

AGENCY PERFORMANCE REPORT

Fiscal Year 2022

INTRODUCTION

I am pleased to present the FY22 (July 1, 2021 – June 30, 2022) performance report for the Iowa Department of Inspections and Appeals (Department). This report is published to provide information about the challenges and accomplishments of the Department during FY22.

A key priority facing the agency is continuing to deliver timely and accurate services that are critical to our mission within available human and financial resources.

Another key strategic priority is to identify ways to improve collaboration and communication with internal and external customers and stakeholders to accomplish our mission and vision.

Major accomplishments during FY22 include:

- The average age of pending Unemployment Insurance appeal cases is 34 days, compared to the federal Department of Labor guidelines of 40 days.
- 29% of children achieved permanency within 12 months after being assigned a CASA Advocate.

- 100% of race horses inspected for fitness prior to a race.
- The Investigation Division recovered \$3.3M from improper public assistance, resulting from client error, fraud or agency error.

We invite all citizens and our customers and stakeholders to join with us to protect public interests and integrity of executive branch programs.

Respectfully submitted,

Larry Johnson, Jr. Director

AGENCY OVERVIEW

The Department of Inspections and Appeals is a diverse regulatory agency established to protect the public through the enforcement of state and federal laws.

The services, products and activities of the Department relate to five core functions: Adjudication/Dispute Resolution; Advocacy; Legal Representation; Regulation and Compliance; and Resource Management.

Our **Vision** is "Be an effective, efficient, and approachable regulatory agency".

Our **Mission** is "Achieve compliance through education, regulation, and due process for a safe and healthy Iowa".

Seven principles guide us in upholding the law through:

- Leadership
- Strategic Planning/Deployment
- Customer Focus
- Performance Measurement & Analysis
- Employee Engagement
- Continuous Improvement/Lean
- Results

The Department consists of four operating divisions and four attached units.

The **Administration Division** provides essential, centralized fiscal and administrative services, such as budget preparation, accounts payable and receivable, personnel, public information, purchasing, lease and vehicle management, legislative affairs, strategic and performance planning, and legal counsel.

The Division regulates social and charitable gambling activities to protect the public from incidence of fraudulent or illegal activities.

The Division conducts (either through state inspectors or contracts with local boards of health) food safety inspections of restaurants, grocery stores, food processing plants, and vending machines to ensure consumers receive safe and wholesome food.

The Director enters into, implements and enforces compacts between the State of lowa and Indian tribes to operate Indian gaming establishments in accordance with federal law.

The Administrative Hearings Division affords citizens due process for adverse actions taken by state agencies. The Division conducts contested case hearings involving lowans who disagree with decisions issued by state government agencies. The Division issues a proposed decision subject to final

review by the Director of the agency involved in the contested case proceeding. During FY22, the Division disposed of 9,993 cases. Approximately half of the hearings involve lowans who have disputes regarding public benefits or other matters regulated by the Department of Human Services.

The **Health Facilities Division** enhances the safety, security and general welfare of the persons served in over 4,000 regulated entities. The Division inspects/ monitors, licenses and/or certifies under the Medicare and Medicaid Programs health care providers and suppliers, which includes long-term care facilities, hospitals, hospices, end-stage renal disease units, rural health clinics, elder group homes, assisted living programs, adult day services programs and child-placing agencies.

The Investigations Division works to ensure misspent public assistance moneys obtained through fraud, inadvertent error or agency error are identified and collected so that only eligible applicants receive them in the appropriate amounts. The Division also ensures compliance with applicable federal and state financial requirements by DHS offices and health care facilities.

The **Child Advocacy Board** works to ensure effective permanency planning for all children in out of home placement through advocacy. The Board accomplishes this purpose through local citizen foster care review boards, foster care registry and the Court Appointed Special Advocate volunteer

program. In addition, the Board makes recommendations to the Governor, Legislature, Supreme Court, Chief Judge of each Judicial District, Iowa Department of Human Services, and child-placing agencies on ways to improve the delivery of foster care services and remove barriers that prevent the delivery of top-quality foster care.

The **Employment Appeal Board** timely adjudicates the rights and duties of workers and employers under unemployment insurance laws, decides final resolution of contested OSHA and contractor registration violations, and handles personnel-related cases. The Board serves as the final administrative law forum for unemployment benefit appeals.

The Racing and Gaming Commission works to protect the public from incidence of fraudulent or illegal activities at pari-mutuel horse racing, commercial gambling facilities, sports wagering, and fantasy sports contests in lowa. It also works to protect the health and welfare of the racing animals. The Commission licenses eligible applicants for employment and sets and enforces standards for the licensing of industry occupations and for the operation of all racetracks and gambling facilities.

The **State Public Defender** (SPD) provides high-quality, cost-efficient legal representation to indigent clients in state criminal court, juvenile court, and other proceedings as required by law in those

areas of the state where local public defenders exist. The provision of legal services to indigent clients is constitutionally In Iowa, these services are mandated. provided through a combined system of local public defenders and private attorneys. The State Public Defender also has jurisdiction over the Indigent Defense Fund, which provides funds to pay for indigent defense and ancillary services provided by and contract attorneys and miscellaneous vendors, such as expert witnesses and court reporters. Indigent defense services are constitutionally mandated, which requires these services to be paid by the state. The Indigent Defense Fund pays for those indigent services not covered by local public defenders. (SPD will be filing their own agency report).

The Department's customers and stakeholders include state agencies; municipal corporations; citizens (adults and children); federal government agencies; consumers of elder group homes, tenants of assisted living programs, consumers of adult day service programs, residents of health care facilities; health care providers; licensees: industry and advocacv associations; unemployed persons; indigent persons; attorneys; law enforcement; the legislature; and the court system.

STRATEGIC PLAN RESULTS

Key Strategic Challenges and Opportunities:

The protection of public interests and executive branch program integrity is the key result of the mission of the Iowa Department of Inspections and Appeals (Department). Accomplishing that result is challenged by the ability to continue to deliver timely and accurate services with reduced human and financial resources and to overcome any negative perception of our regulatory and oversight role.

To address these strategic challenges, the Department established three long-term goals and associated key strategies:

Goal	l #1 – be an eff e	ective agency.
		Have new databases with online applications by 01/01/22 Achieved
	Outcomo	Develop and implement staff mentoring and training program by 01/01/21 Ongoing
	Outcome Measures	Develop agency-wide space assessment by $07/01/21$. – Wallace Building - achieved; Lucas Building - ongoing
		Provide stakeholders with timely data.
		Research current technology options.
	u	Have timely inspections/surveys.
	Key Strategies	Have online licensing for licenses issued by DIA.
	Strategies	Update DIA databases.
		Review space options for staff.

Goa	1 #2 – be an eff i	icient agency.
	Outcome Measures	Have e-filing complete by 07/01/20 Achieved Have the Food bureau able to take credit card payments by 07/01/20 Achieved Decrease phone calls and webmaster inquiries seeking information by 50% Ongoing Satisfy CMS performance measurement standards. – Achieved & ongoing
	Key Strategies	Use email distribution lists. Have an intranet for employees. Move to e-filing system. Have timely annual surveys.

Goal	#3 – be an ap	proachable agency.
	Outcome	Launch new DIA website with training resources by 01/01/21 Achieved
	Measures	Increase traffic to website by 30% Ongoing
		Update DIA website.
		Ensure our online access is mobile compatible.
		Ability to use multiple platforms
	Key	Meet-with and conduct training-for industry and associations.
	Strategies	Have a multimedia library.
		Survey industry for feedback on areas for improvement
		Share data with industry, legislators, stakeholders, other agencies

SERVICE/PRODUCT/ACTIVITY

Name: Administrative Hearings

Description: The conduct of quasi-judicial contested case hearings involving lowans who disagree with an administrative ruling issued by a state government agency.

Why we are doing this: To afford citizens due process for adverse actions taken by state agencies.

What we're doing to achieve results: Conducting hearings in a timely and equitable manner. Issuing a proposed decision subject to final review by the director of the agency involved in the contested case proceeding.

Performance Measure:

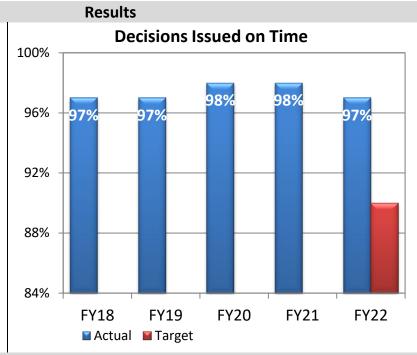
Percentage of Judges' decisions issued within 30 days of the hearing.

Performance Target:

90%

Data Sources:

Administrative Hearings Division



What was achieved: 97% of decisions were issued within 30 days of the hearing.

Resources: Expenditures for the Administrative Hearings Division, as a whole, for FY22 were 18.73 FTE and \$3,331,525.

CORE FUNCTION

Name: Adjudication/Dispute Resolution - 01

Description: This core function relates to administrative hearings of adverse actions by state agencies and adjudication of the rights and duties of workers and employers under unemployment insurance (UI) laws.

Why we are doing this: To afford citizens due process.

What we're doing to achieve results: A three-member Employment Appeal Board serves as the final administrative law forum for state and federal unemployment benefit appeals. The Board also hears appeals of rulings of the Occupational Safety and Health Administration (OSHA), rulings of the Iowa Department of Administrative Services (DAS/HRE) on state employee job classifications, and rulings of the Iowa Public Employees Retirement System. The Board hears appeals involving peace officer issues and contractor registration requirements.

Performance Measure:

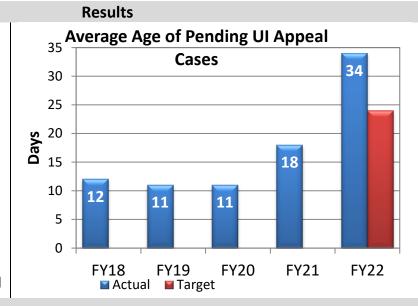
Average age of pending UI appeal cases compared to the federal Department of Labor guidelines of 40 days.

Performance Target:

24 days

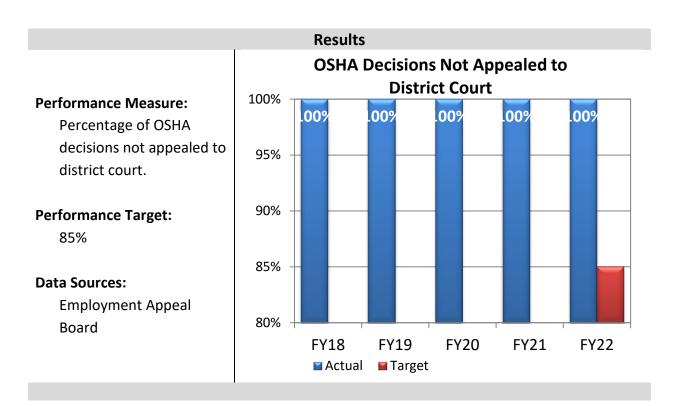
Data Sources:

Employment Appeal Board



What was achieved: 34 days was the average age of pending UI appeal cases compared to the federal Department of Labor guideline of 40 days.

Resources: Expenditures for the Employment Appeal Board, as a whole, for FY22 were 11.04 FTE and \$1,259,476.



What was achieved: 100% of the decisions were not appealed to District Court.

Resources: Expenditures for the Employment Appeal Board, as a whole, for FY22 were 11.04 FTE and \$1,259,476.

CORE FUNCTION

Name: Advocacy - 04

Description: This core function describes the two volunteer child advocacy programs of the Child Advocacy Board (CAB). CAB operates the Court Appointed Special Advocate (CASA) and the lowa Citizen Foster Care Review Board (ICFCRB) programs.

Why we are doing this: To ensure effective permanency planning exists for all children in out-of-home placement.

What we're doing to achieve results: Under the CASA program, volunteers are appointed by the Court to advocate for a specific abused or neglected child. The CASA volunteer serves many roles in a child's court case, including investigation, assessment, facilitation, advocacy, and monitoring.

Performance Measure:

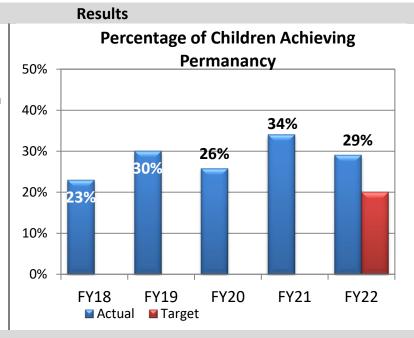
Percent of children who achieve permanency within 12 months after being assigned a CASA Advocate.

Performance Target:

20%

Data Sources:

Child Advocacy Board



What was achieved: 29% of children achieved permanency within 12 months after being assigned a CASA Advocate.

Resources: Expenditures for the Child Advocacy Board, as a whole, for FY22 were 29.28 FTE and \$3,178,377.

CORE FUNCTION

Name: Regulation and Compliance - 61

Description: This core function covers a multitude of regulatory and compliance activities within the lowa Department of Inspections and Appeals.

Why we are doing this: To protect the public from incidence of fraudulent or illegal activities and to protect the public health, safety and welfare. The individual services/products/activities will provide more detail on the results expected.

What we're doing to achieve results: The Department, through licensing, certification, investigation, and auditing activities, ensures applicants, participants, organizations, providers, and service recipients meet the requirements set out in state and federal laws, rules, and regulations. The individual services/products/activities will provide more detail on how results are being achieved.

Performance Measure:

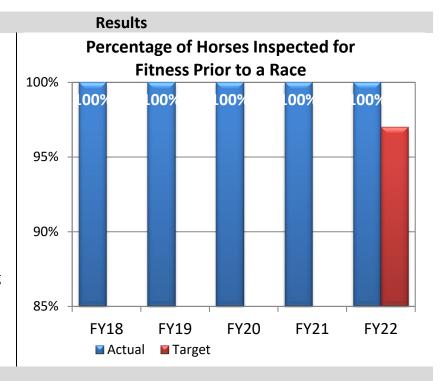
Percentage of horses inspected for fitness prior to a race.

Performance Target:

97%

Data Sources:

Iowa Racing and Gaming Commission



What was achieved: 100% of horses were inspected for fitness prior to racing.

Resources: Expenditures for the Racing and Gaming Commission, as a whole, for FY22 were 49.57 FTE and \$7,090,218.

SERVICE/PRODUCT/ACTIVITY

Name: Food and Consumer Safety

Description: Statewide regulatory oversight of food establishments and food processing plants.

Why we are doing this: To protect the public from incidence of serious disease and injury in the regulated environments.

What we're doing to achieve results: The Department, or through contract, conducts inspections, complaint investigations, and foodborne illness investigations, issues licenses to eligible applicants, and takes appropriate disciplinary action to ensure compliance with state and federal requirements. Contracts are monitored to ensure contract compliance.

Results

Performance Measure:

Percentage of Tier 5 (high risk level) establishments inspected once every 6 months.

Performance Target:

88%

Data Sources:

Department of Inspections and Appeals – Food and Consumer Safety Bureau

What was achieved: 87% of Tier 5 (high risk level) establishments were inspected once every 6 months. In FY 22 the measure changed from once a year to once every 6 months.

Resources used: Expenditures for the Food and Consumer Safety Bureau, as a whole, for FY22 were 34.03 FTE and \$5,206,839.

SERVICE/PRODUCT/ACTIVITY

Name: Long-term care and Habilitation facilities and programs licensing/certification

Description: Statewide regulatory oversight over health care facilities, hospitals, Medicarecertified health care providers and programs, and children's facilities/programs.

Why we are doing this: To enhance the safety, security and general welfare of persons served in licensed/certified health-related facilities and programs.

What we're doing to achieve results: The Department conducts license application processing, regular surveys/inspections and complaint investigations to ensure facilities are in compliance with state and federal regulatory requirements prior to making licensing decisions.

Results

Performance Measure:

Percentage of federal workload requirements met for Tier 1 and Tier 2.

Performance Target:

95%

Data Sources:

Department of Inspections and Appeals – Health Facilities Division

What was achieved: 100% of Tier 1 and Tier 2 requirements of the federal workload were met.

Resources: Expenditures for the Health Facilities Division, as a whole, for FY22 were 102.48 FTE and \$15,254,160.

Performance Measure:

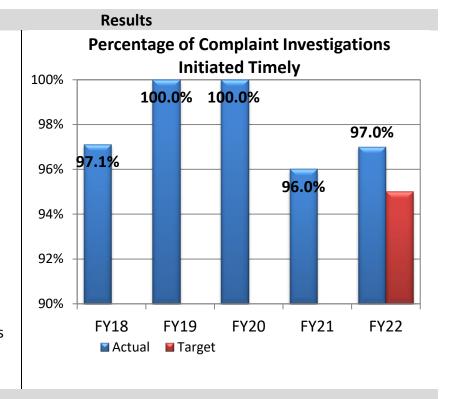
Percentage of nursing home immediate jeopardy complaint investigations initiated within required timeframes.

Performance Target:

95%

Data Sources:

Department of
Inspections and Appeals
- Health Facilities
Division



What was achieved: 97% of all immediate jeopardy complaint investigations were initiated within the state guidelines.

Resources: Expenditures for the Health Facilities Division, as a whole, for FY22 were 102.48 FTE and \$15,254,160.

SERVICE/PRODUCT/ACTIVITY

Name: Collections Services

Description: Collection of overpayments in various public assistance programs.

Why we are doing this: To assure repayment of overpayments made in the public assistance programs administered by DHS.

What we're doing to achieve results: The Investigations Division uses various collections methods including, but not limited to: voluntary repayment agreements, state tax offset, small claims, and court-ordered repayment.

Performance Measure:

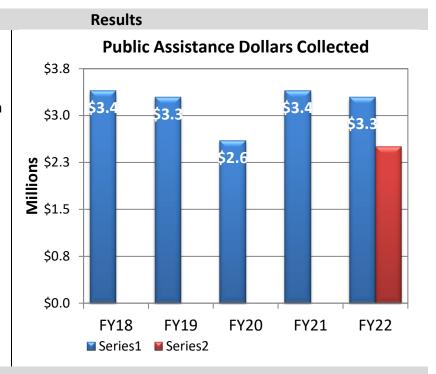
Dollars recovered from improper public assistance, resulting from client error, per year compared to the previous year.

Performance Target:

\$2.5 million

Data Sources:

Department of **Inspections and Appeals** Investigations Division



What was achieved: \$3.3 million was collected during the fiscal year.

Resources: Expenditures for the Investigations Division, as a whole, for FY22 were 36.60 FTE and \$4,940,198.

SERVICE/PRODUCT/ACTIVITY

Name: Audit Services

Description: Local DHS offices and health care facility financial audits.

Why we are doing this: To assure that local DHS offices and health care facilities comply with state and federal law related to financial resources.

What we're doing to achieve results: The Investigations Division conducts financial audits to identify any audit exceptions and follows up to ensure that reimbursement for audit exceptions are timely made to the state or federal government or to residents/families.

Performance Measure:

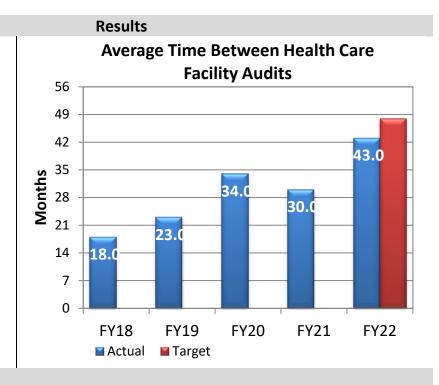
Average time between audits for care facilities.

Performance Target:

48 months

Data Sources:

Department of Inspections and Appeals Investigations Division



What was achieved: Health care facilities were audited an average of every 43 months.

Resources used: Expenditures for the Investigations Division, as a whole, for FY22 were 36.60 FTE and \$ 4,940,198.

AGENCY PERFORMANCE PLAN FY 2022

Name of Agency: Inspections and Appeals

Agency Mission: "To achieve compliance through education, regulation and due process for a safe and healthy lowa."

Core Function	Performance	Performance	Prior	Link to Strategic Plan Goal(s)
	Measure (Outcome)	Target	Year	
			Actual	
CF: Adjudication/Dispute				DIA Goal #1 – Be an effective
Resolution				agency.
				DIA Goal #2 – Be an efficient
				agency.
				DIA Goal #3 – Be an
				approachable agency.
				EAB Goal #1 – Continue to
				increase compliance with
				state and federal laws
Desired Outcome(s):				
Citizens are afforded due	Percentage of all cases	100%	100%	AHD
process in contested case	conducted in			
proceedings involving	accordance with due			
adverse agency action.	process requirements.			
Timely adjudication of	Average age of	24 days	18 days	EAB
the rights and duties of	pending			
workers and employers	Unemployment			
under unemployment	Insurance appeal			
insurance (UI) laws.	cases compared to the			
	federal Department of			
	labor guidelines of 40			
	days.			
Timely adjudication of	Percentage of	85%	100%	EAB
contested OSHA	decisions not			
violations.	appealed to district			
	court.			
	Percentage of	90%	100%	EAB
	decisions issued			
	within 14 days of			
	Board review.			
Timely adjudication of	Percentage of	90%	100%	EAB
contested construction	decisions issued			

vithin 14 days of			
Board hearing.			
Performance	Performance	Prior	Strategies/Recommended
Measures	Target	Year	Actions
		Actual	
'ercentage Judges'	90%	98%	ALJ time standards decisions
lecisions issued			must be issued no later than
vithin 30 days of the			30 days of closing the hearing
earing.			record.
			AHD
Performance		Prior	Strategies/Recommended
Measures	Target		Actions
	0	0	AHD
•			
= '			
=	99% - FY19	97%	Timely adjudication of
			contested case hearings.
•			
•			AHD
	20	•	Desisions made in a timelu
=	30	ь	Decisions made in a timely
-			manner. AHD
_			AND
	24 days	11 days	Maintain daily agendas.
	L-T days	II uays	mannam dany agondas.
=			Utilize checkpoint system to
· ·			download voice files from lowa Workforce
• •			Development to save time
ederal Department of			and speed up transcription
abor guidelines of 40			process.
lays.			EAB
Percentage of OSHA	90%	100%	Schedule administrative law
lecisions issued			judge hearing within 20
vithin 14 days of			days of receipt of answer.
eview by Board.			EAD
3 THE STATE OF THE	Performance Measures ercentage Judges' ecisions issued within 30 days of the earing. Performance Measures umber of ubstantiated complaints against udges (Administrative code of Judicial conduct). ercentage of case osures (hearings, ettlements, ismissals, etc) within 0 days following the earing. verage number of ays between the earing and decision suance verage age of ending nemployment usurance appeal ases compared to the ederal Department of abor guidelines of 40 ays. ercentage of OSHA ecisions issued within 14 days of	Performance Measures Performance Target Percentage Judges' ecisions issued within 30 days of the earing. Performance Measures Performance Measures Performance Target O Description O	Performance Measures Performance Target Year Actual Percentage Judges' ecisions issued within 30 days of the earing. Performance Measures Performance Target Year Actual Performance Measures Performance Target Year Actual O O O O O O O O O O O O O O O O O O O

3. Regulatory Appeals Org. #7700	Cor Reg issu	centage of atractor distration decisions and within 14 days dearing by Board.	90%	100%	Communicate importance of timeliness standards with staff. EAB
Core Function	N	Performance leasure (Outcome)	Performance Target	Prior Year Actual	Link to Strategic Plan Goal(s)
CF: Child and Adult Protection					CAB Goal #1: Become a results-focused organization.
Desired Outcome(s):					
Safety and permanency for children in the child welfare system.	und juri ser	ne children are der court sdiction when ved by a CASA vocate.	18 months	18	САВ
	Per who per 12 bei	rcent of children o achieve manency within months after ng assigned a SA Advocate	20%	34.1%	CAB
Services, Products, Activiti		Performance	Performanc		Strategies/Recommended
		Measures	Target	Year Actual	Actions
1. Foster Care Review Board Issue review findings & recommendations.	rds:	Percentage of FCRB reports submitted to the courts and interested parties by the 15 th calendar day post-review date.		100%	Provide for high quality volunteer recruitment, screening, training and support activities. Solicit program quality improvement suggestions from employees, volunteers and interested parties. CAB
Org# 0310, 0320, 0325 2. Court Appointed Special	1	Derechtage of	90%	72.7%	Drovido for high quality
Advocates: Submit court report with recommendations.		Percentage of reports submitted to the court within specified timeframes.	30/6	12.176	volunteer recruitment, screening, training and support activities. Solicit program quality improvement suggestions
Org # 0310, 0400, 0420					from employees, volunteers and interested parties.

				САВ
Core Function	Performance	Performance	Prior	Link to Strategic Plan
	Measure (Outcome)	Target	Year	Goal(s)
			Actual	
CF: Regulation, Compliance,				IRGC Goal #1 - Achieve
Enforcement and				the highest possible
Investigation				voluntary compliance of statutes, rules and
				regulations.
				DIA Goal #1 – Be an
				effective agency. DIA Goal #2 – Be an
				efficient agency.
				DIA Goal #3 – Be an
				approachable agency.
Desired Out ()				
Desired Outcome(s):				
		070/	4000/	Inco
To protect the health and	Percentage of	97%	100%	IRGC
welfare of the racing animals.	horses inspected for			
	fitness prior to a			
To protect the public from	race. Percentage of un-	95%	100%	IRGC
incidences of fraudulent	licensable issues	95%	100%	INGC
activities in gambling	that are discovered			
facilities.	and acted upon			
racincies.	during			
	initial review.			
To enhance the safety,	Percentage of	95%	100%	HFD
security and general welfare	federal workload	00/0		
of the persons served in	requirements met			
licensed/certified facilities	for Tier 1 and Tier 2.			
and programs.				
Core Function	Performance	Performance	Prior	Link to Strategic Plan
	Measure (Outcome)	Target	Year	Goal(s)
			Actual	
	Percentage of	12%	1%	HFD
	nursing facilities			
	that are deficiency-			
	free.			
To identify fraud, waste and	Percentage of	67%	68%	INVEST
abuse and restore	investigations			
accountability and integrity to	resulting in founded			
the state public assistance	outcomes.			
programs to ensure that tax				

dollars are being used on	ly as				
they are intended.					
To recover improper pub		Percentage of	7%	7.7%	INVEST
assistance payments rece		dollars collected.			
by a household or provide	er.				
To examine and verify		Percentage of	100%	100%	INVEST
accounts and records of D	OHS	local DHS offices			
offices and to ensure		in compliance within 45 days.			
compliance with federal		Within 40 days.			
regulations.					
To examine and verify		Percentage of care	90%	90%	INVEST
accounts and records of		facilities in			
nursing facilities to ensur	e	compliance within			
compliance with Iowa lav	v and	60 days.			
regulations.					
Services, Products,	Pe	rformance Measures	Performance	Prior	Strategies/Recommended
Activities			Target	Year	Actions
				Actual	
1. Social & Charitable	Perce	entage of completed	99%	98%	Develop and implement an
Gambling Regulation,	socia	l and charitable			electronic web-based
Target Small Business	gaml	oling			registration system with
Certification	appli	cations/registrations			ability to accept credit card
Org #0Q75		d upon within 30			payments and with an
A. Process		ndar days including			integrated database.
application		sement devices.			, and the second
B. Make licensing					Note: System has been
decisions					implemented, now seeking
C. License quality					to promote usage of
applications					system.
D. Conduct complaint					System
investigations					FOOD
E. Audit records					1005
F. Take revocation					
action					
G. Make					
enforcement					
referrals	Dorce	entage of social and	80%	84%	Make requirements easily
		table gambling	00/0	04%	Make requirements easily understood and accessible
		nizations required to			
	_	•			to registrants to reduce
		n annual report that			noncompliance issues.
	1	olete the report for the			DIA madea.
	curre	ent fiscal year.			DIA makes numerous
					attempts to notify the
					organizations that a report
					must be filed.

				FOOD
2. Food and Consumer Safety Org # 0Q75 A. Application processing B. Inspections C. Complaint investigations D. Foodborne illness investigations E. Contract management F. Licensing decisions G. Enforcement actions	Food Establishment with an assessed risk level of 5 (very high) are inspected on time, once every 6 months.	88%	83%	Risk Level 5 on time completion % is a performance strategy in performance evaluations and performance plans. Supervisors send push notification to inspectors when inspection due dates are upcoming for risk level 5 food establishments. On time completion % is tracked with the USA Food Safety Dashboard tool.
	Number of performance reviews completed for local health departments contracting under lowa 137F to enforce the Food Code. There are a total of 13 contracts in state fiscal year with only 12 local health departments conducting inspections as a part of the contract.	3 reviews	4	Assign the responsibility to coordinate the completion of contract performance reviews to a position. (Contract Administrator) Fill Contract Administrator vacancy Completion of components of contract performance reviews is included as a performance strategy on performance evaluations and performance plans for multiple positions. FOOD
	Percent of on time completion of illness complaint inspections.	95%	100%	Complaint on time completion % is a performance strategy in performance evaluations and performance plans. Fill RRT Coordinator position RRT Coordinator works with supervisors to monitor

			inspection completion and
			contact inspection staff or
			send push notification to
			inspectors when inspection
			due dates are upcoming.
			due dates are apcoming.
			On time completion % can
			be tracked easily with the
			USA Food Safety Dashboard
			tool
			1001
			Complaint inspections are
			listed on the inspectors High
			Priority Inspections due list.
			, .p
			Work list in USA Food Safety
			identifies complaints that
			are past due.
			FOOD
Percent of on time	90%	99%	Complaint on time
completion of non-illness			completion % is a
complaint inspections.			performance strategy in
			performance evaluations
			and performance plans.
			,
			RRT Coordinator works with
			supervisors to monitor
			•
			due dates are apcoming.
			On time completion % can
			•
			23.11 334 Surety Dustiboutu
			tool
			tool
			tool Complaint inspections are
			Complaint inspections are
			Complaint inspections are listed on the inspectors High
			Complaint inspections are listed on the inspectors High
			Complaint inspections are listed on the inspectors High Priority Inspections due list.
			Complaint inspections are listed on the inspectors High Priority Inspections due list. Work list in USA Food Safety
			inspection completion and contact inspection staff or send push notification to inspectors when inspection due dates are upcoming. On time completion % can be tracked easily with the USA Food Safety Dashboard

1	T		I =
Percent of on time	85%	95%	Follow-up on time
completion of risk factor			completion % is a
violation follow-up			performance strategy in
inspections.			performance evaluations
			and performance plans.
			·
			Supervisors send push
			notification to inspectors
			when inspection due dates
			•
			are upcoming follow-up
			inspections.
			Follow-up inspections are
			listed on the inspectors High
			Priority Inspections due list.
			·
			On time completion % can
			be tracked easily with the
			USA Food Safety Dashboard
			tool.
			FOOD
Percent of food	20%	8%	Decrease application
applications processed			processing time from not to
within 24 days.			exceed 30 days to not to
			exceed 24 days.
			Increase online renewal
			usage
			Roll out online new
			applications
			applications
			Hire a summer intern
			increase application
			processing capacity
			Temporary clerk position
			hired as needed
			hired as needed FOOD
Percent of routine food	50%	41%	
	50%	41%	FOOD
Percent of routine food inspections completed.	50%	41%	FOOD Fill all vacancies
	50%	41%	FOOD Fill all vacancies Evaluate Complaint
	50%	41%	FOOD Fill all vacancies
	50%	41%	FOOD Fill all vacancies Evaluate Complaint response times
	50%	41%	FOOD Fill all vacancies Evaluate Complaint

	T			
				Supervisors will look for additional efficiencies
				Assess next Polk County vacancy ES position –
				Specialize in plan review,
				pre-opening inspection in
				Polk County and answer
				complex licensing
				questions
				FOOD
	Meet with Iowa Restaurant	2	2	
	Association and Iowa			FOOD
	Grocery Industry			
	Association			
	Supply Risk Factor Survey	2	0	
	to 1 grocery store brand			FOOD
	and one restaurant brand			
Services, Products,	Performance Measures	Performance	Prior	Strategies/Recommended
Activities		Target	Year	Actions
			Actual	
3. Regulatory oversight	The average number of	12 .9	21.4	Utilize updated database to
of state licensed and	months between Nursing			track and monitor survey
I = 1 - 1 - 1 - 1 - 1 - 1 - 1				_
federally certified long-	Facility surveys in			frequency.
term care and	comparison with the			
term care and habilitation entities	comparison with the federal timeframe			Utilize Aspen Enforcement
term care and habilitation entities Org #5301, 5501, 5601,	comparison with the			Utilize Aspen Enforcement Management (AEM) to
term care and habilitation entities Org #5301, 5501, 5601, 5701, 5801, 5901	comparison with the federal timeframe			Utilize Aspen Enforcement Management (AEM) to insure enforcement
term care and habilitation entities Org #5301, 5501, 5601, 5701, 5801, 5901 A. Application	comparison with the federal timeframe			Utilize Aspen Enforcement Management (AEM) to
term care and habilitation entities Org #5301, 5501, 5601, 5701, 5801, 5901 A. Application processing	comparison with the federal timeframe			Utilize Aspen Enforcement Management (AEM) to insure enforcement guidelines are met.
term care and habilitation entities Org #5301, 5501, 5601, 5701, 5801, 5901 A. Application processing B. Surveys	comparison with the federal timeframe			Utilize Aspen Enforcement Management (AEM) to insure enforcement guidelines are met. Secure additional training
term care and habilitation entities Org #5301, 5501, 5601, 5701, 5801, 5901 A. Application processing B. Surveys C. Complaint	comparison with the federal timeframe			Utilize Aspen Enforcement Management (AEM) to insure enforcement guidelines are met. Secure additional training from the Abuse
term care and habilitation entities Org #5301, 5501, 5601, 5701, 5801, 5901 A. Application processing B. Surveys C. Complaint investigations	comparison with the federal timeframe			Utilize Aspen Enforcement Management (AEM) to insure enforcement guidelines are met. Secure additional training from the Abuse Coordinating Unit to
term care and habilitation entities Org #5301, 5501, 5601, 5701, 5801, 5901 A. Application processing B. Surveys C. Complaint investigations D.	comparison with the federal timeframe			Utilize Aspen Enforcement Management (AEM) to insure enforcement guidelines are met. Secure additional training from the Abuse Coordinating Unit to improve efficiency of
term care and habilitation entities Org #5301, 5501, 5601, 5701, 5801, 5901 A. Application processing B. Surveys C. Complaint investigations D. Licensing/Certification	comparison with the federal timeframe			Utilize Aspen Enforcement Management (AEM) to insure enforcement guidelines are met. Secure additional training from the Abuse Coordinating Unit to improve efficiency of investigations and the
term care and habilitation entities Org #5301, 5501, 5601, 5701, 5801, 5901 A. Application processing B. Surveys C. Complaint investigations D. Licensing/Certification decisions	comparison with the federal timeframe			Utilize Aspen Enforcement Management (AEM) to insure enforcement guidelines are met. Secure additional training from the Abuse Coordinating Unit to improve efficiency of
term care and habilitation entities Org #5301, 5501, 5601, 5701, 5801, 5901 A. Application processing B. Surveys C. Complaint investigations D. Licensing/Certification	comparison with the federal timeframe			Utilize Aspen Enforcement Management (AEM) to insure enforcement guidelines are met. Secure additional training from the Abuse Coordinating Unit to improve efficiency of investigations and the quality of final memos.
term care and habilitation entities Org #5301, 5501, 5601, 5701, 5801, 5901 A. Application processing B. Surveys C. Complaint investigations D. Licensing/Certification decisions E. Enforcement	comparison with the federal timeframe			Utilize Aspen Enforcement Management (AEM) to insure enforcement guidelines are met. Secure additional training from the Abuse Coordinating Unit to improve efficiency of investigations and the quality of final memos. Utilize Program
term care and habilitation entities Org #5301, 5501, 5601, 5701, 5801, 5901 A. Application processing B. Surveys C. Complaint investigations D. Licensing/Certification decisions E. Enforcement	comparison with the federal timeframe			Utilize Aspen Enforcement Management (AEM) to insure enforcement guidelines are met. Secure additional training from the Abuse Coordinating Unit to improve efficiency of investigations and the quality of final memos. Utilize Program Coordinators to investigate
term care and habilitation entities Org #5301, 5501, 5601, 5701, 5801, 5901 A. Application processing B. Surveys C. Complaint investigations D. Licensing/Certification decisions E. Enforcement	comparison with the federal timeframe			Utilize Aspen Enforcement Management (AEM) to insure enforcement guidelines are met. Secure additional training from the Abuse Coordinating Unit to improve efficiency of investigations and the quality of final memos. Utilize Program Coordinators to investigate complaints and assist with
term care and habilitation entities Org #5301, 5501, 5601, 5701, 5801, 5901 A. Application processing B. Surveys C. Complaint investigations D. Licensing/Certification decisions E. Enforcement	comparison with the federal timeframe			Utilize Aspen Enforcement Management (AEM) to insure enforcement guidelines are met. Secure additional training from the Abuse Coordinating Unit to improve efficiency of investigations and the quality of final memos. Utilize Program Coordinators to investigate
term care and habilitation entities Org #5301, 5501, 5601, 5701, 5801, 5901 A. Application processing B. Surveys C. Complaint investigations D. Licensing/Certification decisions E. Enforcement	comparison with the federal timeframe			Utilize Aspen Enforcement Management (AEM) to insure enforcement guidelines are met. Secure additional training from the Abuse Coordinating Unit to improve efficiency of investigations and the quality of final memos. Utilize Program Coordinators to investigate complaints and assist with surveys when resource

	Average number of months between ICF/MR surveys.	12.9	18.7	Acquire and train qualified surveyors to secure and sustain a 100% survey frequency within 12.5 months. HFD
	Percentage of nursing home immediate jeopardy complaint investigations initiated within required timeframes.	95%	96%	Secure additional training from the Abuse Coordinating Unit to improve efficiency of investigations and the quality of final memos.
				Utilize Program Coordinators to investigate complaints and assist with surveys when resource issues arise. HFD
4. Monitor and regulation of state certified community based environments Org #5101 A. Application processing B. Monitoring évaluations C. Complaint investigations D. Certification	Percentage of assisted living program re- certifications completed at least 10 days prior to certification expiration date.	50%	33%	Ensure consistency and efficiency in dealing with corporately owned programs that cross Department prescribed geographical regions. Continue to triage DAA/complaints first, recertification visits second and certification visits last with limited resources.
decisions E. Renforcement actions				HFD

Services, Products, Activities	Performance Measures	Performance Target	Prior Year Actual	Strategies/Recommended Actions
	Percentage of immediate jeopardy complaint investigations initiated within 2 days.	99%	94%	Input resolution of Adult Services Bureau complaints into the Health Facilities Division database. Retention of all ASB staff at 100%. Utilize Program Coordinators to investigate complaints and assist with monitoring when resource issues arise. HFD
5. Investigations	Percentage of pre-	90%	96%	Monitor trends in the
Services Org #4101, 4201, 4601, 4901 A. Economic Fraud B. Medicaid Fraud C. Professional Standards	eligibility investigations completed within 10 working days.			Electronic Case Management system to improve investigative efficiency. INVEST
	Cost avoidance dollars identified by DHS resulting from Economic Fraud investigations.	\$3 million	\$2,786,989	Cost voidance methodology changed during FY17. DHS is now auto calculating on behalf of DIA as the result of a 2015 Kaizen event. Continue to monitor cost avoidance calculation and seek standard methodology from FNS.
	Number of food assistance EBT cases referred by the public and other state and federal agencies for suspected fraud	400	352	Educate the public and other state and federal agencies about intentional misrepresentation, concealment or withholding of information in order to get any, or increased, food stamp benefits. INVEST
	Percentage of Medicaid provider fraud referrals received that are reviewed and assigned	100%	98%	Review and update case protocols, as necessary, and include in policies and procedures. INVEST

	or declined within	1	1	1
	required timeframes.			
	Number of dependent	50	14	Continue collaboration with
	adult abuse/neglect			DHS IME and MCO's as well as
	and Medicaid provider			the ACU to deliver health care
	fraud investigations			facilities investigation
	referred for criminal			materials directly to county
	prosecution.			attorney for prosecution
				decision. Educate &
				coordinate with local law
				enforcement, county
				attorneys, licensing boards,
				SURS, and other entities on
				DAA law.
				INVEST
Comices Duadwate	Doufousson of Managemen	Performance	Duian Vaan	
Services, Products,	Performance Measures		Prior Year	Strategies/Recommended Actions
Activities		Target	Actual	11000000
	Amount of cost savings	\$200,000	\$159,733	Outreach, educate, and
	resulting from EBT			coordinate efforts with other
	Investigations as a			state and federal agencies to
	result of claims			identify misuse of food
	established and IPV			assistance benefits.
	sanctions.			INVEST
	Number of completed	100	75	Continue to monitor rule
	Intentional Program			changes through Food and
	Violations (IPVs)			Nutrition Service (FNS)
	related to EBT.			INVEST
6. Collection	Dollars recovered from	\$2.5 million	\$3,356,506	Improve current collection
Services	improper public			efforts to include - accept
Org # 4701, 4901	assistance, resulting			online and credit card
	from client error, fraud,			payments, employ better
	or agency error, per			technology to increase the
	year compared to the			amount of moneys collected.
	dollars recovered the			INVEST
				INVEST
	previous year.	4222 222	6227.004	0 1 2040 1
	Dollars collected under	\$300,000	\$337,981	On January 1, 2019, the
	the Divestiture			enforcement of 249F was
	Program.			terminated.
				INVEST
7. Audit Services	Average number of	35	3	Continue to coordinate with
	months between audits			DHS IME and the MCOs to
	for care facilities.			improve current efforts and
				continually seek ways and
				means of increasing the
				number of audits conducted

Org# 4501, 4901 A. DHS offices B. Health care facilities	mo fac	e of collection for neys owed to care ility residents.	99.			100%	and decreasing the amount of money collected. INVEST Maintain current collection rate and seek to raise percentage to 100%. INVEST Maintain current collection
		neys owed to the					rate.
	hou	te. erage number of urs spent on-site diting per facility.	35	hours		33	Collaborate with the Iowa Medicaid Enterprise to streamline facility history profile reports used in the conduct of the audit. INVEST
Core Function		Performance Measu	ıre	Performa	nce	Prior	Link to Strategic Plan Goal(s)
		(Outcome)		Target		Year Actual	
CF: Resource Management Org# 0101, 0199, 210 2201, A. Claims Processin B. Budget C. Inventory D. Financial Management E. Public Informati F. Personnel G. Government Relations H. Indian Gaming I. Purchasing J. Vehicle Coordination K. Communication Coordination L. Grant Managemen M. Enterprise Management	on	Percent of federal and state financial report completed and submitted by due da	:s	95%		97%	Develop a schedule of reports with due dates and provide to pertinent staff. A complete inventory of hardware and software will be completed and an IT Investment Lifecycle program developed, which will assure that the latest technology is made available to staff. ADMIN

N. Information Technology O. Space Management				
	Percent of media and public information inquiries responded to within 2 business days.	80%	76%	Maintain current and accurate information on the website. Identify opportunities for divisions and attached units at public events to share departmental information. ADMIN
	Employee retention rate (non-retiree permanent employees).	97%	89%	Periodic discussions/evaluations during employment to identify and address any workplace performance or satisfaction issues. ADMIN
	Number of audit findings from the State Auditor's audit report.	0	0	Continue to evaluate financial processes to ensure proper controls are in place. ADMIN

RESOURCE REALLOCATION

During FY22, the Department continued to address the challenge of limited human and financial resources.

An evaluation of the responsibilities of the department was conducted on an ongoing basis during the fiscal year. In some cases, staff were reassigned or programs restructured to best utilize the skills necessary to accomplish the mission of the Department. The Department continues to maximize state and federal resources to accomplish our mission.

AGENCY CONTACTS

Copies of the Iowa Department of Inspections and Appeals' Agency Performance Report are available on the Results Iowa web site (www.resultsiowa.org) and the DIA web site (https://dia.iowa.gov/).

Copies of the report can also be obtained by contacting Sara Throener at 515-281-5457 or via e-mail at sara.throener@dia.iowa.gov.

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