

Iowa HHS Operational Plan July 1, 2024 – June 30, 2025 May 2024

Health and Human Services



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# Overview

The following documents encompass the operational plan for the Iowa Department of Health and Human Services for the state fiscal year July 1, 2024 – June 30, 2025.

### Iowa HHS Strategic Plan in Action

The Plan in Action outlines the pathways for how Iowa HHS intends to achieve its strategic priorities and how progress will be measured along the way. The Plan in Action includes strategies, tactics, milestones with target dates and measures of success. Each of the nine divisions within HHS will have a Division Operational Plan that nests within the Plan in Action, and each operational plan will have specific strategies, tactics, milestones with target dates, and measures of success. Division Operational Plans will be completed by July 1, 2024.

### Iowa HHS Strategic Planning Framework

This document illustrates the framework Iowa HHS uses for strategic development and deployment.

### Iowa HHS Strategic Planning Timeline

This document outlines timeline for the three-year Iowa HHS Strategic Plan for the period January 2024 – December 2026. It shows the timing of the intersecting layers of the Strategic Plan in Action with the Division Operational Plans and use of performance measures.

#### Iowa HHS SPAs, Goals, Metrics and Measures

A summary of the Core Functions and Services, Products and Activities (SPAs) for each of the nine divisions of Iowa HHS is included. For each division, operational goals are identified along with the metrics and performance measures that are used to monitor operations.

#### Iowa HHS Organizational Structure

The Iowa HHS organizational chart as of March 2024.



# Strategic Plan in Action

## **1ST EDITION, JANUARY 2024**

The Strategic Plan in Action serves as a vital companion to our overarching strategic plan. The Plan for Action outlines the pathways for how we intend to achieve our strategic priorities and how we will measure progress along the way.

The strategies will be led and supported by Iowa HHS leadership, and the tactics will require input, coordination and effort across #TeamHHS to accomplish.

We have established measures of success in the form of metrics and milestones to accompany each strategy. These measures will provide ways for us to leverage performance improvement to assess progress.

Iowa HHS will establish a process to identify and implement strategies and tactics that will continue the work of the Strategic Plan in future years. <u>Visit our website</u> to view our public facing dashboards to highlight how we're monitoring outcomes for the lowans we serve.



https://hhs.iowa.gov/about/performance-and-reports





## 2024-2025 STRATEGIES Elevate Organizational Health

Strategy: Focus efforts to elevate employee experience.

# TACTIC



Leverage the employee engagement survey to assess areas of improvement.



Highlight Iowa HHS divisions and programs for information sharing and broader #TeamHHS staff learning.



Implement enhancements to the onboarding and #TeamHHS experience.

## **MEASURES OF SUCCESS**

Percent of staff responding favorably to these prompts in the annual employee engagement survey:

"I was given an opportunity to discuss the results from last year's survey." "Iowa HHS values my contribution."

"Overall, I am extremely satisfied with Iowa HHS as a place to work."

"I feel that I am part of a team."

#### MILESTONES

TARGET

New employee onboarding program and processes for #TeamHHS established

September, 2024

# 1.2

## 2024-2025 STRATEGIES Elevate Organizational Health

## Strategy: Create a HOPE centered organization.

Hope is the belief the future will be better than today, and you play a role in making that future possible. Hope is not a wish. Hope allows us to identify valued goals, set the pathways to achieve these goals, and exert the willpower to make these goals possible. You cannot give what you do not have! Ensuring hope among the workforce is important to organizational well-being. Research demonstrates that hope can mitigate the negative effects burnout and secondary traumatic stress. These findings show that leaders incorporating hope centered activities can reduce turnover, increase job satisfaction, and employee well-being

## TACTIC



Conduct full day HOPE summit with HHS leadership.



Actively deploy HOPE inspired language and actions into our work, weaving these concepts into all Iowa HHS communications and engagement.



Train HOPE Navigators within lowa HHS (internal champions).



Conduct a series of summits, video courses and monthly trainings.



Introduce the Iowa HOPE framework to each Iowa HHS division with focused meetings.

# MEASURES OF SUCCESS

Number of #TeamHHS trained as HOPE navigators

## Percent of staff

with community partners.)

responding they developed new skill to use hope in their work

(This effort will be a multi-year initiative. Year 1 will focus on

internal efforts. Year 2 will focus on deploying the HOPE framework

## Percent of staff

responding with increased knowledge on the science of hope

## Percent of staff

responding they were able to share the science of hope with clients and colleagues





## 2024-2025 STRATEGIES Elevate Organizational Health

Strategy: Create a culture of support and accountability while highlighting the awesomeness of our team.

## TACTIC



Implement an employee recognition program to identify and celebrate the great work happening within Iowa HHS.



Invest in professional development to support skill development.



Develop supervisory standards and tools to support consistent leadership and management approaches.



Establish supervisor support networks and resources.



Develop and implement performance evaluation standards.

# **MEASURES OF SUCCESS**

Number of in-house professional development opportunities provided

# Number of staff

with completed performance plans

Number of staff who participated in at least one optional, in-house professional development opportunity

Percentage of staff responding favorably to

*"Iowa HHS provides me with the opportunity for learning and development."* 

"I regularly receive appropriate recognition when I do a good job."

"My immediate supervisor/manager provides me with timely and helpful feedback."

January 2024



# Advance Operational Excellence

Strategy: Leverage #TeamHHS expertise and performance measure data to develop, update and improve agency policies and processes.

# TACTICS



Engage #TeamHHS in decision-making conversations and problem-solving discussions.



Establish deliberate and defined feedback loops to ensure routine constructive evaluation and response.



Deploy intentional use of the Plan-Do-Check-Act (PDCA) method to improve policies and processes.



Implement a Results Based Accountability<sup>™</sup> framework to equip and empower staff to use data and communication tools for decision making.

# **MEASURES OF SUCCESS**

## Number of staff

participating in performance improvement activities

## Number of teams

participating in performance management system

Percent of staff responding favorably to these prompts in the annual employee engagement survey:

- "I am appropriately involved in decisions that affect my work."
- "I am encouraged to develop new and better ways of serving customers."
- "We regularly use customer feedback to improve our processes."
- "Where I work, we set clear performance standards for product/service quality."





# Advance Operational Excellence

## Strategy: Establish clear and easy to understand business practices.

# TACTICS



Streamline Iowa HHS contracting and policies.



Update Iowa HHS budget to reflect agency alignment and establish a clear definition of budget authority.



Implement internal risk management controls including an internal risk assessment and audit plan.

# **MEASURES OF SUCCESS**

Number of contracts

executed on time

MILESTONES	TARGET
lowa HHS Risk assessment completed	May, 2024
Refine cost allocation methodology	June, 2024
Annual audit protocol in place	July, 2024
lowa HHS budget updated to reflect organizational structure	July, 2024

(year 1 establish a procedure for tracking this data)

# Advance Operational Excellence

## Strategy: Innovate the way we do the work.

# TACTICS



Collaborate with Department of Management Division of IT to establish governance integration and optimize project management.



Prioritize collaborative efforts to innovate, navigate change and overcome emerging challenges.

## **MEASURES OF SUCCESS**

Percent of staff responding favorably to these prompts in the annual employee engagement survey:

"There is good teamwork and cooperation between divisions at lowa HHS."

"I feel supported in my efforts to adapt to organizational changes"

MILESTONES	TARGET
lowa HHS IT Governance Structure in place	January, 2024
Establish a service level agreement between lowa HHS and Department of Management Division of IT	November, 2024



## 2024-2025 STRATEGIES Help Iowa Thrive

Strategy: Leverage system assessment initiatives to drive lowa HHS system change.

▶ <u>System</u> Alignment	<u>Child Protective</u> Services	• <u>Health Equity</u> Assessment	Community- Based Services
Assessment	Assessment		<u>Evaluation</u>

To learn more about them, visit the HHS website

## TACTICS



Work collaboratively across Divisions, analyze recommendations and propose improvements.



Coordinate a communications plan to ensure the recommendations are applied consistently across Iowa HHS.



Capture ongoing feedback to assess if system improvements have been effective.



Develop a system alignment plan and evaluate it regularly to determine if the measures of the plan are being achieved.

# **MEASURES OF SUCCESS**

Number of engagements with local partners throughout each effort

Percent of staff responding favorably to this prompt in the annual employee engagement survey:

"There is good teamwork and cooperation between divisions at lowa HHS."

MILESTONES	TARGET
Standard Iowa HHS implementation plan tool developed for use by #TeamHHS	March, 2024

## 2024-2025 STRATEGIES Help Iowa Thrive

Strategy: Transform programmatic operations to improve Iowa HHS program outcomes.

- This strategy includes:
- Complete special projects such as establishing Aging and Disability Resource Centers (ADRCs)
- Certified Community-Behavioral Health Clinics (CCBHCs)
- Standing up a new Iowa HHS Incident Command Structure
- Implementing outpatient competency restoration services and children's services at state operated mental health institutes (MHIs) and Medicaid waiver redesign, and
- Implementing Public Assistance Oversight

## TACTICS



Research closed loop referral systems to identify effective solutions and proof of concepts in other states and jurisdictions.



Develop a data sharing strategy to support service delivery, that includes addressing barriers to information sharing within Iowa HHS and with our partners.



Leverage the State of Iowa Health Improvement Plan and State Health Assessment to drive decision making and planning.

\* The magnitude of this strategy is monumental and spans the system and agency. The list of special projects noted are reflective of a few key initiatives for illustrative purposes and is not intended to be comprehensive of all of the efforts underway.

## **MEASURES OF SUCCESS**

## Number of teams

engaged in performance management who have identified a "is anyone better off" measure

# Number of teams

who identify clear links to strategies in the State Health Improvement Plan

MILESTONES	TARGET
lowa HHS Divisions developed operational plans	July, 2024
ldentified pathways to develop a closed loop referral system	October, 2024
Established a baseline HHS data inventory, which includes identified data sets, data owners, current use, legal parameters for use and sharing	December, 2024



## 2024-2025 STRATEGIES Help Iowa Thrive

Strategy: Improve Iowa HHS customer and client experience.

# TACTIC



Embed equity in physical and virtual office spaces.



Relaunch the Iowa HHS website using a human-centered design to ensure easy navigation.



Improve accessibility in physical and virtual office spaces.



Create a roadmap for the development and implementation of an integrated eligibility system.



Improve disability and language access of client communications.

MEASURES OF SUCCESS
Percent of staff responding favorably to these prompts in the annual employee engagement survey:
"I am encouraged to develop new and better ways of serve customers"
"Iowa HHS is committed to employee safety"
TOTAL TRANSPORT AND A STATE

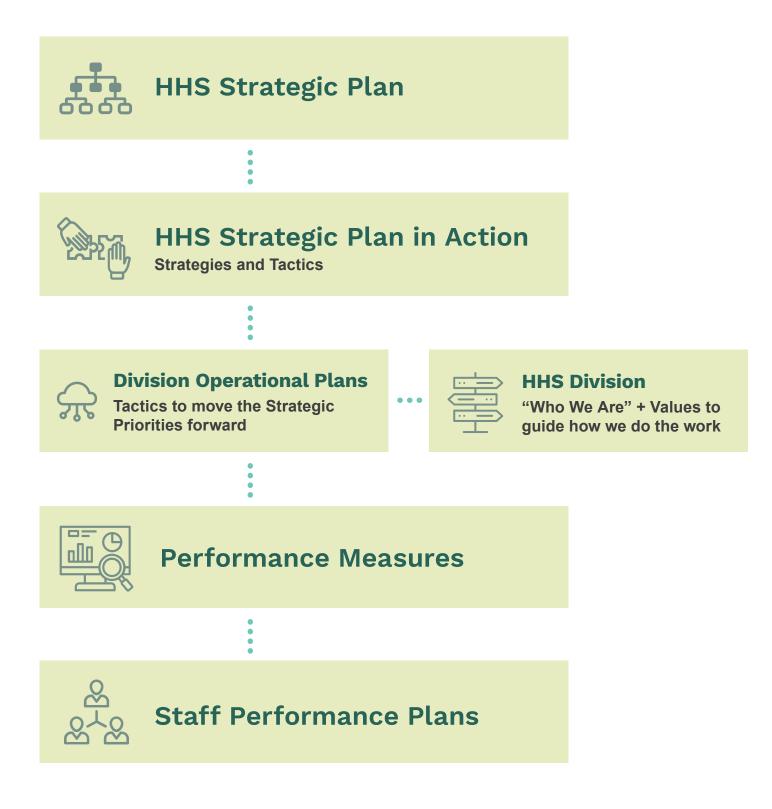
MILESTONES	TARGET
Language Access Coordinator position in place	June, 2024
Human-centered design concepts incorporated into Iowa HHS website	June, 2024
Roadmap for development and implement of an integrated eligibility system in place	June, 2024
Complete a language access assessment	August, 2024
Analyze and document processes currently being used to offer requests for accommodations for clients	December, 2024
Identify accessibility improvements at Iowa HHS facilities using an ADA-based checklist	December, 2024

January 2024



STRATEGIC DEVELOPMENT AND DEPLOYMENT FRAMEWORK

# Framework

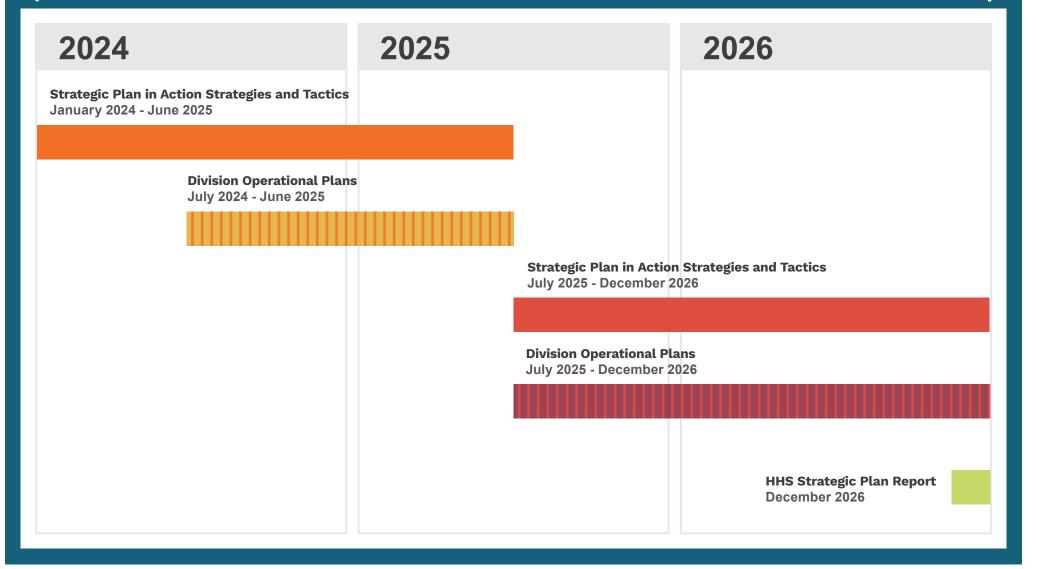




strategic development and deployment framework **Timeline** 

# HHS Strategic Plan

January 2024 - December 2026



# Iowa HHS SPAs, Goals, Metrics and Measures

### Please Note:

SFY2024 was the first year for the newly aligned Iowa Department of Health and Human Services. The agency's 2024-2027 Strategic Plan began was deployed in calendar year 2024, and its Division Operational Plans will be deployed in SFY25. For SFY24 and SFY25, a selection of each legacy agency's performance measures were chosen to represent the aligned agency's work with the understanding that measures developed during a comprehensive planning process across divisions would be in place by SFY2026. Targets for SFY25 are not set in this document, but will be added in the future as teams establish those values. Services, Products, Activities (HHS Divisions)

### **Division of Compliance**

Program	Performance Measures	Target	Actual	lowa Advantage
Human	<ul> <li>Average number of days to fill key</li> <li>vacancies in the divisions of Family Well-</li></ul>	72.00	74.38	Yes
Resources	Being and Protection and State-Operated <li>Specialty Care. <ul> <li>Income Maintenance Worker 2</li> <li>Licensed Practical Nurse (LPN)</li> <li>Registered Nurse</li> <li>Resident Treatment Technician</li> <li>Resident Treatment Worker</li> <li>Social Work Supervisor</li> <li>Social Worker 2</li> <li>Social Worker 3</li> <li>Social Worker 4</li> <li>Youth Services Worker</li> </ul> </li>	(SYF24)	(SFY23)	

#### Division of Administration

Program	Performance Measures	Target	Actual	lowa Advantage
Finance	Percent of claims paid within 30 days.	95% (SFY24)	98% <sup>1</sup> (SFY23)	Yes

<sup>&</sup>lt;sup>1</sup> This figure is for the legacy lowa Department of Human Services only.



### **Division of Medicaid**

Program	Performance Measures	Target	Actual	lowa Advantage
Medicaid	Percent of Amerigroup enrollees who are satisfied with their health plan (child Medicaid)	78.6% (SFY24)	73.6% (SFY23)	No
	Percent of Iowa Total Care enrollees who are satisfied with their health plan (child Medicaid)	78.0% (SFY24)	73.0% (SFY23)	No
	Percent of Amerigroup enrollees who are satisfied with their health plan (adult Medicaid)	66.1% (SFY24)	61.1% (SFY23)	No
	Percent of Iowa Total Care enrollees who are satisfied with their health plan (adult Medicaid)	65.3% (SFY24)	60.3% (SFY23)	No
	Percent of Amerigroup enrollees who report receiving needed care (child Medicaid)	75.8% (SFY24)	70.8% (SFY23)	No
	Percent of Iowa Total Care enrollees who report receiving needed care (child Medicaid)	70.5% (SFY24)	65.5% (SFY23)	No
	Percent of Amerigroup enrollees who report receiving needed care (adult Medicaid)	60.0% (SFY24)	55.0% (SFY23)	No
	Percent of Iowa Total Care enrollees who report receiving needed care (adult Medicaid)	63.8% (SFY24)	58.8% (SFY23)	No
	Percent of Long Term Support Services (LTSS) members receiving community based services	71.00% (SFY24)	66.89% (SFY23)	No
	Percent of overturned Administrative Law Judge (ALJ) appeals	28.90% (SFY24)	33.92% (SFY23)	No
Medicaid Eligibility	Number of medical assistance enrollments	676,892 (SFY24)	784,984 (SFY23)	Yes
	Number of medical assistance renewals	164,000 (SFY24)	144,924 (SFY23)	Yes
	Percent of medical assistance applications processed within 45 days.	95.50% (SFY24)	94.22% (SFY23)	No



Program	Performance Measures	Target	Actual	lowa Advantage
Cherokee Mental Health Institute (CMHI)	Number of hours (per 1,000 patient hours) spent in restraint or seclusion (17 and younger)	7.1 (SFY24)	8.9 (SFY23)	No
	Number of hours (per 1,000 patient hours) spent in restraint or seclusion (18 and older)	1.4 (SFY24)	1.8 (SFY23)	No
	Readmission rate (readmitted within 30 days)	0.0% (SFY24)	1.4% (SFY23)	Yes
Civil Commitment Unit for Sexual Offenders (CCUSO)	Number of returns from transitional setting — Release with Supervision (RWP) and Transitional Release Program (TRP) — to secure setting via a court order	3 (SFY24)	4 (SFY23)	Yes
	Number of discharges for the CCUSO Program/civil commitment (excluding deaths)	3 (SFY24)	3 (SFY23)	No
Foster Care	Length of stay in Qualified Residential Treatment Program (QRTP)	225 days (SFY24)	239 days (SFY23)	No
	Percent of children placed in the home of relatives or fictive kin	45% (SFY24)	42% (SFY23)	Yes
Independence Mental Health Institute (IMHI)	Number of hours (per 1,000 patient hours) spent in restraint (17 and younger)	1.06 (SFY24)	1.32 (SFY23)	No
	Number of hours (per 1,000 patient hours) spent in seclusion (17 and younger)	0.75 (SFY24)	0.94 (SFY23)	No
	Number of hours (per 1,000 patient hours) spent in restraint or seclusion (18 and older)	0.80 (SFY24)	1.00 (SFY23)	No
	Readmission rate (readmitted within 30 days)	0.00% (SFY24)	1.03% (SFY23)	Yes
State Resource Centers	Readmission rate (readmitted within 180 days)	95% (SFY24)	96% (SFY23)	Yes
State Training School	Number of hours (per 1,000 student hours) spent in room confinement	1.27 (SFY24)	1.59 (SFY23)	No
	Number of hours (per 1,000 student hours) spent in restraint	0.009 (SFY24)	0.011 (SFY23)	No

#### **Division of State-Operated Specialty Care**



Program	Performance Measure	Target	Actual	lowa Advantage
988 Suicide & Crisis Lifeline	Number of calls	30,382 (SFY24)	21,701 (SFY23)	No
	Number of chats	12,800 (SFY24)	9,142 (SFY23)	No
	Number of texts	7,085 (SFY24)	5,061 (SFY23)	No
	Average answer rate for calls	90% (SFY24)	89% (SFY23)	Yes

## Division of Behavioral Health

## Division of Public Health

Program	Performance Measure	Target	Actual	lowa Advantage
Office of the Medical Examiner	Percent of autopsies completed within 48 hours.	90% (SY24)	57% (SFY23)	Yes
Office of the Medical Examiner	Percent of autopsies completed within 72 hours.	90% (SY24)	78% (SFY23)	Yes
Sexually Transmitted Infection (STI) Program	Percent of congenital syphilis cases averted.	90% (SFY23)	81% (CY22)	No
Your Life Iowa	Total number of contacts	47,278 (SFY24)	46,933 (SFY23)	No
	Number of calls	41,313 (SFY24)	40,094 (SFY23)	No
	Number of chats	2,584 (SFY24)	3,984 (SFY23)	No
	Number of texts	3,379 (SFY24)	2,885 (SFY23)	No
	Number of contacts about gambling	1,803 (SFY24)	1,521 (SFY23)	No
	Number of contacts about mental health	19,789 (SFY24)	20,238 (SFY23)	No
	Number of contacts about substance use	7,818 (SFY24)	6,887 (SFY23)	No
	Number of contacts about suicide	10,233 (SFY24)	11,651 (SFY23)	No
	Answer rate (phone)	95.00% (SFY24)	93.90% (SFY23)	No



Program	Performance Measure	Target	Actual	lowa Advantage
Community based technical assistance	Number of communities and/or state and local governments receiving technical assistance.	38 (SFY24)	57 (SFY23)	No
Low Income Home Energy Assistance Program (LIHEAP)	Number of households served	77,000 (SFY23)	83,633 (SFY22)	No
Supplemental Nutrition Assistance Program (SNAP)	Payment timeliness	95.00% (SFY23)	78.34% (SFY22)	No
	Payment accuracy	94.00% (SFY23)	91.40% (SFY22)	Yes
	Case and Procedural Error Rate (CAPER)	33.99% (SFY20)	19.49% (SFY19)	No
Weatherization Assistance Program	Number of households served	1,012 (SFY23)	816 (SFY22)	No

## Division of Community Access and Eligibility

## Division of Family Well-Being and Protection

Program	Performance Measure	Target	Actual	lowa Advantage
Child Care Assistance (CCA)	Number of children able to access care due to Child Care Assistance (CCA)	19,823 (SFY24)	17,421 (SFY23)	Yes
Family Development and Self-Sufficiency (FaDSS)	Percent increase in average monthly income from wages at program entry and exit	80% (SFY23)	446% (SFY22)	No

## Division of Aging and Disability Services

Program	Performance Measures	Target	Actual	lowa Advantage
Caregiver Program	Number of lowans receiving assistance from at least one caregiver service.	5,000 (SFY24)	5,036 (SFY23)	No
Older Americans Act – Case Management	Number of older lowans with an independent living impairment receiving Case Management service.	1,200 (SFY24)	1,066 (SFY23)	Yes
Training, education, outreach	Number of individuals who received training on guardianship, conservatorship, and other substitute decision-making topics.	750 (SFY24)	780 (SFY23)	No

