

Section 1: GOALS	Section 2: PERFORMANCE MEASURES				
<ul> <li>#1. Increase Satisfaction</li> <li>with Veteran Services</li> <li>GP: 4, 5</li> <li>CF: Health and Support</li> <li>Services</li> <li>CF: Advocacy</li> <li>CF: Local Government</li> <li>Assistance</li> <li>CF: Physical Assets</li> <li>Management</li> <li>CF: Resource Management</li> </ul>	<ul> <li>1a. Provide more opportunities for residents to meet their medical needs internally (e.g. dermatology, chiropractic, orthopedics) as evidenced by a 5% decrease in these specialty trips annually. Percent of residents that have their dental needs met internally annually will be 95% or greater. (APM)</li> <li>Data is tracked by HIM. Report # specialty trips quarterly to QAA* (Oct, Jan, April, July) and and annual dental measure to QAA* July 2025.</li> <li>tied to Therapeutic Services 671_34101</li> </ul>				
	1b. Assist residents to maintain optimal quality of life by addressing advance care planning and palliative-type care. Education will be provided to all 13 RCC teams by Dec 2024 so residents are evaluated on a quarterly basis to ensure the care plan reflects goals of care. <b>Data is tracked by Quality &amp; Nursing.</b> Report to QAA* Jan 2025 tied to Nursing Services 671_34100				
	<ul> <li>1c. Evaluate and if appropriate, care plan each resident to receive a Restorative</li> <li>Program that supports them in achieving or maintaining their highest level of</li> <li>functioning. All residents appropriate for restorative services will be care planned for</li> <li>an individualized program (unless declined).</li> <li>Data is tracked by Nursing. Report quarterly to QAPI<sup>**</sup> (Sept, Dec, March, June)</li> <li>tied to Nursing Services 671_34100</li> </ul>				
	<ul> <li>1d. A Vocera badge will be provided to all frontline caregivers. Audit will show 95% compliance with nursing staff that are assigned to Vocera have effectively entered into the system.</li> <li>Data is tracked by Nursing. Report quarterly to QAA<sup>*</sup> (Oct, Jan, April, July) tied to Nursing Services 671_34100</li> </ul>				
	<ul> <li>1e. The Resident Satisfaction Survey in January will reflect an overall satisfaction rating of 85% or higher in the following categories: nursing, organized activities (APM), food services (APM), housekeeping services (APM).</li> <li>Data is tracked by Quality. Report results to QAPI<sup>**</sup> March 2025.</li> <li>tied to Nursing Services 671-34100, Therapeutic Services 671_34101, Food Services 671_67102, Housekeeping 671_67104 and Facilities Management 671_67103</li> </ul>				
	1f. Improve resident satisfaction with the call light system. Track and report monthly staff response times with a goal of 100%. <b>Data is tracked by Quality.</b> Report quarterly to QAA <sup>*</sup> (Oct, Jan, April, July). Complete resident satisfaction survey regarding satisfaction with the timeliness of the staff's response to their needs biannually (Aug and Jan). <b>Data is tracked by Quality.</b> Report biannually to QAA <sup>*</sup> (Sept 2024 and Feb 2025). tied to Nursing Services 671_34100				



1g. Educate, offer and track vaccinations for each resident based on the recommended adult immunization schedule by the Centers for Disease Control and Prevention (CDC). Percent of residents participating in IVH annual flu vaccine program will be 90% or higher. (APM) Percent of eligible residents that are either up-to-date or have been offered the pneumococcal vaccination will be 90% or higher annually. (APM) <b>Data is tracked by Quality.</b> Report annual measures to QAA <sup>*</sup> July 2025. <b>tied to Nursing Services 671_34100 and Therapeutic Services 671_34101</b>
1h. Arxium pharmacy project will be implemented in half of the units (18 stations) by Dec and fully implemented by June 2025 (36 stations). The medication dispensing error rate within the IVH pharmacy will be 0.1 or less annually. (APM) <b>Data is tracked by Pharmacy.</b> Report quarterly to QAPI (Oct, Jan, April, July) and semiannually to QAA <sup>*</sup> (Jan & July 2025) <b>tied to Therapeutic Services 671_34101</b>
1i.Track our medication errors through daily incident reports. Medication errors by type will be tracked and reported monthly at QAPI. The medication administration error rate per every 10,000 doses will be 1.1 or less annually. (APM) <b>Data is tracked monthly by Quality.</b> Report annual measure to QAA <sup>*</sup> July 2025. tied to Nursing Services 671_34100
1j. (KPI) Improve relationships with Iowa Association of County Commissioners and Veteran Service Officers to increase eligible benefits to Iowa Veterans. Track total number of outreach events attended monthly by the Iowa Veterans Benefits office. Track total number of Veteran outreach events attended by IDVA each month with a goal of at least 7 visits throughout the state every 6 months (July thru Dec, Jan thru June). Data is tracked monthly by IVB VSOs. Report semiannually to QAA <sup>*</sup> (Jan 2024 and July 2025) tied to Veteran Support Programs 670_04100
Note: The federal war orphan fund is a more beneficial program than the state. The War Orphan Fund (War Orphan Educational Assistance 670_22300) is no longer used. Interest earned is rolled into the Veterans Trust Fund. The Vietnam Veterans Bonus Program 670_22500 is inactive.
<ul> <li>1k. Counties receive funding to assist with training. The percentage of county allocation funds used as outlined in statute will be 100%. (APM)</li> <li>Data is tracked by IVB. Report to QAA* July 2025.</li> <li>tied to County Grant Participants 670_43100</li> </ul>
1I. Iowa Code now requires 16 CEUs annually through NACVSO. Percent of counties earning/maintaining National Association of County Veterans Service Officers (NACVSO) accreditation will be 95% or greater annually. (APM) <b>Data is tracked by IVB.</b> Report to QAA <sup>*</sup> July 2025. tied to County Grant Participants 670_43100

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	<ul> <li>1m. Examine headstones upon delivery for accuracy and/or damage. Percent of headstone inscriptions received with no errors will be 99% or greater annually. (APM)</li> <li>Data is tracked by IVC. Report to QAA* July 2025.</li> <li>tied to State Veterans Cemetery 670_52100</li> </ul>			
	<ul> <li>1n. Track the time frame for headstone placement. Percent of headstones placed within a 60 day timeframe will be 80% or greater annually. (APM)</li> <li>Data is tracked by IVC. Report to QAA* July 2025.</li> <li>tied to State Veterans Cemetery 670_52100</li> </ul>			
#2. Modernize technology, processes, equipment & facilities CF: Resource Management	2a. Update our Resident Finance financial system (Bull), establish technology cycles and move IVH's data center to the State of Iowa database. <b>Completion date goal is</b> <b>June 2025.</b> This will assist in safeguarding confidential information and assets, timeliness for meeting financial deadlines and supporting accuracy of documents for all transactions. The number of reportable financial deficiencies from regulatory agencies annually will be zero. <b>Data is tracked by Finance.</b> (APM) Report to QAA <sup>*</sup> July 2025. <b>tied to Capitals 671_52100</b>			
	<ul> <li>2b. Provide timely and effective care for good patient outcomes. The percentage of resident travel to external medical appointments arranged and met by IVH transport services will be at least 95%. (APM)</li> <li>Data is tracked by Facilities Management. Report to QAA* July 2025.</li> <li>tied to Major Maintenance 671_52101</li> </ul>			
	2c. Work orders initiated by staff for residents or employees will be prioritized and completed timely to promote satisfaction for customers. The percent of routine work orders completed within 3 days will be 90% or greater annually. (APM) <b>Data is tracked by Facilities Management.</b> Report to QAA <sup>*</sup> July 2025. tied to Facilities Management 671_67103			
#3. Improve Communications among Stakeholders GP: 5 CF: Advocacy CF: Local Government Assistance	<ul> <li>3a. Employee Satisfaction Survey in August will reflect an increase in the annual Employee Satisfaction Score<sup>***</sup> by the end of the fiscal year.</li> <li>Data is tracked by Quality. Report to QAA<sup>*</sup> July 2025.</li> <li>tied to Business/Administration 671_67101</li> </ul>			
	3b. Administer an IDVA focused survey to identify needs of the CVSOs, County Veterans Commissioners and County Board of Supervisors and satisfaction with resources provided (establish baseline data). <b>Data will be tracked annually by IVB.</b> Report annually at QAA <sup>*</sup> in July. <b>tied to County Grant Participants 670_43100</b>			

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	3c. Input GDX annual/monthly performance data (Federal VA revenue received) by County and calculate performance trends by IACCVSO District/County. Attendance of 75% of county VSO/administrator at at least one of the annual trainings. <b>Data will be</b> <b>tracked semi-annually by IVB.</b> Report annually at QAA <sup>+</sup> July. <b>tied to Veteran Support Programs 670_04100</b>
	3d. Establish an electronic monthly communication of program changes and upcoming outreach events. Build a "How To" manual ICW IACCVSO to better support new CVSOs at the District level. <b>Data will be tracked semi-annually by IVB.</b> Report annually at QAA <sup>*</sup> in July. <b>tied to County Grant Participants 670_43100</b>
#4. Recruit & Retain Employees/Volunteers: GP: 2, 4 CF: Health and Support Services CF: Resource Management	4a. Track turnover rates of nursing and food service to establish baseline measures. <b>Data is tracked by HR and Food Service.</b> Report results quarterly to QAA <sup>*</sup> (Oct, Jan, April, July) tied to Business/Administration 671_67101
	4b. Support state initiative to promote health careers by guiding current entry-level caregivers through a career ladder with tuition reimbursement to fulfill licensed nursing positions. Improve occupancy rate of licensed nurse positions to 80% by the end of the fiscal year. <b>Data is tracked by Nursing.</b> Report results biannually to QAA <sup>*</sup> (Jan and July). tied to Business/Administration 671_67101
	4c. Continue an employee recognition program through which the achievements and actions of up to 61 employees will be recognized (Champion, Daisy and Poppy awards) through this fiscal year. <b>Data is tracked by HR.</b> Report to QAA <sup>*</sup> in July. tied to Business/Administration 671_67101
	4d. Decrease mandates for nursing employees by 10% by the end of the fiscal year. <b>Data will be tracked by Nursing</b> and reported at least quarterly to QAPI <sup>**</sup> and QAA <sup>*</sup> (Oct, Jan, April, July) tied to Business/Administration 671_67101
	4e. Track completion of annual mandatory education for each employee to enhance workplace efficiency as well as employee confidence. Percentage of IVH employees attending annual education will be 95% or greater by the end of the fiscal year. (APM) <b>Data will be tracked by Education.</b> Report quarterly at QAPI <sup>++</sup> (Oct, Jan, April, July) tied to Business/Administration 671_67101
	4f. Employees will become CNA certified within four months after hire as an RTW. <b>Data will be tracked by Education.</b> Report quarterly at QAA <sup>*</sup> (Oct, Jan, April, July) tied to Business/Administration 671_67101



	4g. Establish a vibrant "grow your own" nursing workforce strategy that offers a ladder of opportunity for nursing careers, starting with high school-aged students and continuing with employees interested in pursuing advanced nursing opportunities. This includes bonuses, flexible work schedules, and free housing for students on campus. Track number of nursing employees that promote into an advanced position each month (baseline data). Track number of employees enrolled in a nursing school program that are provided a flexible schedule. <b>Data is tracked quarterly by Nursing.</b> Report quarterly at QAA <sup>*</sup> (Oct, Jan, April, July) <b>tied to Nursing Services 671_34100 and Business/Administration 671_67101</b>
	4h. Reach out to schools, churches, Veterans organizations and various local organizations in the community to increase volunteer hours at IVH. Monitor for a continual increase in volunteers to average at least 76 volunteers monthly by the end of the fiscal year. <b>Data is tracked by Recreation.</b> Report every other month at QAPI <sup>**</sup> tied to Therapeutic Services 671_34101
	4i. Track turnover rates of IVB and IVC employees to establish baseline measures. <b>Data is tracked by HR.</b> Report results quarterly to QAA <sup>*</sup> (Oct, Jan, April, July) tied to Business/Administration 670_67100
#5. Improve Access to and Delivery of Benefits to Iowa Veterans GP: 4, 5 CF: Health and Support Services CF: Resource Management CF: Economic Supports	<ul> <li>5a. Develop and maintain an efficient process for resident room turnover by ensuring effective communication and collaboration among staff. Streamline the admissions process to increase the average occupancy rate to 94% of available VA certified beds. Track the occupancy rate of available VA certified beds. Track average beds filled at the nursing level of care. (APM) Track average beds filled at the domiciliary level of care. (APM)</li> <li>Data is tracked monthly by Finance. Report quarterly at QAA<sup>*</sup> (Oct, Jan, April, July) tied to Facilities Management 671_67103</li> </ul>
	5b. Injured Veterans eligible to receive grants with the assistance of the CVSO. IVB tracks the number of injured Veterans assisted with the Injured Veterans Bonus. (APM) IVB tracks the number of approvals to the Veterans Trust Fund. (APM) <b>Data is tracked by IVB.</b> Report annually to QAA <sup>*</sup> July 2025 tied to Injured Veterans Bonus 670_22100 and Veterans Receiving Assistance from Veterans Trust Fund 670_22400
	5c. Ensure Veteran is eligible in cooperation with vendors and Iowa Financial Authority. Track number of Veterans receiving military homeownership grants. (APM) <b>Data is tracked by IVB.</b> Report annually to QAA <sup>*</sup> July 2025 tied to Veterans Receiving Home Buyers Assistance 670_22200

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#6. Financial Viability GP: 5 CF: Resource Management	6a. Reduce overtime for nursing employees by \$50,000 this fiscal year. <b>Data is tracked by Finance.</b> Report overtime status quarterly at QAA <sup>*</sup> (Oct, Jan, April, July). tied to Business/Administration 671_67101				
6b. Track and analyze work-related injuries/patterns for internal safety in Rate of lost work days due to injury on the job will be 3.5 or less. (APM) <b>Data is tracked by HR.</b> Report bimonthly at QAPI <sup>**</sup> tied to Business/Administration 671_67101				ent.	

<sup>\*</sup>QAA = Quality Assessment & Assurance Committee (Licensed Nursing Home Administrator, Medical Director, Administrator of Nursing, Infection Preventionist, Quality Management Director)

"QAPI = Quality Assurance Performance Improvement Committee (consists of a mix of supervisors and frontline workers that represent each department at the Iowa Veterans Home)

<sup>\*\*\*</sup> Employee Satisfaction Score is the average overall score from employees participating in an anonymous survey utilizing the HealthStream Quality Manager program

## Governor's Vision (GV):

- 1- Education: Elevate education for every student
- 2- Workforce: Prepare the next-gen workforce
- 3- Taxes: Cut taxes
- 4- Health Care: Support health and well-being
- 5- Government: Hold government accountable to the people
- 6- Agriculture: Protect Iowa farmland from foreign ownership

Core Functions (CF) and Service, Products and Activities (SPA) for IVDA typed in gold

Annual Performance Measures for IVDA (APM) marked in green

Key Performance Indicators (KPI) typed in blue