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Performance Results State Fiscal Year 2014

Prepared by the Iowa Department on Aging

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EXECUTIVE SUMMARY

Reviewing and analyzing fiscal year 2014 performance results help the Iowa Department on Aging (IDA) improve decision making and accountability to the citizens of Iowa. We are pleased to present IDA's FY2014 (July 1, 2013 - June 30, 2014) Performance Results Report. The report contains information about the services IDA and its partners provided to older Iowans. The focus is on results and aligns with the requirements of Iowa's Accountable Government Act, which requires Iowa state government to adopt strategic planning, agency performance planning, performance measurement and reporting, and performance audits. The report compares IDA's performance results to projected performance targets, describes challenges, and highlights major accomplishments.

In FY2014, Iowa's six Area Agencies on Aging (AAAs) were responsible for tracking and reporting the services provided to Iowans 60+ funded by the federal Older Americans Act through the Administration for Community Living/Administration on Aging (AoA) and in part by state general fund dollars. The data reported includes the number of older Iowans served and the number of service units provided. Over 440,000 units of home and community based services were provided to older Iowans representing approximately twenty-three different services.ⁱ The data collected for registered clients aged 60+ served indicated that 68 percent were female, 55 percent lived alone, and 31 percent lived in rural areas. A more detailed look at the consumer profile reveals that 64 percent were 75 years of age or older while 29 percent were 85 years of age or older.ⁱⁱ

Key Accomplishments

- In January 2014, Iowa's Commission on Aging designated each AAA as local Aging and Disability Resource Coordination centers. As a result, older Iowans, Iowans aged 18 and older with disabilities, veterans, and caregivers have access to information and referral/assistance and options counseling services statewide.
- In August 2013, IDA spearheaded an inter-agency LEAN event to delineate each agency's roles and responsibilities in the current elder abuse prevention system, identified service gaps and improvement opportunities and developed recommendations. Representatives participating in this event were from the Department of Inspections and Appeals, Department of Human Services, Attorney General's Office, Polk County Attorney's Office, Area Agencies on Aging, and consumers.
- The Volunteer Ombudsman Program in the Office of the State Long Term Care Ombudsman recruited and certified 73 Iowans from across the state to serve as volunteer long-term care ombudsman.
- The AAAs and their service providers (commonly called the Iowa Aging Network) provided 31,087 individual contacts to older Iowans regarding information and assistance, and provided 52,715 registered clients home and community-based support services, such as case management, chore, assisted transportation, home delivered and congregate meals, personal home health care, homemaker, respite, and adult day services.

Older Iowans are an asset to our State as employees, volunteers, caregivers, mentors, and in the many other ways they contribute to the strength of our State. Annually, Social Security retirement benefits alone contribute in excess of \$6.6 billion to the Iowa economy. Because the majority of older Iowans tend to stay put when they retire, they provide vital anchors to families and rural communities.ⁱⁱⁱ They are home owners and through property taxes support schools and education, counties and municipalities. As the population ages, we must recognize older Iowans as a valuable resource while providing services and long-term community supports needed by older adults, their families and caregivers.

IDA finds great strength in its employees and the AAAs who collectively demonstrate a history of collaborating to provide optimal services for Iowans. Together, we strive to meet our Mission to develop a comprehensive, coordinated and cost-effective system of long-term living and community supports to provide older Iowans and their caregivers with the information, resources and support they deserve and need to lead productive, vital and dignified lives.

Sincerely,
Donna K. Harvey, Director
Iowa Department on Aging

VISION STATEMENT

Building the best place to live healthier, longer.

MISSION STATEMENT

The mission of the Iowa Department on Aging is to develop a comprehensive, coordinated and cost-effective system of long-term living and community supports that help individuals maintain health and independence in their homes and communities.

CORE FUNCTIONS

Advocacy: Advocate for changes in public policy, practices and programs that empower older Iowans, facilitate their access to services, protect their rights and prevent abuse, neglect, and exploitation. Activities may include legislative advocacy, information dissemination, outreach and referral, research and analysis and coalition building.

Health and Support Services: Support policies, programs, and wellness initiatives that empower older Iowans to stay active and healthy, and that improve their access to affordable, high quality long-term living and community supports.

Planning, Development and Coordination: Conduct planning, policy development, administration, coordination, priority setting, and evaluation of all state activities related to the objectives of the federal Older Americans Act.

AGENCY OVERVIEW

Agency Structure and Services: The Iowa Department on Aging is a department within the executive branch of Iowa state government, established by Iowa Code Chapter 231, and it is the designated State Unit on Aging (SUA) under the Federal Act. The Federal Act, administered by the U. S. Administration on Aging (AoA) under the governance of the U. S. Department of Health and Human Services, outlines specific requirements for states to establish planning and service areas (PSAs) as well as Area Agencies on Aging (AAAs) to carry out the Federal Act requirements. The SUA is then required to ensure compliance with federal statute and regulations as well as any state or administrative code. Under both the Federal Act and the Elder Iowans Act, IDA has the responsibility to serve as an effective and visible advocate for older individuals. This is accomplished by review and comment upon state plans, budgets, and policies that affect older individuals, and by providing technical assistance to any agency, organization, association, or individual representing the needs of older individuals. IDA develops, submits and administers a State Plan on Aging under the Federal Act in cooperation with AoA. Under federal law, IDA is 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.

IDA works to ensure that a comprehensive, coordinated and cost-effective system of long-term living and community support services is provided to older Iowans, their caregivers, and with increasing frequency, persons living with disabilities. IDA has 7 citizen and 4 legislative Commissioners and for FY2014, had 41 authorized Full Time Employees (FTEs). Twelve employees are charged with carrying out the duties of the Office of the State Long Term Care Ombudsmen whose role is to ensure the rights of long term care facility and assisted living residents. Eight local Long-Term Care Ombudsmen were housed in counties in their regions; all remaining staff members were housed in the Des Moines, Iowa office located at the Jessie Parker Building, 510 East 12th Street, Suite 2, Des Moines, Iowa 50319.

Partners who assist in achieving IDA’s vision and mission include Commission members, AAAs, and a variety of other public and private sector organizations. IDA collaborates extensively with the departments of Human Services, Public Health, and Inspections and Appeals on many long-term care policies and program issues. IDA also partners with Iowa Vocational Rehabilitation Services, Iowa Workforce Development and the Iowa Department of Transportation. 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. IDA exists to advocate for and respond to the needs of an aging society by planning, promoting and coordinating a continuum of accessible and affordable services and choices for older Iowans. IDA provides 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, Iowa must be prepared to meet older Iowans’ changing needs while being cognizant of the effects on families and communities.

Population Served. The estimated number of Iowans aged 60 and over is 656,295 or 21.33 percent of Iowa’s total population of approximately 3,076,519.^{iv} Iowans aged 65 and older are one of the fastest growing population groups in Iowa. In 2013, 15.6 percent of Iowans were 65 years of age or older. By 2030, the percentage of Iowans aged 65+ will grow to approximately 20.5 percent. According to Iowa’s State Data Center, 20 percent of residents in 83 of Iowa’s 99 counties will be 65 years of age or older in 2040 compared to 30 counties in 2000.^v

Table 1: Older Iowans Served Compared to All Older Iowans (Selected Characteristics)

Demographic Characteristic	All Older Iowans	Iowans aged 60+ served by the Aging Network (FY 2014) ^{vi}
Lives Alone	31% ^{vii}	55%
Rural Area	37% ^{viii}	31%
Below Federal Poverty	8% ^{ix}	43%

Populations groups targeted for services included older Iowans living in rural communities, low-income and minority individuals, and individuals with limited English proficiency. Adults with physical and developmental disabilities and adults with mental and behavioral health concerns were served by IDA and the aging network as were caregivers caring for individuals with Alzheimer’s disease and dementia.

Services, Programs and Activities. IDA maintains statutory and contractual relationships with the network of six AAAs, which provide services to older Iowans in six PSAs within the state. Together with the local AAAs and their service providers, over 30 different services were provided to support individuals in their homes and communities. The types of services, programs and activities included:

- Advocacy on behalf of older Iowans;
- Education, training and public awareness regarding older adult issues including enhanced access to public benefits;
- Home and Community Based Services and Case Management;
- Nutrition programs and services;
- Elder Abuse Awareness and prevention activities;
- Older Worker training and employment activities;
- Long-Term Care Ombudsman Office and Resident Advocate Committees on behalf of residents of licensed and certified long term care facilities;
- Development of grants and grant management; and
- Monitoring, accountability & assessment.

Through two comprehensive web sites and other methods, IDA provides customer access to information 24 hours a day, seven days a week. The web sites are found at: www.iowaaging.gov and www.lifelonglinks.org.

AGENCY PERFORMANCE RESULTS

CORE FUNCTION: ADVOCACY

Description: Advocate for changes in public policy, practices and programs that empower older lowans, facilitate their access to services, protect their rights and prevent abuse, neglect, and exploitation. Activities may include legislative advocacy, information dissemination, outreach and referral, research and analysis and coalition building.

Service: Aging & Disability Resource Center (ADRC) Information & Referral/Assistance

Description: The majority of lowans age 60 and older have a strong desire to live safely and independently in their own homes and communities. In order to remain in the setting of their choice, older lowans need information about and access to affordable long-term living and community supports that help them age in place. Iowa's ADRC system, branded as LifeLong Links, will be a highly visible and trusted network where consumers and caregivers can obtain information on the full menu of long-term living and community support services. All lowans seeking information and assistance with home and community based supports and services needed to remain independent will be able to connect with LifeLong Links online through an interactive web portal, by phone through a toll-free call system, and in-person through local coordination centers based at the AAAs. (Link to Strategic Plan Goal 1: Empower older lowans to make informed decisions about, and easily access, existing health and long-term living community supports and services.)

Why we are doing this: The LifeLong Links no-wrong door system is designed to empower lowans to make informed choices, streamline access to supports and services, minimize consumer confusion, and enhance individual choice. LifeLong Links will also enable policy makers and program administrators to effectively respond to individual needs, address system problems, and limit the unnecessary use of high-cost services. The LifeLong Links network will become a primary source of information about the OAA core programs and other services for older lowans and caregivers.

What we're doing to achieve results: Department staff are pursuing the following ADRC activities:

- Working with local and regional partners to expand the six ADRC networks and to ensure sustainability;
- Developing partnerships with healthcare networks and organizations working with veterans, persons with behavior health, intellectual and physical disabilities, and persons who are dual eligible;
- Providing technical assistance and training to support the development of ADRC core pillars within each LifeLong Links coordination center;
- Utilizing a standard evaluation process to assess effectiveness and to identify efficiencies with the ADRC;
- Developing a monitoring schedule to review the networks for their compliance.

Results

Performance Measure	Performance Target	Performance Actual
Percent implementation of ADRC networks developed.	100%	100%

What Happened: Legislation passed in 2013 designated all six area agencies on aging serve as ADRCs. Throughout calendar year 2013, all AAAs completed work necessary to become local ADRC coordination centers in the LifeLong Links network. In January 2014, Iowa's Commission on Aging designated each AAA as local ADRC coordination centers. With this designation, the AAAs began coordinating Information & Referral/Assistance and Options Counseling services through the LifeLong Links network.

Data Source: IDA ADRC project director

Resources: Funding for this program is \$155,567 from a HHS-Administration for Community Living discretionary grant.

Service: Long Term Care Ombudsman (LTCO)

Description: The mission of the Office of State Long-Term Care Ombudsman is to protect the health, safety, welfare, and rights of individuals residing in long-term care by investigating complaints, seeking resolutions to problems, and providing advocacy with the goal of enhancing quality of life and care. (Link to Strategic Plan Goal 4: Ensure the rights of older lowans and prevent their abuse, neglect, and exploitation.)

Why we are doing this: In 1978, the Older Americans Act mandated a State Long-Term Care Ombudsman office in each state. The purpose of the office is to improve the quality of life and care in long-term care facilities by assisting residents to resolve complaints about the care they receive and to assure that residents' civil and human rights are protected.

What we're doing to achieve results: Iowa's long-term care ombudsmen investigate to help resolve resident and family concerns, provide information and assistance to long-term care providers, offer educational programs to the community, volunteers and long-term care staff, and provide individual consultation on issues important to residents, their families or the public. Long-term care ombudsmen also assist with resident and family councils within long-term health care facilities. The internal processes of the office are continually reviewed for effectiveness and efficiency, and the state, local and volunteer long-term care ombudsmen participate in frequent training.

Results

Performance Measure	Performance Target	Performance Actual
Percent of nursing facilities and programs with a volunteer LTCO.	25%	14%

What Happened: The Office continues to build its certified volunteer LTCO program. Under this program, volunteers perform monitoring visits at assigned nursing facilities to assist in resolving basic residents' concerns. This program is designed to allow the local Long-Term Care Ombudsman to focus on complaints involving the health, safety, welfare, and rights of residents.

The Office of State Long Term Care Ombudsman, through SF 2336, has hired two volunteer ombudsman coordinators. One volunteer ombudsman coordinator is charged with recruiting, screening, processing applications and providing technical support to the certified volunteers. The other coordinator develops and refines policies and procedures, conducts trainings and presents information on the program to facility staff, community groups and potential volunteers.

Iowa has 541 facilities that need volunteer long-term care ombudsmen. In FY2014, the volunteer ombudsman coordinators recruited, trained, and certified 73 lowans from across the state to serve as volunteer long-term care ombudsman. The work of recruiting, training, and certifying volunteers continues in FY2015.

Data Source: Office of State Long-Term Care Ombudsman

Resources: Funding for this program is \$821,707, including \$210,000 for the Volunteer Ombudsman Program, comes from the State of Iowa general fund.

CORE FUNCTION: HEALTH & SUPPORT SERVICES

Description: Support policies, programs, and wellness initiatives that promote healthy lifestyles for older lowans and that improve their access to affordable, high quality long-term living and community supports.

Services: Healthy Aging

NUTRITION AND DISEASE PREVENTION SERVICES

Description: As lowans age, many require support services to stay healthy, active and independent, thereby allowing them to remain in their homes and communities. IDA, the AAAs, and their providers deliver these support services including congregate and home delivered meals, nutrition education and counseling, and health promotion programs. (Link to Strategic Plan Goal 3: Empower older lowans to stay active and healthy through Older Americans Act programs and prevention services.)

Why we are doing this: The Older American Act funds supporting the nutrition and health promotion programs are to be used to reduce hunger and food insecurity, promote socialization, and promote health and well-being of older individuals by assisting them to access nutrition and other disease prevention and health promotion services to delay the onset of adverse health conditions resulting from poor nutritional health and sedentary behavior.

What we're doing to achieve results: IDA, through the AAAs and their community networks provide home and community based services including congregate and home delivered meals, nutrition education and nutrition counseling, transportation and evidence-based health promotion programs. Department staff provide technical assistance to the AAAs to help meet the objectives of the OAA and older lowan's goals for independent living. Staff also reviews program performance and monitor compliance with federal and state regulations.

Results

Performance Measure	Performance Target	Performance Actual
Percent of high nutrition risk Home Delivered Meal, congregate meals, nutrition counseling participants with multiple nutrition risk assessments, who maintained or improved their Nutrition Risk Scores.	78%	77%

What Happened: In FY 2014, over 2.5 million congregate and home delivered meals were provided to 41,822 older lowans. Nutritious meals and the socialization of the OAA nutrition program contributed to positive outcomes for meal participants. In partnership with the Iowa Department of Public Health, IDA and the AAAs implemented the Fresh Conversations program in 2014. This program is aimed at improving senior health by promoting consumption of more fruits and vegetables, increasing physical activity, and improving food safety awareness through the distribution of educational materials and regular presentations to meal recipients.

Because of these efforts, the nutrition risk screening results show that 22 percent of congregate meal consumers were at high nutrition risk. Of consumers who completed multiple screenings, 61 percent improved their nutrition risk score. Nutrition risk screening of the home delivered meal consumers showed that 54 percent were at high nutrition risk. Of home delivered meal consumers who completed multiple screenings 58 percent improved their nutrition risk score. Overall, 77 percent of consumers improved or maintained their nutrition risk scores.

Data Source: Iowa Program Reporting System (IAPRS)

Resources: Funding for this program is a combination of Federal Older Americans Act Title IIIC(1) \$4,294,302 and IIIC(2) \$2,256,860, Nutrition Services Incentive Program \$1,856,255, State General Funds \$2,991,885, and other \$7,273,936 totaling \$18,673,238.

CASE MANAGEMENT FOR FRAIL ELDERS SERVICE

Description: The Case Management Program for Frail Elders (CMPFE) serves as a gateway to both the Medicaid Elderly Waiver for low income frail older adults and other frail older lowans who need and want a coordinated plan of services which allows them to remain in their homes and avoid premature or unnecessary institutional care settings. (Link to Strategic Plan Goal 2: Enable lowans to remain in their own homes and communities with high quality of life for as long as possible through the provision of a diverse menu of long-term living and community support services, including supports for family caregivers.)

Why we are doing this: Older lowans want to live in their own homes with dignity and independence as long as possible. The CMPFE program coordinates individualized services that help older lowans achieve their independent living goals. Case managers assess both health and social needs of the individual during an in-home visit, develop a personalized plan of care, set up the desired services, and provide ongoing monitoring of the individual's plan. Typically, case management services and the array of long-term living and community supports that are coordinated can be provided at approximately one fourth of the cost to the taxpayer when compared to facility based care.

What we're doing to achieve results: The Area Agency on Aging (AAA) case managers or their subcontractors provide ongoing monitoring of the needs of the consumer as well as conduct consumer satisfaction surveys at least annually.

Results

Performance Measure	Performance Target	Performance Actual
Average number of months a client's independent living status is maintained via the Case Management Program for the Frail Elders (CMPFE) prior to institutionalization or death.	30	44

What Happened: A total of 7,878 clients were served by the Case Management Program for Frail Elders (CMPFE) resulting in 57,821 hours of assistance to older persons and their caregivers in the form of access to care coordination. The program's greatest impact, however, is the fact that CMPFE clients were able to maintain their independent living status for 44 months before leaving the program.^x CMPFE, for the majority of clients, also provided access to the Department of Human Services Medicaid Elderly Waiver program. Older adults in the Waiver program had health needs and financial situations which qualified them for facility based care under Medicaid.

Data Source: IAPRS and Seamless.

Resources: Funding for this program is a combination of Federal Older Americans Act Title IIIB \$141,984, State General Funds \$1,094,418, and other \$171,962 totaling \$1,408,364.

CAREGIVER SERVICES

Description: The program supports the array of long-term living and community supports that are instrumental in helping older lowans remain in their homes. The program is primarily supported by Older Americans Act funds and assists persons 18 years of age and older who care for a frail older adult. A small portion of the program allows for services for older relatives supporting dependent minors or persons living with a disability. (Link to Strategic Plan Goal 2: Enable lowans to remain in their own homes and communities with high quality of life for as long as possible through the provision of a diverse menu of long-term living and community support services, including supports for family caregivers.)

Why we are doing this: Family caregivers, who are often unpaid caregivers, are critical partners in helping older lowans remain in their homes. Family and friends who serve as caregivers, however, often do not identify themselves as caregivers and thus do not seek out assistance. Supporting caregivers in locating and providing information and services

for their loved ones allows many caregivers to continue their efforts longer, which often delays more costly institutional care.

What we're doing to achieve results: The Iowa Aging Network is building support for family caregivers to ensure the services they need to sustain their role as a caregiver, and to maintain their emotional and physical health, are available and accessible to them. The focus of the program is to promote and provide caregiver training and support services.

Results

Performance Measure	Performance Target	Performance Actual
The number of clients receiving assistance from the National Family Caregivers Support Program in Iowa.	100,000	36,043

What Happened: Caregivers obtain information and assistance or other services, such as respite, options counseling, and counseling, from the AAAs and contracted providers. Starting with FY2014, IDA implemented a new method for reporting caregiver data into its reporting system. Previously, caregiver data was co-mingled with data related to services and programs offered to older Iowans. Starting in FY2014, AAAs are reporting consumers served and units provided data for caregiver services separately. The performance target reflected an old estimated contact count. The FY2014 actual represents a more accurate and reliable contact count.

Data Source: IAPRS and ESP

Resources: Funding for this program is a combination of Federal Older Americans Act Title III-E \$1,450,491, State General Funds \$167,459, and other \$511,141 totaling \$2,129,091.

CORE FUNCTION: PLANNING, DEVELOPMENT AND COORDINATION

Description: Conduct planning, policy development, administration, coordination, priority setting, and evaluation of all state activities related to the objectives of the Older Americans Act.

Activity: Oversight & Operations

Description: IDA is responsible for the application and receipt of Older Americans Act funds as well as state appropriations. IDA is a focal point for all activities related to the needs and concerns of older Iowans. Staff serve as advocates for older persons by:

- Reviewing and commenting upon all state plans, budgets, and policies that affect elders.
- Providing technical assistance to any agency, organization, association, or individual representing the needs of elders.
- Assuring that preferences for services will be given to older individuals with greatest economic or social needs.
- Assuring that preference for services will be given to low-income minority and rural older adults.

Staff review mandated program and financial reports from the AAAs in order to evaluate the effectiveness of Older Americans Act programs in meeting the needs of older Iowans. As part of its effort to modernize the aging network, IDA has been working to update its data collection tools to facilitate reporting.

Why we are doing this: IDA is expanding data sharing among state agencies and other aging network partners to better identify high risk older adults and family caregivers.

What we're doing to achieve results: IDA staff worked with the Department of Administrative Services - Iowa Technology Enterprises to implement a stable, web based single-entry point reporting system for the AAAs to submit mandated program and financial data. The change in reporting platform has resulted in streamlined data collection and reporting activities.

Results

Performance Measure	Performance Target	Performance Actual
Percent of implementation of Iowa Program Reporting System (IAPRS) & Iowa Financial Reporting Services (IAFRS) electronic reporting system redesign.	100%	100%

What Happened: IDA converted both its program and financial reporting systems from stand-alone, pc-based systems to a single, web-based reporting system. As of 7/1/2013, the web based application was complete and testing was initiated. The IAPRS & IAFRS web-based reporting system became available for AAAs use on 10/14/2013.

Resources: Funding for this effort comes from Iowa Access totaling \$330,000. The majority of these funds were expended in FY2013, with \$9,846.67 remaining of the \$330K expended in FY2014

CORE FUNCTION: RESOURCE MANAGEMENT

Activity: Annual Management

Description: In state fiscal year 2014, IDA employed 32 FTEs. Of those, two were hired as new; one individual was hired in a new position and one individual was hired to replace a vacancy created by a staff retirement.

Throughout FY 2014, Department management and fiscal staff developed and trained AAA staff on new policies and procedures to assist the six AAAs in expanding their operations.

Why we are doing this: To ensure effective administration of IDA.

What we're doing to achieve results: Management staff trained and provided support to Department and AAA staff on contracting rules, procurement policies, match requirements, and other financial matters to ensure compliance.

Results

Performance Measure	Performance Target	Performance Actual
Number of reportable comments in the annual audit pertaining to the Department.	0	3

What Happened: The review and follow-up of findings contained in Area Agency on Aging audit reports was not formally documented but will be in the future. Audit findings noted that some service contract activities started before the contracts were signed; IDA developed and trained staff on new procedures to prevent this activity going forward. In addition, operating lease activity was not included in the GAAP Package. This issue has been addressed.

Data Source: FY2013 Audit Report (The FY2014 not yet issued.)

Resources: Funding for IDA and the AAAs comes from a combination of federal Older Americans Act appropriations, state general funds, and other sources.

RESOURCE REALLOCATION

In FY2014, the Iowa Department on Aging did not reallocate any resources.

AGENCY CONTACT

Copies of the Iowa Department on Aging *Performance Results Report* are available on the IDA Web site at www.iowaaging.gov or email Shan Sasser at the Department on Aging: Shan.Sasser@iowa.gov.

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ⁱ Iowa Program Reporting System (IAPRS), *State Fiscal Year 2014 Activity Report* (Des Moines, IA, 2014), 4.

ⁱⁱ *Ibid*, 2.

ⁱⁱⁱ *Older Iowans 2014*. State Data Center of Iowa, Iowa Library Services, State Library, 2. May 2014. Accessed 11/20/2014. <www.iowadatacenter.org/Publications/older2014.pdf>

^{iv} U.S. Census Bureau, Table S0102: POPULATION 60 YEARS AND OVER IN THE UNITED STATES (2011-2013 American Community Survey 3-Year Estimates)

^v State Data Center of Iowa, 4.

^{vi} INAPIS, 2.

^{vii} Percentage represents Iowans aged 65 and older. *Older Iowans 2014*, 1.

^{viii} Percentage represents Iowans aged 60 and older. 2007-2011 American Community Survey, Special Tabulation on Aging – Population Characteristics / prepared by the U.S. Census Bureau, 2013. 60+ Rural: 2010 Census

^{ix} Percentage represents Iowans aged 65 and older. *Older Iowans 2014*, 2.

^x Results Iowa – Accountability for Iowa. *Department Performance - Aging*. 07/26/2014. Iowa Department of Management. Accessed 11/20/2014. <<http://www.resultsiowa.org/elder.html>>.