional care. lowans chose to live in

their own homes and communities as long as possible with dignity and independence. The Area Agencies on Aging (AAA) advocate on behalf of seniors to help them achieve these goals. Even with limited funding, the AA's offer free case management services to the frail elderly in their communities who have a need for two or more services that will help them to live independently in their own homes.

Factors affecting results: The number of individuals supported by CMPFE has not increased significantly this past fiscal year. One factor is that state funding for the program has been decreased in past fiscal years. Another significant factor is that even though 70% of case managed clients are accessing Medicaid paid services, there is no Medicaid reimbursement for case management services.

Resources used: Resources associated with this SPA included \$1,353,230 General Funds, \$1,375,369 SLP and \$1,231,638 of federal funds, or a total of \$3,960,237. There were 1.14 FTE's associated. Most expenditures occur at the community level by Area Agencies on Aging and other non-state entities.

PERFORMANCE PLAN RESULTS

Name: Research, Analysis & Info Mgt. (Core Function)

Description: Have adequate and accurate data and analysis to assist the department, the aging network, and local, state and national public policy leaders to appropriately and fairly focus on the needs and problems associated with the aging population, as well as the benefits and assets they present to communities and the state.

Why we are doing this: To provide useful and accurate data and related analysis to aging network partners, advocacy groups, providers, citizens and policy makers for informed decision making.

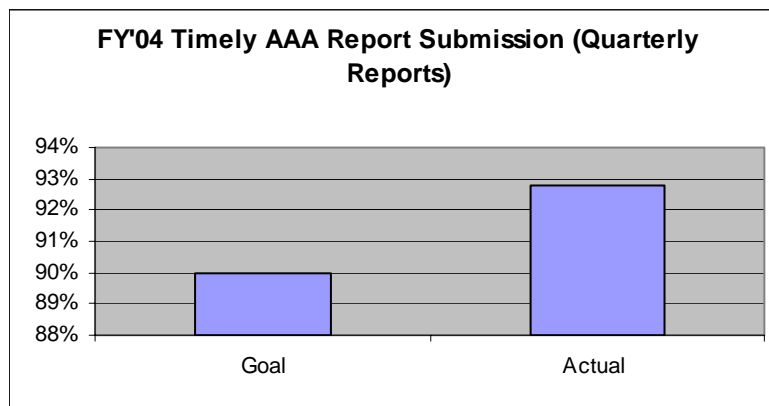
What we're doing to achieve results: Maintaining, enhancing and strengthening a system that assures timely submission of AAA data and financial report.

Results

Performance Measure: % of timely AAA data & financial report submitted and Information Request Response efficiency

Performance Target: 90% and 80% of the time, respectively

Data Sources: Monitoring of quarterly reports due for first measure, none for the second measure



Data reliability: Moderately reliable for the first measure only.

Why we are using this measure: These are measures we thought would be reasonably and affordably available and achievable.

What was achieved: For the first measure we exceeded the target, when focusing on reports due (Missing Report Transmittal Forms) from Area Agencies on Aging on a quarterly basis. The results were 96.8% timely; our target was 90%. The data collection system for the "Information Response" was determined to consume greater resources than the value derived from the data.

Analysis of results: This data collection system for the "Information Response" was determined to consume greater resources than the value derived from the data. Additionally, during FY'04 we determined that our Research, Analysis & Info Management activities can reasonably be included in the Resource Management Core Function.

Factors affecting results: Limited resources and increased responsibilities without adequate staff or funding made it impractical to develop additional reporting mechanisms and related analysis.

Resources used: As indicated in the Analysis of Results section, this core function has been eliminated and consolidated with Resources Management, as have the resources.

PERFORMANCE PLAN RESULTS

Name: Research, Analysis & Info Mgt. – (SPA)

Description: Conduct Planning, Policy Development, Coordination, Analysis, oversight, Information & Administrative support services and grant writing.

Why we are doing this: All of these activities are important functions related to any organizational operation or entity, without them the entity essentially cannot function.

What we're doing to achieve results: Our department has been focusing on improving reporting systems and mechanisms with primary contractors and programs for the past few years, with an emphasis on not placing greater emphasis on reporting and data collection at the expense of services to the elderly. We have successfully integrated legislative reporting requirements for the Senior Living Program within the reporting system for the Older Americans Act, building on existing systems to meet reporting requirements without developing redundant or duplicative systems. We have also made significant process in allowing electronic submissions of most reports.

Results

Performance Measure(s):

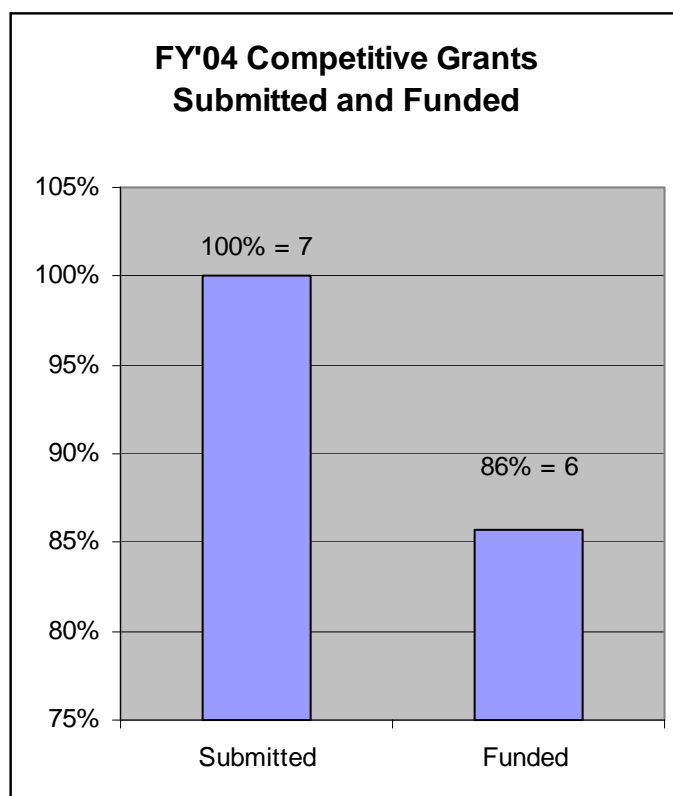
- a. Compliance with federal and state service and reporting requirements
- b. Increase the number of grants applied for
- c. Increase the number of grants funded

Performance Target:

- a. 100% compliance,
- b. Establish baseline, and
- c. Establish baseline

Data Sources:

- a. Not specified, but one realistic source would be the annual financial audit.
- b. GEMS (7 competitive grants applications)
- c. GEMS (6 competitive grant applications funded)



Data reliability: Data reliability is quite good, however our first target measure was flawed in not

being more specific regarding what compliance process or documents we would target (for example the annual financial audit, which had no audit exceptions).

Why we are using this measure: We felt the specified measures indicated important areas of efforts.

What was achieved: We had significant success with both audit compliance (no exceptions and with competitive grant writing, with 86% of grants submitted being funded).

Analysis of results: Audit compliance is always our goal and will be conducted whether or not it is in our plan.

In terms of grant writing, it is not the number of grants submitted or funded that matter, but instead whether or not it generates revenues needed by the department to accomplish our mission. The emphasis should be on the quality and relevance to priority issues rather than fundability. For example, some small grants, although technically are competitive, do not generate funds adequate to recover costs associated with the administration and operation of the grant. They may be easy to get and can make the “numbers’ look good, but do not contribute to the organizational well-being or priorities, and therefore detract from our mission.

Factors affecting results: Budget cuts and diminished staff resources.

Resources used: As indicated in the Analysis of Results section, the associated core function has been eliminated and consolidated with Resources Management, as have the resources.

PERFORMANCE PLAN RESULTS

Name: Resource Management (**Core Function**)

Description: Manage & maximize department resources to help assure the mission is achieved.

Desired Outcome(s): To conduct at least 95% of all personnel evaluations on a timely basis

Why we are doing this: Personnel evaluations can serve both as a motivational opportunity and a method of addressing and adjusting the response to work place issues and concerns. In turn they can relate to morale. Anytime, but especially during times of inadequate staff resources, it is important to try to maximize morale and productivity.

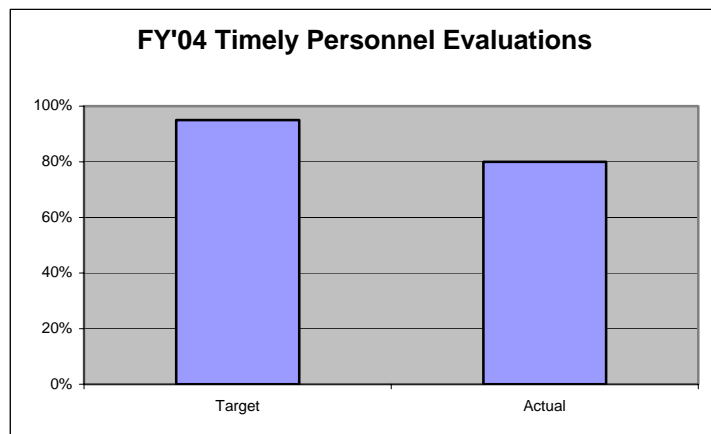
What we're doing to achieve results: Our Human Resource Associate has implemented a system to flag upcoming evaluations and to provide supervisors reminders for timely completion.

Results

Performance Measure: Personnel Evaluations performed on a timely basis

Performance Target: 95%

Data Sources: Department of Administrative Services/Human Resources Enterprise



Data reliability: Moderately timely and reliable

Why we are using this measure: It seemed to be a readily available source of information related to resource management activities that impact the department.

What was achieved: We were unable to achieve our target for various reasons.

Analysis of results: Our reminder system had some problems, however, that was adjusted and our performance measure was nearly achieved. We believe we are on-track for the future.

Factors affecting results: Budget cuts and diminished staff resources to test the process and improve it until late in the fiscal year.

Resources used: Total resources towards this Core Function were \$674,780 and 9.86 FTEs, sources are displayed at the SPA level.

PERFORMANCE PLAN RESULTS

Name: Program Management & Contract Monitoring and Internal Systems and Processes

Description: Monitor programs, contracts, grants and other resources of the department to maximize the benefits to our customers – clients, citizens, aging network, policy makers, Administration on Aging and other partners.

Why we are doing this: Make a concerted effort to meet our obligations and responsibilities under the federal Older Americans and other legislative expectations. In the case of Commission meetings it provides citizens an opportunity for involvement and participation.

What we're doing to achieve results: We have been working to maximize electronic submission of as many reports as possible, which can in turn makes monitoring and analysis more efficient. Examples include the Unmet Needs Information System, the IOWA-NAPIS (including SLP) enhanced reporting, SEAMLESS-CMPFE data and others, focused on maximizing the value of required reports by making them useful program and data management tools for increased efficiency and accountability by eliminating redundant data collection and reporting, and consolidation of data bases and processes.

Results

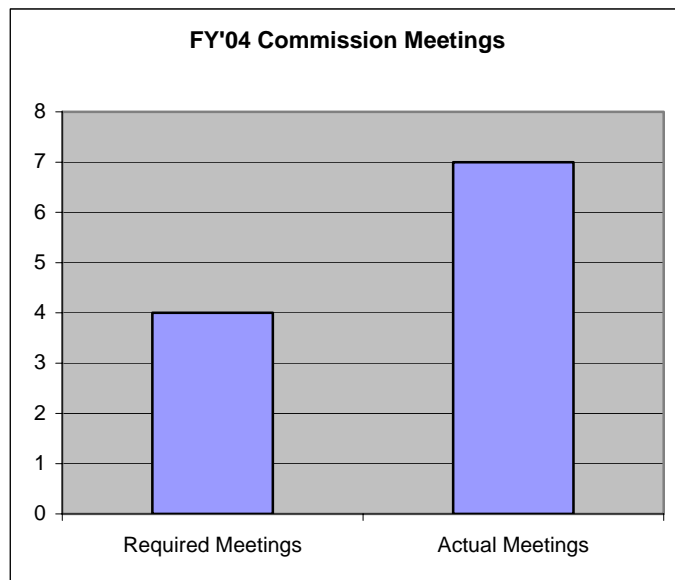
Performance Measure: Assure timely submission of required reports, as well as proposed policy positions as needed and appropriate

Performance Target:

- a. 100% state to federal AoA reports submitted timely
- b. Hold required 4 or more meetings of the Commission, and
- c. "0" audit exceptions

Data Sources:

- a. None analyzed
- b. Commission Meeting Minutes and
- c. Annual financial audit



Data reliability: Very Accurate except for measure a. for which as noted, no data was analyzed.

Why we are using this measure: Frankly, we struggled to identify meaningful measure for these activities, all have been eliminated for FY'05 as measures and replaced with information that focuses on maintaining or increasing revenues available through the department for Aging

programs and services to Iowa's elderly.

What was achieved: The required minimum number of Commission meetings was exceeded by 75%, providing more frequent opportunity for commissioners and other citizens to be engaged in setting the direction of aging services in our state. Additionally, the annual financial audit completed during FY'04 identified no audit exceptions.

Analysis of results: More meaningful measures should be built upon existing processes and reporting mechanisms, rather than attempting to create new data sources and processes. This is particularly true during times of budget cuts and diminished staff resources.

Factors affecting results: Budget cuts and the lack of adequate staff time and resources to develop additional tracking systems and analyze timeliness of federal report submissions.

Resources used: Resources associated with this SPA included \$169,762 General Funds, \$208,871 SLP and \$296,147 of federal funds, or a total of \$674,780. There were 9.86 FTE's associated. Most expenditures occur at the community level by Area Agencies on Aging and other non-state entities.