# *Unmet Needs Report*

***Area/County*** Statewide - Detail By County

***Start*** April 2007

***End*** April 2007

| Month | Year | Type of Service Unable to Provide | Total Units Needed | Number of Clients | Reason(s) |
|---|---|---|---|---|---|

## ** State-Wide Totals **

| | | | | | |
|---|---|---|---|---|---|
| | | *Other* | 405 | 25 | |
| | | Assisted Transportation | 99 | 29 | |
| | | Case Management | 4 | 1 | |
| | | Chore | 335 | 42 | |
| | | Day Care/Adult Day Health | 716 | 17 | |
| | | Emergency Response System | 29 | 29 | |
| | | Grandparent/Relative Caregiver | 2 | 2 | |
| | | Health Screening/Well Elderly Clinics | 4 | 4 | |
| | | Home Delivered Meal | 883 | 30 | |
| | | Home Repair | 58 | 13 | |
| | | Homemaker | 706 | 96 | |
| | | Legal Assistance | 36 | 13 | |
| | | Material Aid | 5 | 5 | |
| | | Medication Management | 8 | 4 | |
| | | Mental Health Outreach | 37 | 6 | |
| | | Nutrition Counseling | 12 | 3 | |
| | | Personal Care | 353 | 19 | |
| | | Protective Payee Services | 8 | 1 | |
| | | Respite | 326 | 4 | |
| | | RSVP | 98 | 10 | |
| | | Transportation | 181 | 57 | |
| | | Visiting | 284 | 61 | |

## *Northland Agency on Aging*

### Allamakee

| | | | | | |
|---|---|---|---|---|---|
| April | 2007 | Assisted Transportation | 10 | 1 | Unable to staff number of hours; |
| April | 2007 | Home Delivered Meal | 46 | 2 | No Funding Source; |

### Clayton

| Month | Year | Type of Service Unable to Provide | Total Units Needed | Number of Clients | Reason(s) |
|---|---|---|---|---|---|
| April | 2007 | Assisted Transportation | 30 | 2 | No provider available; |
| April | 2007 | Chore | 27 | 6 | No provider available; |
| April | 2007 | Emergency Response System | 3 | 3 | No Funding Source; |
| April | 2007 | Homemaker | 45 | 2 | No provider available; No Funding Source; |
| April | 2007 | Personal Care | 20 | 1 | Funding source inadequate to cover costs; |
| **Fayette** | | | | | |
| April | 2007 | Chore | 10 | 2 | No provider available; |
| April | 2007 | Home Delivered Meal | 20 | 1 | No Funding Source; |
| April | 2007 | Mental Health Outreach | 24 | 2 | No provider available; |
| **Howard** | | | | | |
| April | 2007 | Emergency Response System | 2 | 2 | No Funding Source; |
| **Winneshiek** | | | | | |
| April | 2007 | Assisted Transportation | 20 | 1 | No Funding Source; |
| April | 2007 | Emergency Response System | 3 | 3 | No Funding Source; |
| April | 2007 | Home Delivered Meal | 30 | 1 | No Funding Source; |
| April | 2007 | Homemaker | 7 | 2 | No Funding Source; |
| ***Elderbridge Agency on Aging*** | | | | | |
| **Carroll** | | | | | |
| April | 2007 | Homemaker | 10 | 8 | Funding source inadequate to cover costs; |
| April | 2007 | Personal Care | 5 | 5 | Funding source inadequate to cover costs; |
| **Cerro Gordo** | | | | | |
| April | 2007 | Legal Assistance | 29 | 6 | Funding source inadequate to cover costs; |
| ***Northwest Aging Association*** | | | | | |
| **Dickinson** | | | | | |
| April | 2007 | Day Care/Adult Day Health | 288 | 3 | No provider available; |
| **Emmet** | | | | | |
| April | 2007 | Assisted Transportation | 10 | 5 | No provider available; |
| April | 2007 | Homemaker | 18 | 9 | Funding source inadequate to cover costs; |
| April | 2007 | Transportation | 20 | 2 | No provider available; |
| **Lyon** | | | | | |
| April | 2007 | Chore | 64 | 9 | No provider available; |
| April | 2007 | Day Care/Adult Day Health | 92 | 1 | No provider available; |

| Month | Year | Type of Service Unable to Provide | Total Units Needed | Number of Clients | Reason(s) |
|---|---|---|---|---|---|
| April | 2007 | Home Repair | 2 | 2 | No provider available; Funding source inadequate to cover costs; |
| April | 2007 | Transportation | 10 | 1 | No provider available; |
| April | 2007 | Visiting | 15 | 1 | No provider available; |
| **Osceola** | | | | | |
| April | 2007 | Home Repair | 1 | 1 | No provider available; |
| April | 2007 | Visiting | 10 | 1 | No provider available; |
| **Sioux** | | | | | |
| April | 2007 | Chore | 86 | 12 | No provider available; |
| April | 2007 | Health Screening/Well Elderly Clinics | 4 | 4 | Funding source inadequate to cover costs; |
| April | 2007 | Visiting | 45 | 6 | No Funding Source; |
| ***Siouxland Aging Services, Inc*** | | | | | |
| **Cherokee** | | | | | |
| April | 2007 | *Other* | 5 | 1 | No Funding Source; |
| April | 2007 | Day Care/Adult Day Health | 150 | 1 | No provider available; |
| April | 2007 | Home Repair | 1 | 1 | Other |
| **Monona** | | | | | |
| April | 2007 | Home Delivered Meal | 69 | 3 | No Funding Source; |
| **Plymouth** | | | | | |
| April | 2007 | *Other* | 40 | 2 | Unable to staff number of hours; |
| April | 2007 | Home Repair | 1 | 1 | Other |
| **Woodbury** | | | | | |
| April | 2007 | *Other* | 10 | 5 | No Funding Source; |
| April | 2007 | Emergency Response System | 1 | 1 | No Funding Source; |
| April | 2007 | Home Delivered Meal | 46 | 2 | Other |
| April | 2007 | Homemaker | 28 | 4 | No Funding Source; |
| April | 2007 | Material Aid | 1 | 1 | No Funding Source; |
| April | 2007 | Personal Care | 8 | 2 | No Funding Source; |
| April | 2007 | Respite | 240 | 1 | Funding source inadequate to cover costs; |
| April | 2007 | Transportation | 10 | 1 | No Funding Source; |
| April | 2007 | Visiting | 120 | 6 | No provider available; Unable to staff number of hours; |
| ***Hawkeye Valley Area Agency on Aging*** | | | | | |

| Month | Year | Type of Service Unable to Provide | Total Units Needed | Number of Clients | Reason(s) |
|---|---|---|---|---|---|
| **Black Hawk** | | | | | |
| April | 2007 | *Other* | 336 | 7 | Unable to staff number of hours; |
| April | 2007 | Home Repair | 1 | 1 | Funding source inadequate to cover costs; |
| April | 2007 | Homemaker | 14 | 2 | No Funding Source; |
| April | 2007 | Mental Health Outreach | 4 | 1 | Other |
| April | 2007 | Personal Care | 10 | 1 | Other |
| April | 2007 | Transportation | 4 | 1 | No provider available; |
| **Buchanan** | | | | | |
| April | 2007 | *Other* | 3 | 3 | No provider available; |
| April | 2007 | Emergency Response System | 2 | 2 | Other |
| April | 2007 | Mental Health Outreach | 1 | 1 | Other |
| **Butler** | | | | | |
| April | 2007 | Material Aid | 1 | 1 | Funding source inadequate to cover costs; |
| **Chickasaw** | | | | | |
| April | 2007 | Day Care/Adult Day Health | 20 | 1 | No provider available; |
| **Hardin** | | | | | |
| April | 2007 | RSVP | 40 | 4 | No provider available; |
| **Marshall** | | | | | |
| April | 2007 | Day Care/Adult Day Health | 100 | 4 | No provider available; |
| April | 2007 | Grandparent/Relative Caregiver | 2 | 2 | No provider available; |
| April | 2007 | Material Aid | 1 | 1 | Funding source inadequate to cover costs; |
| April | 2007 | RSVP | 50 | 5 | No provider available; |
| ***Scenic Valley Area Agency on Aging*** | | | | | |
| **Delaware** | | | | | |
| April | 2007 | Home Delivered Meal | 25 | 1 | No provider available; |
| **Jackson** | | | | | |
| April | 2007 | Chore | 30 | 3 | No provider available; |
| April | 2007 | Home Delivered Meal | 31 | 1 | No provider available; |
| April | 2007 | Visiting | 10 | 2 | No provider available; |
| ***Generations Area Agency on Aging*** | | | | | |
| **Clinton** | | | | | |
| April | 2007 | Nutrition Counseling | 12 | 3 | No provider available; |

| Month | Year | Type of Service Unable to Provide | Total Units Needed | Number of Clients | Reason(s) |
|---|---|---|---|---|---|
| April | 2007 | Protective Payee Services | 8 | 1 | No provider available; |
| **Scott** | | | | | |
| April | 2007 | *Other* | 1 | 1 | Other |
| April | 2007 | Assisted Transportation | 8 | 1 | No provider available; |
| April | 2007 | Home Repair | 1 | 1 | No Funding Source; |
| ***Heritage Area Agency on aging*** | | | | | |
| **Johnson** | | | | | |
| April | 2007 | Day Care/Adult Day Health | 20 | 3 | Unable to staff number of hours; No Funding Source; Funding source inadequate to cover costs; |
| April | 2007 | Emergency Response System | 1 | 1 | Unable to staff number of hours; |
| April | 2007 | Home Delivered Meal | 69 | 3 | Funding source inadequate to cover costs; |
| April | 2007 | Home Repair | 6 | 2 | No Funding Source; |
| April | 2007 | Material Aid | 2 | 2 | No provider available; |
| April | 2007 | Mental Health Outreach | 8 | 2 | Unable to staff number of hours; |
| April | 2007 | Personal Care | 58 | 2 | No provider available; Unable to staff number of hours; No Funding Source; Funding source inadequate to cover costs; |
| April | 2007 | RSVP | 8 | 1 | Unable to staff number of hours; |
| April | 2007 | Transportation | 12 | 1 | No Funding Source; |
| **Linn** | | | | | |
| April | 2007 | Case Management | 4 | 1 | Unable to staff number of hours; |
| April | 2007 | Chore | 48 | 3 | Unable to staff number of hours; |
| April | 2007 | Day Care/Adult Day Health | 8 | 1 | No provider available; |
| April | 2007 | Home Repair | 42 | 1 | No Funding Source; |
| April | 2007 | Personal Care | 240 | 1 | Funding source inadequate to cover costs; |
| April | 2007 | Visiting | 16 | 1 | No provider available; |
| ***Aging Resources of Central Iowa*** | | | | | |
| **Boone** | | | | | |
| April | 2007 | Assisted Transportation | 17 | 17 | Funding source inadequate to cover costs; |
| April | 2007 | Transportation | 23 | 23 | Funding source inadequate to cover costs; |
| **Marion** | | | | | |
| April | 2007 | Homemaker | 26 | 13 | Unable to staff number of hours; |
| April | 2007 | Personal Care | 4 | 1 | Funding source inadequate to cover costs; |

| Month | Year | Type of Service Unable to Provide | Total Units Needed | Number of Clients | Reason(s) |
|---|---|---|---|---|---|
| **Polk** | | | | | |
| April | 2007 | *Other* | 8 | 4 | Unable to staff number of hours; |
| April | 2007 | Day Care/Adult Day Health | 8 | 1 | Funding source inadequate to cover costs; |
| April | 2007 | Respite | 6 | 1 | No provider available; |
| April | 2007 | Transportation | 48 | 24 | Unable to staff number of hours; |
| April | 2007 | Visiting | 32 | 8 | Unable to staff number of hours; |
| **Warren** | | | | | |
| April | 2007 | Assisted Transportation | 2 | 1 | No provider available; |
| April | 2007 | Chore | 2 | 1 | No provider available; |
| April | 2007 | Homemaker | 5 | 5 | Unable to staff number of hours; |
| April | 2007 | Personal Care | 3 | 3 | Unable to staff number of hours; |
| April | 2007 | Transportation | 4 | 1 | No provider available; |
| ***Southwest 8 Senior Services, Inc.*** | | | | | |
| **Cass** | | | | | |
| April | 2007 | Emergency Response System | 9 | 9 | No Funding Source; |
| April | 2007 | Legal Assistance | 7 | 7 | No provider available; |
| April | 2007 | Personal Care | 5 | 3 | Unable to staff number of hours; |
| **Harrison** | | | | | |
| April | 2007 | Chore | 6 | 2 | No provider available; |
| **Mills** | | | | | |
| April | 2007 | Chore | 10 | 1 | No Funding Source; |
| April | 2007 | Home Delivered Meal | 60 | 2 | No Funding Source; |
| **Page** | | | | | |
| April | 2007 | Home Delivered Meal | 180 | 6 | No Funding Source; |
| **Pottawattamie** | | | | | |
| April | 2007 | Home Delivered Meal | 90 | 2 | Funding source inadequate to cover costs; |
| April | 2007 | Home Repair | 3 | 3 | Funding source inadequate to cover costs; |
| April | 2007 | Homemaker | 60 | 2 | Funding source inadequate to cover costs; |
| April | 2007 | Respite | 80 | 2 | Funding source inadequate to cover costs; |
| **Shelby** | | | | | |
| April | 2007 | Assisted Transportation | 2 | 1 | No Funding Source; |
| April | 2007 | Chore | 2 | 1 | Unable to staff number of hours; |

| Month | Year | Type of Service Unable to Provide | Total Units Needed | Number of Clients | Reason(s) |
|---|---|---|---|---|---|
| April | 2007 | Medication Management | 8 | 4 | Funding source inadequate to cover costs; |

## *Area XIV Agency on Aging*

### Adams

| | | | | | |
|---|---|---|---|---|---|
| April | 2007 | Emergency Response System | 1 | 1 | No Funding Source; |

### Clarke

| | | | | | |
|---|---|---|---|---|---|
| April | 2007 | Emergency Response System | 2 | 2 | No Funding Source; |
| April | 2007 | Home Delivered Meal | 62 | 2 | No Funding Source; |
| April | 2007 | Transportation | 20 | 2 | Funding source inadequate to cover costs; |

### Decatur

| | | | | | |
|---|---|---|---|---|---|
| April | 2007 | *Other* | 1 | 1 | No Funding Source; |
| April | 2007 | Emergency Response System | 2 | 2 | No Funding Source; |
| April | 2007 | Home Delivered Meal | 93 | 2 | No Funding Source; |
| April | 2007 | Homemaker | 40 | 2 | No Funding Source; |
| April | 2007 | Transportation | 30 | 1 | Funding source inadequate to cover costs; |

### Ringgold

| | | | | | |
|---|---|---|---|---|---|
| April | 2007 | Chore | 20 | 1 | No Funding Source; |
| April | 2007 | Emergency Response System | 1 | 1 | No Funding Source; |
| April | 2007 | Home Delivered Meal | 31 | 1 | No Funding Source; |
| April | 2007 | Homemaker | 30 | 1 | No Funding Source; |

### Taylor

| | | | | | |
|---|---|---|---|---|---|
| April | 2007 | Chore | 30 | 1 | No Funding Source; |
| April | 2007 | Emergency Response System | 2 | 2 | No Funding Source; |
| April | 2007 | Home Delivered Meal | 31 | 1 | No Funding Source; |
| April | 2007 | Homemaker | 30 | 2 | No Funding Source; |

### Union

| | | | | | |
|---|---|---|---|---|---|
| April | 2007 | *Other* | 1 | 1 | Funding source inadequate to cover costs; |
| April | 2007 | Homemaker | 30 | 1 | Funding source inadequate to cover costs; |

## *Seneca Area Agency on Aging*

### Appanoose

| | | | | | |
|---|---|---|---|---|---|
| April | 2007 | Homemaker | 328 | 35 | Funding source inadequate to cover costs; |

### Wapello

| | | | | | |
|---|---|---|---|---|---|
| April | 2007 | Day Care/Adult Day Health | 30 | 2 | No provider available; |

| Month | Year | Type of Service Unable to Provide | Total Units Needed | Number of Clients | Reason(s) |
|---|---|---|---|---|---|
| Wayne | | | | | |
| April | 2007 | Homemaker | 35 | 8 | Funding source inadequate to cover costs; |
| *Southeast Iowa Area Agency on Aging, Inc.* | | | | | |
| Lee | | | | | |
| April | 2007 | Visiting | 36 | 36 | No Funding Source; |