



Department of Inspections,
Appeals, & Licensing

Performance Report for Fiscal Year 2026

Table of Contents

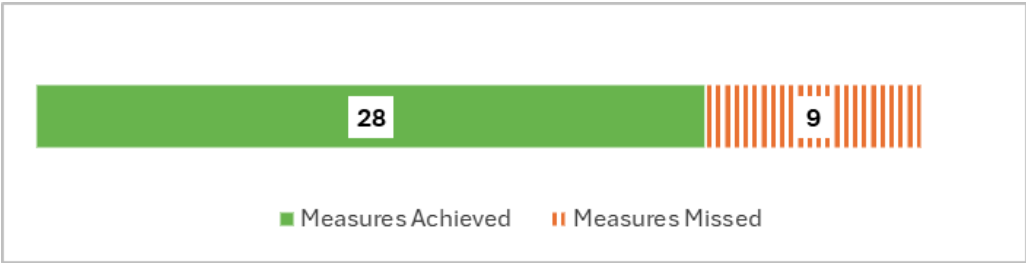
Department of Inspections, Appeals, & Licensing (DIAL) Performance Report for FY2026.....	1
DIAL Executive Summary	1
DIAL Strategic Progress in FY2026.....	1
DIAL Major Operational Accomplishments in FY2026	2
FY2026 Performance Measures by Division	2
Administration Division	2
Administrative Hearings Division	3
Building & Construction Division	4
Health & Safety Division	5
Investigations Division	7
IOSHA Division.....	8
Professional Licensing Division	9
Workers' Compensation Division	10
Attached Unit – Iowa Racing & Gaming Commission (IRGC) Performance Report for FY2026	11
IRGC Executive Summary	11
IRGC Strategic Progress in FY2026.....	11
FY2026 IRGC Performance Measures	12
Attached Unit - Iowa Employment Appeal Board Performance Report for FY2026	13
EAB Executive Summary	13
EAB Strategic Progress in FY2026	13
EAB Major Operational Accomplishments in FY2026.....	14
FY2026 EAB Performance Measures	14
Attached Unit – State Public Defender (SPD) Performance Report for FY2026	15
SPD Executive Summary.....	15
SPD Strategic Progress in FY2026	15
SPD Major Operational Accomplishments in FY2026.....	16
FY2026 SPD Performance Measures.....	16
Attached Unit – Iowa Office of Civil Rights (IOCR) Performance Report for FY2026	18

Department of Inspections, Appeals, & Licensing (DIAL) Performance Report for FY2026

DIAL Executive Summary

DIAL is a multifaceted regulatory agency charged with protecting the health, safety, and well-being of Iowans. The department is made up of eight divisions and four administratively attached units. This performance report is published to show goals met and growth opportunities in the department’s day-to-day operational activities. It will serve as a backdrop to the department’s routine performance measure reviews and assist in focusing efforts towards those areas that require the greatest attention.

The department tracked 37 performance measures in FY2026 and achieved or exceeded targets for 28 measures. Operational performance will be reviewed where 9 targets were missed.



DIAL Strategic Progress in FY2026

Strategic Initiative 1: Maintain the number of recertification surveys of federally active nursing homes.

To support this initiative, DIAL surveyors continue to maintain the required survey interval for federally active nursing homes. In fact, the average interval is below the required threshold and federally active nursing homes are surveyed at a frequency of less than 12.9 months on average.

Strategic Initiative 2: Deploy a uniform licensing technology solution.

DIAL has now partnered with Google to build the Administrative Licensing & Inspection Governance Network (ALIGN), creating the nation’s largest state database interface system to eliminate bureaucratic red tape and accelerate the regulatory process. This system will consolidate over 300 separate licensing programs currently managed across 11 different systems and paper processes. The Dental licensing program is slated to be the first to implement the new platform, with rollout scheduled for December 2026.

Strategic Initiative 3: Increase OSHA educational consultations.

To support this initiative, Iowa OSHA Consultation and Education continues to promote their services during conferences, direct promotions, and through social media. The goal was to educate 10,000 individuals; Iowa OSHA Consultation and Education were able to educate 13,522 in FY2026, again surpassing their goal.

DIAL Major Operational Accomplishments in FY2026

- Coordinated with the Attorney General's office and the U.S. Department of Homeland Security to address several interruptions to the Systematic Alien Verification for Entitlements (SAVE) clearinghouse. The department pivoted several times to ensure licensing interruptions were minimized as court proceedings continued.
- Updated procedures and corresponding metrics for investigating complaints related to professional licensing. These process improvements reduced the investigative timeline from an average of 183 days to 51 days.
- Continued to exceed the federal nursing home recertification survey interval, even with most survey work being halted during the 43-day federal government shutdown in October 2025.
- Reassigned personnel to ensure that a growing backlog related to unemployment insurance appeals was addressed. The department worked with Iowa Workforce Development to address funding issues, and with IWD and DOM's Division of Information Technology to address the technology issues contributing to a nearly 80% increase in appeals.
- Implemented a modernized case management system within the Iowa OSHA program.
- Launched a Customer Service Training series, delivering DIAL-specific training focused on delivering consistent, high-quality customer service.
- Advanced statewide safety, infrastructure, and industry growth by reviewing over \$601 million in construction projects, supporting disaster response, completing tens of thousands of equipment inspections across elevators, boilers, and amusement rides, managing more than 44,000 professional licenses and registrations, including environmental mitigation certifications, and accelerating renewable energy expansion through expedited wind and solar permitting.
- Reduced the food safety inspection backlog 86% by implementing additional risk-based work prioritization strategies, continuous monitoring, proactive intervention, and focused team effort.

FY2026 Performance Measures by Division

The following are the FY2026 performance measures for DIAL's divisions. They describe the target goals and actual results of each performance measure tracked and explain what steps were taken, and/or improvements planned for FY2027, to reach target goals.

Administration Division

Tribal Gaming

Outcome measure: Number of days to respond to Tribal requests for assistance/information.

FY26 target: 5

FY26 actual: 0

Analysis: The target could not be met as no requests were received during FY2026.

Athletic Commission

Outcome measure: Number of athletic promoter licenses issued.

FY26 target: 80

FY26 actual: 164

Analysis: The target was achieved and exceeded, although outcomes are determined solely by the number of applications received. The Iowa Athletic Commission is consistently processing and approving more and more applications year after year.

Resource Management

Outcome measure: Employee retention rate.

FY26 target: 97%

FY26 actual: 97.77%

Analysis: The department exceeded its FY2026 retention goal by enhancing customer service quality and strengthening relational trust throughout the employee lifecycle. Streamlined processes, clearer communication, and more responsive support contributed to a better overall employee experience.

Department Operations

Outcome measure: Percentage of media inquiries responded to within 2 business days.

FY26 target: 80%

FY26 actual: 80%

Analysis: The target was met. DIAL Communications staff continued to prioritize timely service through careful tracking and balanced workload management.

Administrative Hearings Division

Contested Case Hearings

Outcome measure: Percentage of judge's decisions issued within 30 days of hearing.

FY26 target: 90%

FY26 actual: 96.90%

Analysis: The target was achieved. In FY26, the Central Panel Bureau (CPB) received a total of 9,786 cases and closed 9,422 cases. Closure of a case for the CPB means the CPB issued a decision, or the case was otherwise resolved (e.g. withdrawal, dismissal, board settlement, etc.) after submission to the CPB. The overall average for CPB closed cases was 3.6 days. Decisions issued (or case resolutions) were within 31 days of the hearing (or resolved without a hearing pending) 96.9% of the time. The CPB received 5,263 cases and closed 5,156 cases from HHS within the fiscal year. Additionally, the CPB received 3,214 cases and closed 2,997 cases from the DOT. Finally, the CPB received 1,309 MISC cases from other state or local agencies and closed 1,269 cases. This metric was obtained through the diligence of administrative law judges and support staff.

Unemployment Insurance Contested Case Hearings

Outcome measure: Percentage of UI cases completed within 45 days.

FY26 target: 80%

FY26 actual: 44.30%

Analysis: The target was not achieved. The Unemployment Insurance Appeals Bureau (UIAB) is responsible for ensuring compliance with the U.S. Department of Labor (DOL) standards that require it to complete at least 60% of its cases within 30 days and 80% of its cases within 45 days. The UIAB panel received 17,443 cases (compared to 9,962 cases received the previous fiscal year). The UIAB panel issued 17,344 decisions in FY26 (compared to 9,156 decisions in the previous fiscal year). In FY26, the UIAB completed 32.47% (compared to 88.77% in the previous fiscal year) of its cases

within 30 days, with an average processing time of 50.19 days (compared to 13.44 days in the previous fiscal year) to close a case.

The outcome measurement was not met (as it was in prior years) due to a number of significant factors. In late May through early June of 2025, Iowa Workforce Development implemented the modernization of its database system, called IowaWorks. The IowaWorks system increased the number of UIAB cases by approximately 75% due to difficulties with the implementation of the new system. Those difficulties included the responsiveness of the system's vendor to go-live issues, data migration failures, the system's inaccessibility, and inflexible functionality. While the system made it easier to file a case for the parties, it was not intuitive for those users which resulted in a large increase in erroneous appeals (and hearings). Additionally, the number of full-time UIAB administrative law judges decreased from 12 (during the majority of the previous year) to nine at one point in SFY2026. Thus, at the same time that the number of cases increased dramatically, the number of administrative law judges decreased substantially. Ultimately, UIAB utilized temporary administrative law judges from other areas of state government to address the situation. Further, hiring of two more administrative law judges this fiscal year will address the situation. Despite the foregoing challenges, at the end of FY26, both May and June months achieved the target goal. For example, during the month of June, there were 1,325 cases filed, and the average number of days from filing a case to a decision was 17.5 days for that month, well within DOL standards.

Building & Construction Division

Building Codes

Outcome measure: Percentage of building plan reviews completed within 60 days.

FY26 target: 95%

FY26 actual: 62.89%

Analysis: Construction Engineer staff were consulted to identify workflow improvements that could better support timely reviews, and several of those recommendations are already being implemented. In addition, the transition to a new platform through the ALIGN project is expected to improve workflow automation, reporting reliability, and workload visibility, helping the Bureau better monitor performance and progress toward the 95% goal.

Plumbing and Mechanical Systems

Outcome measure: Percentage of Plumbing, Mechanical Safety Board apps completed online.

FY26 target: 80%

FY26 actual: 99%

Analysis: The target of 80% was exceeded, with an actual performance result of 99% achieved for FY26. This goal was accomplished through strong collaboration among team members and strategic staffing adjustments.

Electrical Licensing and Electrical Inspections

Outcome measure: Percentage of electrical installations inspected within 3 business days per IC 103.31.

FY26 target: 95%

FY26 actual: 97%

Analysis: The target of 95% was exceeded, with an actual performance result of 97% achieved for FY26. This goal was accomplished through strong collaboration among team members and strategic staffing adjustments. Specifically, temporary inspectors were utilized to fill coverage gaps during staff leave and manage increased demand during the busy season, ensuring consistent inspection capacity and operational efficiency.

Lead Professional Certification

Outcome measure: Percentage of lead professionals processed in 21 days or fewer.

FY26 target: 95%

FY26 actual: 96%

Analysis: The target of 95% was exceeded, with an actual performance result of 96% achieved for FY26. This goal was accomplished through strong collaboration among team members and strategic staffing adjustments.

Swimming Pool and Spas

Outcome measure: Percentage of swimming pool and spa plan reviews completed within 90 days or fewer after all information and fees have been obtained.

FY26 target: 90%

FY26 actual: 89.62%

Analysis: The target of 90% was basically met, with an actual performance result of 89.62% achieved for FY26. This goal was accomplished through strong collaboration among team members and strategic staffing adjustments.

Health & Safety Division

Social & Charitable Gambling

Outcome measure: Percentage of social/charitable gambling organizations that file an annual report.

FY26 target: 90%

FY26 actual: 92%

Analysis: The target was met. This performance measure will remain in place for FY27. The bureau will use the same strategies for FY27.

Food Inspections

Outcome measure: Percentage of risk level 5 food establishments inspected every 6 months.

FY26 target: 92%

FY26 actual: 88%

Analysis: The target was nearly met. While 100% of Risk Level 5 inspections were completed in FY26, there were eleven that were completed after their six-month due date. The average number of days these eleven inspections were completed after the due date was 21 days. This performance measure will remain in place for FY27. The bureau is implementing a new data system in FY27 that will help our staff track these inspections easier to better ensure on-time completion.

Outcome measure: Percentage of risk level 4 food establishments inspected annually.

FY26 target: 90%

FY26 actual: 72%

Analysis: The target was not met. This was a new performance measure for FY26 and the target goal for on-time completion of Risk Level 4 inspections was set high to provide the bureau with a difficult but achievable goal. This performance measure was part of a larger effort to eliminate our backlog of past due inspections. Overall, the bureau reduced the backlog by 86%. During FY26, 97% of Risk Level 4 inspections were completed; however, only 72% were completed by the established due date. This performance measure will remain in place for FY27. The bureau is implementing a new data system in FY27 that will help our staff track these inspections easier to better ensure on-time completion.

Outcome measure: Percentage of compliant responses completed on time.

FY26 target: 90%

FY26 actual: 99%

Analysis: This target was exceeded. This performance measure will remain in place for FY27. The bureau will use the same strategies for FY27.

Outcome measure: Percentage of significant violation follow-up completed on time.

FY26 target: 90%

FY26 actual: 96%

Analysis: This target was exceeded. This performance measure will remain in place for FY27. The bureau will use the same strategies for FY27.

Fire Safety Inspections

Outcome measure: Percentage of facility inspection reports returned within 10 business days.

FY26 target: 100%

FY26 actual: 100%

Analysis: Performance measure was met with reports provided to the facilities within the 10-day time frame. Processes were improved to streamline the procedures and subsequent review.

Outcome measure: Percentage of daycares receiving a fire inspection every 36 months.

FY26 target: 100%

FY26 actual: 100%

Analysis: Performance measure was met. An update to tracking tools assisted in meeting this objective.

Regulating State Licensed Only Programs & Facilities

Outcome measure: Complaint allegations triaged as the potential for immediate harm will be initiated within 2 days.

FY26 target: 100%

FY26 actual: 100%

Analysis: Performance measure was met. There has continued to be a high volume of complaints; however, highest priority was given to complaints that could cause immediate harm to residents and tenants.

Regulating Long-Term Care Facilities & Intermediate Care Facilities for Individuals with Intellectual Disabilities

Outcome measure: Ratio average number of months for LTC survey within federal timeframes.

FY26 target: 12.9

FY26 actual: 12.22

Analysis: Target exceeded. The Long-Term Care (LTC) Bureau successfully met and exceeded its performance objective for SFY, achieving an actual survey average of 12.22 months against the target threshold of 12.9 months. To maintain compliance and ensure that all 390 licensed nursing homes are surveyed within mandatory timeframes, the LTC Bureau strategically schedules a minimum of nine recertifications per month. This baseline schedule provides necessary operational flexibility to accommodate cancellations without compromising timeliness. Notably, the Centers for Medicare & Medicaid Services (CMS) is not currently evaluating state survey agencies on the statewide average metric for FFY25 or FFY26. Furthermore, CMS revised performance standards to account for the federal government shutdown (October 1, 2025 – November 12, 2026), during which annual recertification surveys were suspended. Despite absorbing the loss of six weeks of survey activity, the LTC Bureau successfully maintained an average interval under 12.9 months, demonstrating operational resilience and exceeding performance expectations.

Outcome measure: Ratio average number of ICF-IID surveys completed within federal timeframes.

FY26 target: 12.9

FY26 actual: 13.5

Analysis: Average survey cycle meets federal timeframe of no more than 15.9 months. Survey cycles in federally regulated facilities were affected by six weeks of federal government shutdown as well as an increase in the number of complaints in ICF-IID facilities.

Health Facility Inspections

Outcome measure: Percentage of federal workload requirements met for Tier 1 & Tier 2.

FY26 target: 95%

FY26 actual: 95.89%

Analysis: The division exceeded the target even though a federal government shutdown required a six week pause in most survey activities for federally regulated facilities. Consistent monitoring of schedules and surveyor time spent in facilities allowed both Long Term Care and Acute and Continuing Care Bureaus to stay on track to achieve the targeted measure.

Investigations Division

Economic Fraud

Outcome measure: Percentage of pre-eligibility investigations completed within 10 business days.

FY26 target: 90%

FY26 actual: 96.5%

Analysis: The bureau has exceeded its target; however, there is still room for improvement. We are actively working with field staff to ensure these investigations are handled in a timely manner.

While the Intergovernmental Agreement (IGA) with HHS commits us to completing these investigations within 10 business days 90% of the time, our internal goal is to increase that completion rate to 98%. Supervisors are currently working with staff members who have missed this target to help drive continuous improvement.

Medicaid Fraud Control Unit

Outcome measure: Percentage of exclusions from MFCU investigations to HHS OIG within 30 days.

FY26 target: 100%

FY26 actual: 100%

Analysis: During FY26, the Medicaid Fraud Control Unit (MFCU) submitted all criminal conviction information to the US Department of Health and Human Services Office of Inspector General (HHS OIG) for program exclusion within 30 days of sentencing in accordance with federal performance standards. The MFCU Paralegal monitored the progress of all cases accepted for criminal prosecution and promptly submitted all required exclusion information to HHS OIG upon the defendant's sentencing.

Investigation Services

Outcome measure: Cost savings dollars identified from Iowa HHS investigations.

FY26 target: \$3,000,000

FY26 actual: \$4,188,320.51

Analysis: The bureau has exceeded its target; however, there is still room for improvement. We have increased the target to \$3.2M in FY2027 to ensure continued improvement and to challenge our program integrity efforts.

Public Assistance Debt Recovery

Outcome measure: Dollars recovered – improper public assistance due to error/fraud.

FY26 target: \$3,000,000

FY26 actual: \$3,024,875.35

Analysis: While our unit has exceeded its target, there is still room for improvement. We will keep the current target in place and focus on enhancing collection efforts by implementing civil collections for small claims and utilizing all available collection methods.

Audits Unit

Outcome measure: Rate collection of monies owed to care facility residents.

FY26 target: 100%

FY26 actual: 93.40%

Analysis: Performance measure was not met due to reliance on assistance from another agency.

Outcome measure: Percentage of care facilities in compliance within 90 calendar days.

FY26 target: 95%

FY26 actual: 100%

Analysis: While our unit has exceeded its target, there is still room for improvement. Thanks to the new employee evaluation process, we increased the average number of audits completed per Field Auditor from two to three per month. This measure will be reviewed in FY2027 to provide more insight to the public.

Moving forward, we need to further increase our target for completed audits to continue challenging our staff while maintaining our 100% completion rate.

Wage and Hour/Child Labor

Outcome measure: Percentage of wage claims completed within 60 days of assignment.

FY26 target: 80%

FY26 actual: 74%

Analysis: The unit increased the percentage of wage claims resolved within 60 days from 64.6% in SFY25 to 74% in SFY26. We implemented a requirement to contact claimants within 14 days of case assignment and we are moving wage claims into the Economic Fraud Bureau's Case Management System (ECMS) which will allow for increased oversight and monitoring. The Wage and Child Labor Unit's ECMS will be in production at the end of October 2026.

IOSHA Division

Consultation

Outcome measure: Percentage of serious OSHA hazards verified and corrected timely.

FY26 target: 100%

FY26 actual: 100%

Analysis: The success of OSHA's On-Site Consultation Program in achieving 100% hazard abatement stems from its collaborative, non-punitive design that aligns employer incentives directly with workplace safety. A prerequisite for participating in this confidential service, employers must sign a mandatory commitment to abate every serious hazard identified during the walk-through within an agreed-upon timeframe. The upfront expectation that all hazards be corrected timely ensures that our expert guidance results in prompt and measurable results.

Outcome measure: Number of individuals trained.

FY26 target: 10,000

FY26 actual: 13,522

Analysis: IOSHA has successfully deployed targeted resources to elevate our training metrics. Moving forward, we will maintain this effective resource allocation strategy to ensure the number of lowans trained remains at or above our current standard, contingent on available staffing.

Health & Safety

Outcome measure: Number of OSHA inspections each year.

FY26 target: 600

FY26 actual: 578

Analysis: IOSHA narrowly missed its annual inspection goal due to temporary operational and staffing challenges. The departure of three veteran team members—two retirees and one departmental transfer—temporarily reduced field capacity, while a major system-wide software upgrade required significant staff training and upskilling that disrupted normal workflow. With the hiring of new staff in process and the software integration finalized, IOSHA expects to return to full capacity and meet its inspection targets in the coming year.

Whistleblower Protection

Outcome measure: Average number of days pending for whistleblower investigations.

FY26 target: Less than 90

FY26 actual: 107.32

Analysis: Complaints submitted to our Whistleblower Program are at an all-time high. The volume has caused our days pending to exceed our 90-day goal. We have enlisted the assistance of a LEAN expert to help us identify efficiencies and have also recruited the help of two investigators from a sister division to give us some additional capacity.

Professional Licensing Division

Licensing

Outcome measure: Days to complete initial review for licensure.

FY26 target: 10

FY26 actual: 10

Analysis: Target met. Maintained accountability to standard performance metrics.

Outcome measure: Number of business days to make a final determination on application.

FY26 target: 8

FY26 actual: 8

Analysis: Target met. Maintained accountability to standard performance metrics.

Outcome measure: Days to complete initial investigation after complaint.

FY26 target: 183

FY26 actual: 51

Analysis: Target exceeded. Implemented enhanced screening standards and standardized investigative metrics and procedures for conducting investigations.

Workers' Compensation Division

Workers' Compensation

Outcome measure: Number of days - submission of arbitration case to decision issuance.

FY26 target: 150

FY26 actual: 93

Analysis: The Workers' Compensation Division is proud to report that it met its agency operational timelines in fiscal year 2026. Our staff operated efficiently during the past fiscal year and were able to provide timely service for the citizens of Iowa. However, the Workers' Compensation Division temporarily loaned a quarter of its deputy commissioners to the Unemployment Appeals Hearings Division during the latter part of fiscal year 2026. Several arbitration decisions aged significantly during this period of time awaiting the return of the deputy commissioners to the division's staff. These delays of several months will impact the average time for issuance of decisions in fiscal year 2027. Additionally, since December 12, 2025, the Workers' Compensation Division has been operating with an interim commissioner and no chief deputy commissioner. Delays have been incurred in the issuance of the interim commissioner's pending arbitration decisions due to his appointment and his focus on the duties of the interim commissioner and chief deputy commissioner. These delays in the issuance of the interim commissioner's arbitration decisions will also have a significant impact on the average time for issuance of arbitration decisions in fiscal year 2027. For both of these reasons, it is anticipated that the average time for filing of arbitration decisions is likely to increase during the current fiscal year. Efforts are being made by the division's deputy commissioners and clerical staff to maintain the agency within the operational target of 150 days from full submission to issuance of an arbitration decision. However, it is anticipated that it may be difficult to meet these target goals in fiscal year 2027.

Attached Unit – Iowa Racing & Gaming Commission (IRGC) Performance Report for FY2026

IRGC Executive Summary

The Iowa Racing & Gaming Commission regulates licensed commercial casinos, horse racing, simulcasting, sports wagering, and daily fantasy sports contests. The commission enforces laws and rules related to gambling and wagering in Iowa. In FY2026, the gaming industry regulated by the commission generated more than \$330 million in state tax revenue, distributed among several different funds.

The unit tracked three performance measures and achieved the targets for all of them.

IRGC Strategic Progress in FY2026

Strategic Initiative 1: Achieve the highest possible voluntary compliance of statutes, rules, and regulations.

To support this initiative, Commission staff engage directly with licensees to implement changes to processes, procedures, and internal controls. In FY2026, staff engaged with the industry directly as part of the Executive Order 10 initiative, beginning the collaborative process of updating and changing rules. In addition, staff conducted a focused audit on compliance for slot machines and the accounting systems at all licensed casinos that support reporting to the Commission. The Commission continues to provide guidance and best practices when new challenges arise within the industry. For example, Senate File 2289 was passed in 2026, changing the individual withholding rates for all slot machines. This change required Commission staff to work with casino staff to update the settings on all slot machines.

Strategic Initiative 2: Ensure the integrity of licensed facilities and entities.

To support this initiative, staff processed over 65 facility and entity annual renewal licenses. This process includes ensuring key individuals are backgrounded; reviewing any financial, legal, or regulatory issues; and overall operations of the companies. Staff also reviewed over 3,900 individual license applications.

Additionally, Commission staff perform regular compliance audits and constantly review activities undertaken and reported by licensees to monitor for violations. Any incident that results in an investigation is documented and action taken is recorded. Depending on the severity or scope of the violations, the Commission or Commission staff may enter into stipulations or issue rulings that require a licensee to make changes to their processes to ensure that integrity is corrected and maintained going forward. In FY2026, the Commission or Commission staff took action in over 170 cases involving both individual and casino licensees.

IRGC Major Operational Accomplishments in FY2026

- A new land-based facility was opened to replace a riverboat in Marquette, Iowa. Commission staff were instrumental in pushing the project toward completion and ensuring the new facility complied with regulations upon opening. Staff monitored construction benchmarks, oversaw the move and installation of over 400 slot machines, and reviewed and approved a new security plan and internal controls.
- The Commission reviewed, revised, and implemented rules in accordance with Executive Order 10 in the areas of racing and began the process of drafting and submitting rules for the rest of the chapters under IRGC purview by soliciting and incorporating industry feedback.
- Legislation passed in 2026 giving the Commission the authority to issue cease and desist orders and pursue injunctive relief against unlicensed operators. Commission staff are working on policies and procedures to implement the new authority in FY2027.
- Construction and preparation for the new casino in Cedar Rapids continued to occur for the planned opening in FY2027. In FY2026, Commission staff met with the new licensee regularly to monitor the construction process and make sure it was on track to meet all licensing and compliance requirements to open the new facility as planned.

FY2026 IRGC Performance Measures

Racing & Gaming Commission

Outcome measure: Percentage of regulation violation complaints received that are investigated.

FY26 target: 95%

FY26 actual: 100%

Analysis: Complaints from the public that are sent to the central office are shared with, and handled by, Commission staff at the appropriate facility. Complaints that are regarding licensees, other than the facilities, are handled by staff in the central office. While some complaints may not be able to be resolved to the patron's satisfaction (ex: wanting money they lost to be returned to them), our staff will review the situation for any potential regulatory issues.

Outcome measure: Percentage of horses inspected for health-fitness prior to a race.

FY26 target: 97%

FY26 actual: 100%

Analysis: The Commission contracts with a third-party veterinarian group for all horse inspections. This group is very experienced in their field. They examine all horses entered to race on a given day.

Race Horse Aftercare Assistance

Outcome measure: Percentage of reviewed applications in anticipation of awarding funds.

FY26 target: 95%

FY26 actual: 100%

Analysis: The Commission solicits bids from entities that provide after care to horses that no longer race. Two groups applied for funds. The primary award of around \$31,000 went to a local industry group heavily involved in Iowa racing and horses that have raced in Iowa, with \$2,000 going to a group that also provides care for Iowa bred horses but is out-of-state.

Attached Unit - Iowa Employment Appeal Board

Performance Report for FY2026

EAB Executive Summary

The Iowa Employment Appeal Board is a quasi-judicial review board for executive branch agencies. The EAB provides timely and fair review of agency decisions related to employment matters, including appeals of unemployment insurance benefits from Iowa Workforce Development (IWD), rulings of the Occupational Safety and Health Administration (OSHA), and decisions of the Iowa Public Employees' Retirement System (IPERS). EAB also oversees public collective bargaining matters, including conducting elections, deciding prohibited practice complaints, and resolving grievances filed by state employees.

The unit tracked five performance measures and achieved the targets for all of them.

EAB Strategic Progress in FY2026

Strategic Initiative 1: Continue to increase compliance as it relates to unemployment compensation insurance; OSHA violations; DAS decisions involving disqualification, restriction, or removal from eligible lists; IPERS decisions; peace officer and capitol security disciplinary actions; Labor Commissioner's citations or proposed penalties for violations of construction contractor's registration laws; state employee grievances filed against their employing agency; and elections pertaining to public employee collective bargaining.

Case processing times are systematically tracked and benchmarked against target standards to reinforce this initiative and strengthen overall regulatory adherence across all designated programs.

Strategic Initiative 2: Create a work environment that perpetuates job satisfaction, customer service, process improvement, and public accountability.

To drive progress on this initiative, our team conducts regular monthly 1:1 and group check-ins. These sessions cultivate open communication regarding workplace dynamics, help resolve operational hurdles, and allow us to evaluate individual achievements against established performance targets.

Strategic Initiative 3: Continue to improve electronic media capabilities that will ensure that the Employment Appeal Board is upgrading their effort to respond to the Iowa citizenry in a prompt and timely manner.

To drive this initiative forward, staff with enhanced technical skills were brought on board to oversee a key core program and keep public-facing digital communication channels updated.

EAB Major Operational Accomplishments in FY2026

- Exceeded federally required performance benchmarks despite a one-month delay in issuing unemployment insurance decisions caused by the transition to a new unemployment system.
- Drawing on key insights from the second fall election hosted by the EAB, targeted investments were made to modernize both the election and case management systems to enhance public service delivery.
- In response to the sudden closure of the no-cost federal conciliation and mediation program—a service long utilized by the Public Employment Relations Board (PERB)—the EAB launched a new mediation initiative. This effort included funding, recruiting, and onboarding new mediators as well as maintaining continuous communication with stakeholders.

FY2026 EAB Performance Measures

Employment Appeal Board

Outcome measure: Average age of pending UI appeal case decisions made less than 40 days.

FY26 target: 30 days

FY26 actual: 26.8 days

Analysis: The Employment Appeal Board (EAB) met and exceeded its FY2026 target of 30 days with an actual average age of 26.8 days for pending UI appeal case decisions. This performance successfully satisfies the federal core measure (UIPL 14-05 Changes 1–3) requiring the average age of Higher Authority Appeals (HAAs) to be 40 days or less, outperforming the Department of Labor's standards.

Outcome measure: Percentage of merit case decisions issued within 14 days of Board review.

FY26 target: 90%

FY26 actual: 100%

Analysis: The EAB successfully attained and surpassed its FY2026 goal of 90%, reaching a perfect 100% rate for decisions rendered within 14 days following Board review, reflecting timely and effective resolution of cases.

Outcome measure: Percentage of all other decisions issued within 14 days of Board hearing.

FY26 target: 90%

FY26 actual: 100%

Analysis: The EAB successfully attained and surpassed its FY2026 goal of 90%, reaching a perfect 100% rate for decisions rendered within 14 days following Board review, reflecting timely and effective resolution of cases.

Outcome measure: Percentage of contractor registration decisions within 14 days.

FY26 target: 90%

FY26 actual: 100%

Analysis: The EAB successfully attained and surpassed its FY2026 goal of 90%, reaching a perfect 100% rate for decisions rendered within 14 days following Board review, reflecting timely and effective resolution of cases.

Outcome measure: Percentage of bargaining units participating in recertification elections based on the end date of the CBA.

FY26 target: 75%

FY26 actual: 76.40%

Analysis: The EAB successfully attained and surpassed its FY2026 goal of 75%, reaching an actual rate of 76.40% for bargaining units participating in recertification elections. To further promote participation in future cycles, system upgrades were implemented along with enhanced public communication strategies.

Attached Unit – State Public Defender (SPD)

Performance Report for FY2026

SPD Executive Summary

The State Public Defender's Office coordinates Iowa's indigent defense system. The SPD's mission is to ensure all indigent persons in Iowa receive high-quality legal representation in criminal, juvenile, and other eligible proceedings in an efficient and fiscally responsible manner. More than 250 employees in 18 local public defender offices and the Appellate Defender's Office provide representation in criminal and juvenile cases in all 99 counties. The SPD also contracts with about 460 private attorneys and nonprofit organizations throughout Iowa, paid from the Indigent Defense Fund, which is administered by the State Public Defender's Office.

In FY 2026, the Office tracked five performance measures and achieved or exceeded the targets for all tracked measures.

SPD Strategic Progress in FY2026

Strategic Initiative 1: Provide high-quality representation to clients of Public Defender offices.

To support this initiative, The State Public Defender's office continues to support employees with education and tools to ensure front line attorneys are able to effectively protect the constitutional rights of their clients. The office provided 86.5 hours of continuing legal education and over 50 hours of group mentorship. The office continues to leverage technology to efficiently represent clients by utilizing enhanced legal research, automation, and artificial intelligence assisted tools.

Strategic Initiative 2: Ensure that clients of private court-appointed attorneys are provided high-quality representation.

To support this initiative, the State Public Defender's office provides virtual and on-demand continuing legal education for free to all attorneys in Iowa. The office utilizes administrative staff to liaise issues private counsels face when representing indigent clients including making group mentorship available to all attorneys in Iowa. The office provided 86.5 hours of continuing legal education and over 50 hours of group mentorship.

Strategic Initiative 3: Achieve government efficiency by improving the cost-effectiveness and efficiency of Iowa's indigent defense services.

To support this initiative, in FY26 the State Public Defender's Office closed 53,498 cases and paid 65,598 claims. The office continues to find ways to retain and attract attorneys as employees and contractors in order to satisfy the constitutionally required representation of indigent Iowans. The office is engaged in a long-term plan to employ more public defenders in an effort to become less reliant on the declining number of contract attorneys.

Strategic Initiative 4: Compensate attorneys and other indigent defense providers in a timely and accurate manner.

To support this initiative, the State Public Defender's Office continues to emphasize the importance of paying contract counsel and other claimants in a timely manner. The administrative office employs attorneys with experience in providing indigent defense to audit claims made by contract attorneys and other claimants. This experience allows the office to more efficiently process the 66,000 claims that come to the office each year. Additionally, the State Public Defender's Office continues to improve the claim submission process and claims audit process by leveraging technology.

SPD Major Operational Accomplishments in FY2026

- In FY26, the State Public Defender added 10.0 new FTEs across the State Public Defender system. This increase in FTEs will continue to build defense capacity in field offices across the state.
- The State Public Defender implemented JusticeText across all field offices, an audio and video transcription platform that harnesses AI technology to assist public defenders in processing large amounts of discovery while preparing for trial, resulting in efficiencies that benefit the criminal justice system. 100% of SPD investigators and 68% of attorneys use the tool on a weekly basis to analyze discovery data.
- The State Public Defender continues to provide attorneys with access to technological products that improve the quality of legal representation across the state. In FY 2026, the State Public Defender expanded its use of Thomson Reuter's proprietary AI legal research tool, Co-Counsel. Additionally, the State Public Defender continues to invest in improvements to the public defender employee case management system used to manage the more than 50,000 cases that come to the public defender offices in a given fiscal year.
- Recruiting new legal talent remains a priority of the State Public Defender. The agency expanded its reach and improved on-campus visibility through hosting a second Public Defender Day at the University of Iowa, with public defenders and SPD interns presenting to students and discussing their work and experiences with the organization. The State Public Defender also held mock interviews for students on the same day as the event and referred six students for permanent positions and internships. Three participating students went on to complete internships with the State Public Defender and two students later became public defenders after graduation in May 2026 and passing the July 2026 Iowa bar exam.

FY2026 SPD Performance Measures

Assigned Counsel Legal Services

Outcome measure: Percentage of public defender cases where there have been no final findings of ineffective assistance of counsel on appeal.

FY26 target: 99%

FY26 actual: 99%

Analysis: The target was met.

Outcome measure: Percentage of Notices of Action on indigent defense claims that are upheld upon final judicial review.

FY26 target: 99%

FY26 actual: 100%

Analysis: The target was exceeded.

Outcome measure: Average processing time for an indigent defense claim within an established standard.

FY26 target: 35 days

FY26 actual: 4 days

Analysis: The target was exceeded. State Public Defender claim auditors review and process claims in a timely manner. If there are any claim errors, the claims are returned to claimants quickly for correction to ensure the process moves smoothly.

Title IV-E Juvenile Justice Improvement

Outcome measure: Become fully operational in sixteen Iowa counties.

FY26 target: 100%

FY26 actual: 100%

Analysis: The target was met.

Wrongful Conviction Unit

Outcome measure: Become fully staffed to support post-conviction relief claims and respond to applications from incarcerated individuals with claims of factual innocence.

FY26 target: 100%

FY26 actual: 100%

Analysis: The target was met.

Outcome measure: Review 25 new post-conviction DNA cases and perform DNA testing with federal grant funds (Post-Conviction DNA Testing Grant).

FY26 target: 100%

FY26 actual: 8%

Analysis: The number of cases eligible for post-conviction DNA analysis and robust testing remain low in Iowa; however, the WCU team is committed to quality analysis and thorough research for accepted clients.



Fiscal Year 2026 Performance Report

Iowa Office of Civil Rights

October 28, 2026

Message from the Director:

This report outlines the Iowa Office of Civil Rights' (IOCR) performance for Fiscal Year 2026 (July 1, 2025 - June 30, 2026) as required pursuant to Iowa Code section 8E.210.

The IOCR's mission is to provide impartial, efficient, and fact-driven investigative analyses of discrimination complaints filed in Iowa and promote civil rights outreach and education opportunities throughout the state.

Over the past year, the IOCR has upheld justice throughout the administrative process, educated thousands of Iowans about civil rights and IOCR's mission, and advanced internal process improvements. The IOCR completed a record-breaking number of investigative legal reports compared to previous years. We are able to directly tie this increased output to program efficiencies established over the last three years.

As we look to Fiscal Year 2027 and beyond, the IOCR is dedicated to continual process improvements to create efficiencies, reduce processing times of investigations, and continue to provide quality investigative legal reports to the thousands of parties that interact with the IOCR each year.

IOCR's mission continues as strong as it did when it was established in 1965. It is truly an honor to lead this mission for our state and my dedicated team.

Thank you for the privilege to serve,



Kristen Stiffler
Executive Director
Iowa Office of Civil Rights

Executive Summary

The Iowa Office of Civil Rights concluded FY26 with strong operational results, demonstrating exceptional progress in IOCR's strategic initiatives outlined in the IOCR FY25-FY27 Strategic Plan.

This report outlines progress towards Agency goals in FY26. IOCR tracked strategic initiatives, numerous key performance indicators, and operational measures. Many of these measures are ambitious goals that depend on external factors that may be beyond IOCR's control. Some IOCR measures are statutory or contractual recommendations; however, prudence requires the IOCR to assess realistic goals, with an eye toward opportunities to excel.

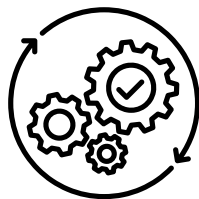
Performance Results

Key Improvement Efforts		Major Accomplishments	
01	Successfully implemented SF 579 by creating an efficient process for local commissions to transfer aged files to IOCR	01	Implemented custom-built case management system leading to improve case processing
02	Reduced error rate of federal submissions by 15%	02	Exceeded housing investigation target by 17%
03	Improved customer service and investigative efficiency through use of updated technology	03	Increased EEOC submissions by 5% from FY25 and 18% increase from FY24

FY2026 Overall Improvement Efforts

Strategic Initiative 1

Advancing Operational Excellence



The IOCR's leadership team identified program efficiencies utilizing Lean Six Sigma principles.

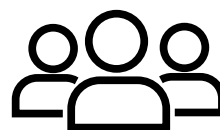
IOCR leveraged state contracts to update its 20-year-old case management system. These technological improvements continue to result in improved intake processing times for Iowans, and reduced paper, printing, and mailing costs for the state.

Strategic Initiative 2

The IOCR's leadership team focused on structuring the Agency to elevate legal talent and provide staff with experienced legal managers specializing in civil rights law.

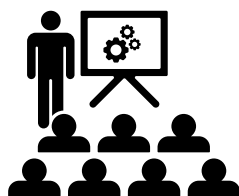
IOCR's turnover rate has reached a 15-year low. The Agency has established personal performance metrics that reflect the Agency's core values and mission.

Elevate Organizational Health



Strategic Initiative 3

Increase Stakeholder Engagement



The IOCR expanded its education and outreach programming in FY26, by emphasizing new outreach events to reach more Iowans and promoted the IOCR free Fair Housing Compliance Hotline.

In Q2 of FY27, IOCR submitted an ambitious federal grant to expand education and outreach to all corners of the state.

IOCR FY26 Performance Results

EDUCATION AND ADMINISTRATION PROGRAM			
Measure	Target	Actual	Comments & Analysis
Provide high-quality education and outreach events annually	25	29	IOCR continues to bring focus and awareness through education and outreach opportunities, including explaining the Iowa Civil Rights Act, individual rights under the Act, and how to stay compliant.
Percentage of intakes completed within statutory timelines	90%	86%	IOCR continues to find ways to improve intake processes to ensure statutory requirements are met at the time of the initial filing.

EMPLOYMENT+ PROGRAM			
Measure	Target	Actual	Comments & Analysis
Complete over 1,000 Employment+ investigative reports (Tier 1 and Tier 2 Reports)	1000	1205	The Employment+ Team exceeded expectations for the number of investigative reports completed in FY26.
Submit 950 EEOC investigative closures	950	962	IOCR received credit for 950 investigation closures by the EEOC, an increase of 33 investigative closures from FY25.
IOCR legal analysis recommendations upheld by administrative law judge	100%	100%	Administrative law judges have continued to agree with IOCR's legal analysis following their independent legal review.
Tier 1 investigations completed within statutory suggested timeframe	Average 80% of Tier 1 Reports issued within 180 days of complaint submission	Averaged 98% of Tier 1 Reports issued within 365 days of complaint submission	IOCR reports a steady rise in case volume, with filed complaints growing by more than 30% since 2020. Tier 1 investigations average 8 months from the filing date to produce an investigative legal report.

IOCR FY26 Performance Results

HOUSING PROGRAM			
Measure	Target	Actual	Comments & Analysis
Complete over 150 HUD investigations	150	175	The Housing Team continues to efficiently complete housing investigations and is nationally recognized by HUD as a top performing partner (FHAP).
Percentage of HUD perfected complaints completed within 45 days of initial interview	85%	Over 90%	The Housing Team continues to find ways to improve the intake process from date of initial interview to perfected complaint.
IOCR legal analysis recommendations upheld by administrative law judge	100%	99%	Administrative law judges have continued to agree with IOCR's legal analysis following their independent legal review.