

# Iowa Veterans Home FY2022

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## **Our Mission:**

**To provide a continuum of care to Iowa's Veterans and their spouses in an environment focusing on individualized services to enhance their quality of life.**

## **Our Vision:**

**To provide a continuum of care to Iowa's Veterans and their spouses in an environment focusing on individualized services to enhance their quality of life.**

## **Our Core Values:**

**Service, Honor, Integrity, Passion.**

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**ANNUAL REPORT**



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## Serving Iowa Veterans Since 1887

### A Message from the Licensed Nursing Home Administrator/ Interim Commandant



During 2022 the Iowa Veterans Home has continued to meet its mission of providing a continuum of care for our state's heroes. We focus on commitment to individualize the care for each resident's highest quality of life.

The regulatory challenges brought on by the pandemic are coming to an end, leaving us grateful as well as prepared for the next chapter. The masks are replaced with smiles as we return to a busy, vibrant, lifestyle that our residents are accustomed to. We are proud to share that we have maintained our 5-star rating from CMS throughout the pandemic, due to the commitment and creativity of the IVH team.

The primary challenges for the Iowa Veterans Home continue to include; admissions, recruitment and retention. We are at 88.6% capacity for residents and we are seeing an increase in the number of applications. We are, however, aware that the admissions are presenting with increased comorbidities and often are in need of memory care. As the services improve for veterans with home care, we continue to evaluate the services required to meet the Long-Term Care needs for our state's veterans. We also have experienced the challenges related to the national nursing shortage, and the competitive market that has come with this.

We have partnered with the Department of Administrative Services to develop innovative scheduling, advanced pay for weekend package positions, sign on bonuses, and on campus housing for employees working condensed schedules and more. The challenges have been arduous at times, but we are proud of never losing sight of our mission as our care delivery is unmatched.

The leadership team remains dedicated to professional growth and cultivating a spirit of pride. The challenges were immense in the long-term care industry throughout the pandemic but the Infection Control Team at the Iowa Veterans Home networked with the IDPH, as well as National partners to share the resident's perspective in long term care setting related to COVID 19, and presented a pathway for reducing regulatory requirements for this population. Our cuddle curtains that allowed our first hugs have been put away. We are no longer eating in our doorways so we can at least see our friends. We are no longer screening every resident and every staff person every day for symptoms. We are no longer cohorting residents by unit. We are no longer mass testing. We are no longer having medical appointments only by telehealth. We have opened the chapel, opened the arts and crafts room, opened the Atha Dining Room, opened the library and the gift shop, celebrated Halloween with children, opened the door to all visitors and families, and wore bright red lipstick to celebrate seeing each other's faces for the first time in over two and a half years. We stand proud and we are ready for our next chapter.

*Penny Cutler-Bermudez, LNHA*

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## A Message from the Operations Executive Administrator



At the Iowa Veterans Home, we strive for excellence in everything we do. The Operations Division experienced a change in leadership during the last year. Nathan Wilson replaced Karen Connell after her retirement in late December. This change came at a time where COVID restrictions were easing and many projects and improvements were able to move forward. The Operations Division provides support for IT, pharmacy, facility operations, and financial activities to IVH. The Veterans Affairs Bureau was also added through the course of the year. The Operations Division staff have been instrumental in continuous improvement across all of IVH.

*Nathan Wilson, Operations Executive Administrator*



## A Message from the Medical Director



The Iowa Veterans Home is one of the largest state veterans' homes in the nation. Our facility began serving Iowa veterans in 1887, and later, spouses of veterans were also granted access to the services of IVH.

The past two years have been challenging to all healthcare facilities, including IVH. The COVID virus impacted the health of our veterans and of our staff. Because of the large size of our facility in terms of residents and staff, the Iowa Veterans Home was the harbinger of the pandemic in Iowa in which we experienced the effects of the virus before other organizations in

the State. As the virus mutated, we were required to change our response, sometimes on short notice as mandated by CMS and the CDC. Our high performing multidisciplinary COVID-19 Preparedness Team met on a daily basis to monitor and adjust our response to the ever changing COVID environment. I am proud of the engaged team of professionals for their great work at mitigating virus deaths and hospitalizations here at IVH compared to other facilities in Iowa and across the Nation. One key was our great relationship with the Iowa Department of Health (now IDHHS) as well as the Department of Inspections and Appeals to collaborate to assist IVH in adhering to the guidelines and regulations from CMS and the CDC. We were humbled to receive kudos from these other State agencies for our work.

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As was the case in all healthcare organizations, the COVID pandemic dramatically affected our workforce. Individuals who were ill or in isolation decreased the number of staff members to do the daily work. This put pressure on the remaining staff to work more hours, primarily affecting nursing and our food service workers. A 24/7 facility does not have the luxury of closing down. Moreover, some staff members quit our workforce because of the burden they felt was placed upon them, some never to return to their profession. We have all seen this happening across the United States and the world. We are all well aware that 11 nursing homes in Iowa closed down permanently because of staffing shortages.

Yet, despite the issues with COVID and staffing, the Iowa Veterans Home continues to maintain our solid 5-Star rating (the highest rating possible) from CMS which looks at Quality and Safety metrics. Of the approximately 400 plus nursing homes in the State, only 43 have a 5-Star rating from CMS. Our entire staff is proud of this hard-earned ranking.

Fortunately, because of my Infectious Disease background, I was in the right spot at the right time for this infectious disease crisis. I have been spending a significant part of time dealing with the pandemic. However, in the midst of the pandemic, IVH implemented a new Quality Department to monitor and improve quality and safety with a full time Quality Director. Quality and Safety initiatives were the reason I was drawn to the Medical Director position here at IVH having spent years in the acute care setting working on these very things! The federal government requires all healthcare organizations to improve their quality programs and we have been told by outside surveyors our program is ahead of the curve.

Iowa Veterans Home is blessed to have a dedicated staff whose primary goal is to provide the best and most compassionate care and services to our Veterans and their spouses. This care is going on across the entire facility, 24 hours a day, 7 days a week. As permitted by federal guidelines, we have been removing restrictions and opening up the facility for our residents, staff, and visitors.

As I stated last year, I continue to be honored to serve as IVH Medical Director. When I took this position, I was excited to join the great dedicated team of people providing care to our veterans and spouses, either directly such as nursing, physical therapists, dietitians, and others, but also all the dedicated staff behind the scenes keeping the place running. My excitement and dedication to this facility remains.

*Dr. Joseph E. Hoagbin, MD*

## **Our Values**

**Service:** commitment to listening, understanding and providing the outcomes desired by those we serve.

**Honor:** showing universal respect, acknowledging achievements and fulfilling obligations and agreements.

**Integrity:** adhering to moral and ethical principles by doing the right thing in a reliable way.

**Passion:** powerful, compelling desire to deliver the highest quality work with enthusiasm.



# Strategic Planning



## Goal 1: Improve Resident Experience

Strategy A: Complete an analysis (Quality of Life survey) that reflects the current needs for our residents to ensure satisfaction with services.

Strategy B: Increase admissions through an active and targeted recruitment/marketing effort.

Strategy C: Demonstrate commitment to assisting residents with meeting needs in a safe and resident-centered environment.

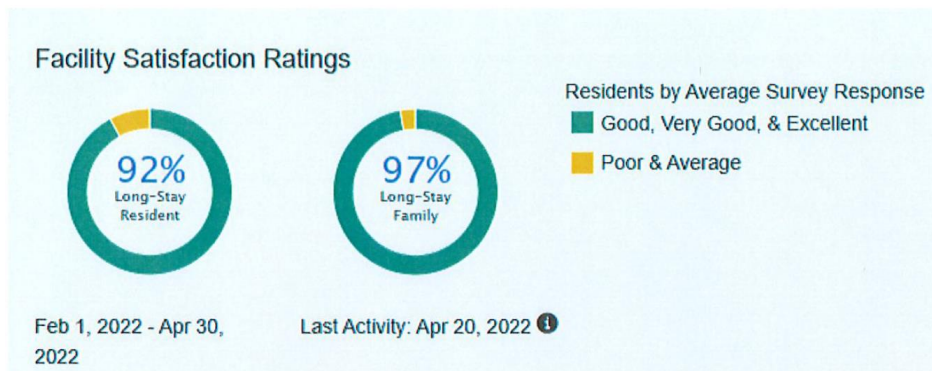
## Annual Quality of Life Survey

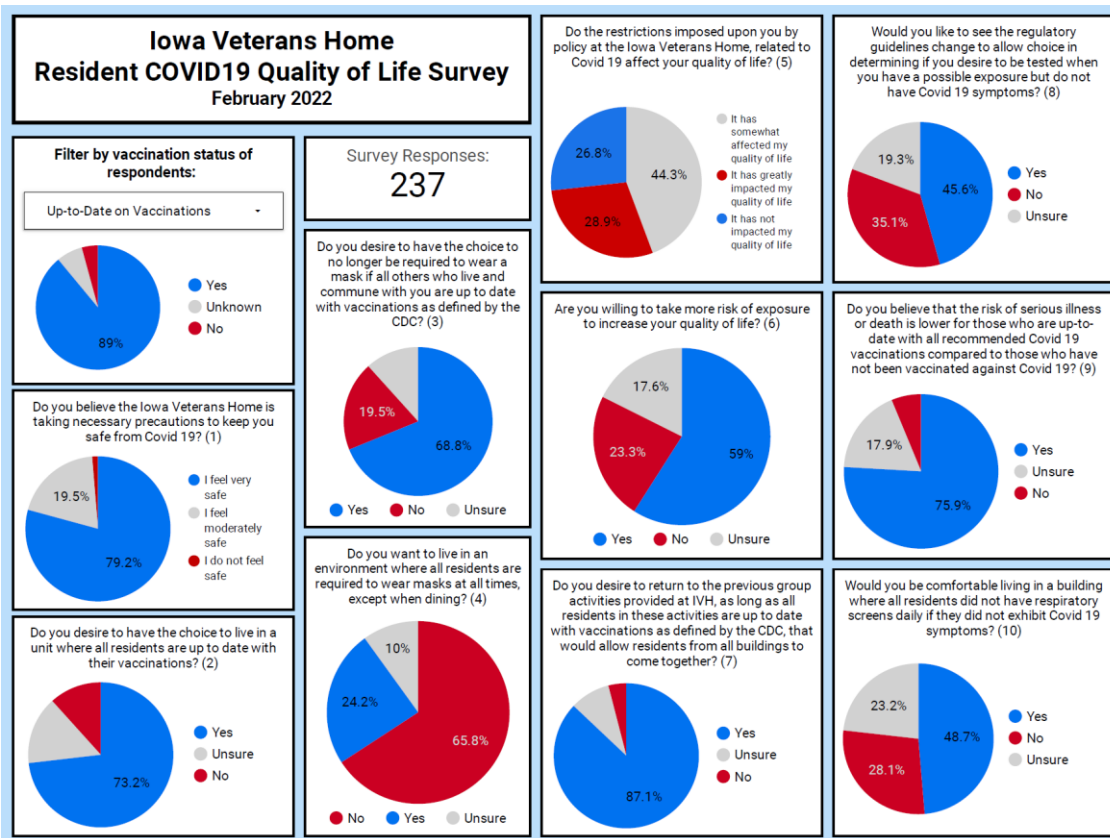
Our residents reported a 92% positive response rate.

Our families reported a 97% positive response rate.

Resident surveys- 307 residents participated in the survey.

Family surveys- 148 families participated in the survey (349 mailed out).





Residents and families were also provided with a COVID 19 Quality of Life Survey. Results of the survey were posted on each unit for the residents to see, discussed at the Resident Council Meeting on March 10 and shared with families in an email. Results of the survey were shared in a Dashboard format with representatives from IDPH, DIA and the VA to advocate for the resident and families of IVH.



### Care Compare Five-Star Ratings of Nursing Homes Provider Rating Report for July 2022

Ratings for Iowa Veterans Home (16A002) Marshalltown, Iowa			
Overall Quality	Health Inspection	Quality Measures	Staffing
★★★★★	★★★★	★★★★★	★★★★★

IVH maintained a Five-Star Rating in FY2022!!

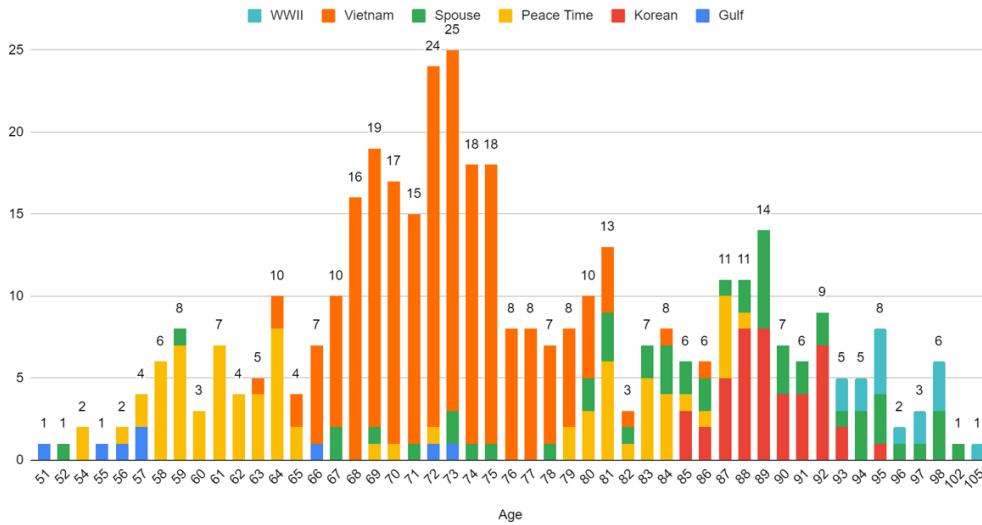
## Admissions

An Admissions Work Group was formed to promote an active and targeted recruitment/ marketing effort for IVH. This included a Marketing, Relations, Data Analysis and Road Crew team which collaborated together to look at resident demographics and how best to highlight our specialized services, unique opportunities, and eligibility requirements.

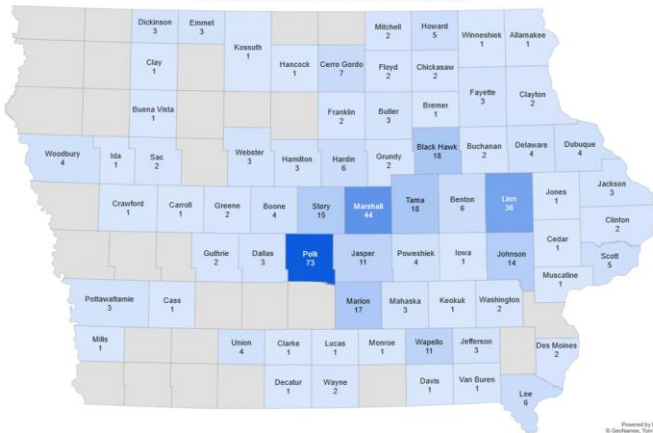
This information gathered is used when presenting to VA groups and various IVH tours.

The average nursing home census in FY2022 was 350. Currently licensed for 386 beds. The average number of beds filled at the domiciliary level was 50.

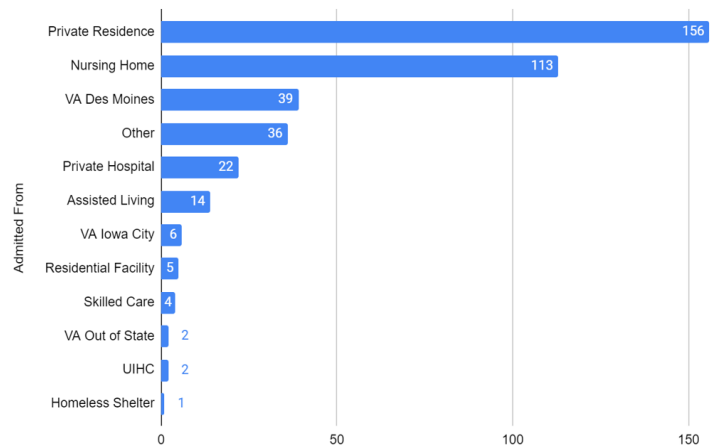
**Current Residents by Age and War**



**Counties of Admission for Current Residents**



**Current Residents by Residence Prior to Admission**



## Nursing

### FY2022 Highlights:

- ✓ Performance Improvement Plan (PIP) in place to address falls

Agency Performance Measures FY 2022- Nursing			
Performance Measure	Target	Results	Internal Strategies/Considerations
Percent of residents experiencing 1 or more falls with major injuries	3.5%	1.46%	Utilize root cause analysis to identify why fall occurred to aid in resident centered prevention strategies/interventions.
Rate of medication administration errors per every 10,000 doses	1.1	2.4	Education to certified medication aides or licensed staff following any error. Medication error trends addressed at monthly quality improvement (QAPI) meetings.

- ✓ Deprescribing Medications quality initiative began in Ulery in September 2021 in collaboration with Pharmacy, PCPs and Quality department

## Infection Control

### Highlights:

- ✓ Daily COVID update emails sent to families throughout the fiscal year
- ✓ Hand Hygiene audits are being performed monthly by nursing staff, clinical dietitians during unit meals and by Food Service
- ✓ Antibiotic Stewardship activities are included in monthly Quality Assurance Performance Improvement (QAPI) meetings
- ✓ Annual Risk Assessment completed
- ✓ Annual Flu Shots offered to residents and staff
- ✓ Annual Infection Control education provided to all staff on the LMS
- ✓ Infection Control policies/procedures reviewed and updated

Agency Performance Measures FY 2022- Infection Control			
Performance Measure	Target	Results	Internal Strategies/Considerations
Percent of residents participating in the annual flu vaccination program	90%	91.8%	Resident/Family education on benefits of participation in vaccination program.



## Medical Clinic

### Highlights:

- ✓ Working on a bid for Dermatology, Orthopedics and Chiropractic Care
- ✓ VA Telehealth is working on expanding services to include Audiology and Teleretinal visits

Agency Performance Measures FY 2022- Medical Clinic			
Performance Measure	Target	Results	Internal Strategies/Considerations
Percent completion of Primary Care Provider required regulatory visits within the directed timeframe	95%	99.8%	Perform quarterly audits on completion of PCP regulatory visits for each unit.
Percentage of IVH residents whose dental needs are able to be met by IVH.	99%	90%	Residents will be seen annually in the dental clinic.

## Food Service



### Highlights:

- ✓ Disaster plan for food & water for residents (and staff) has been reviewed and updated. The plan is comprehensive and addresses various situations:
  - Water boil advisory
  - Limited staffing, 3-day meal plan with shelf stable foods
  - New emergency “Blue Water” with 50-year shelf life
- ✓ COVID 19 restrictions limited dining services, so the Food Service team identified ways to be creative with the dining experience:
  - Desserts prepared in the bakery monthly & distributed to residents
  - Resident Food Committee meetings resumed in October for residents to be able to have a voice in the food they are served
  - Cafeteria-style service in the Atha dining room reopened for the first time since March 2020. Hours of operation throughout the year were adjusted per COVID 19 guidelines and Food Service staffing
  - Training on Point Click Care began for clinical dietitians and food service management in April

- Food Service staff transitioned to Nutrition Management for planning, production and delivery of resident meals/snacks in June
- Implementation of the International Dysphagia Diet Standardisation Initiation (IDDS), guidelines for serving modified textured diets
- A partnership between the Iowa Correctional Institution for Women (ICIW) and IVH’s Food Service Department was finalized in June. Tasks include food production, service, sanitation.

**Recreation**

With the restrictions of COVID lessening, Recreation has been able to implement group activities while taking the appropriate precautions to keep residents and staff safe.

**Highlights:**

- ✓ Able to do group activities in common spaces with residents having the ability to socialize with other residents from different living areas. Activities include socials, special meals, trivia, games, reminiscing, outdoor activities (music/entertainers, games, gardening, picnics)
- ✓ Classes in Activity Centers started again: arts and crafts and ceramics
- ✓ Members of Iowa’s Off Highway Vehicle riders came and gave residents rides in their vehicles on IVH grounds
- ✓ Volunteer groups were able to return to host special activities, e.g. Spring Carnival, Fish Fry/Pork Roast, and everyone’s favorite- BINGO!
- ✓ Resident Council returned to having in-person meetings
- ✓ Numerous risk assessments completed by Recreation to ensure staff are diligent with COVID protocols to keep residents safe with activities

**Agency Performance Measures  
FY 2022- Recreation**

Performance Measure	Target	Results	Internal Strategies/Considerations
Percentage of residents that are satisfied with the current number of organized activities provided.	85%	87%	Resident Quality of Life annual survey. Work with resident groups and individual resident interviews to identify personal preferences for activities offered.



Resident satisfaction has greatly improved with the ability to implement many trips within the community such as: shopping, casino, fishing, out to eat in private party rooms, bus rides, museum tours, community festivals, parades, Vietnam Veterans recognition at the Iowa State Capitol and Iowa Cubs baseball games.



## Pharmacy

### Highlights:

- ✓ Total number of orders processed = 98,181
  - ✓ Total number of med errors that got to the unit = 29
- Overall total error rate = 0.03%
- ✓ Plans in place for new automated dispensing machines to decrease dispensing errors, anticipated Spring 2023

Agency Performance Measures FY 2022- Pharmacy			
Performance Measure	Target	Results	Internal Strategies/Considerations
Rate of medication dispensing errors within the IVH pharmacy	0.1%	.03%	Pharmacy staff will ensure through a series of checks that only appropriate medications are provided to residents. Pharmacy presents the errors to the responsible individuals to increase awareness of the types of medication errors that are not caught as well as assess if the error was caused by human error or process failure. Process errors are reviewed by the team.

## Goal 2: Increase Efficiency

Strategy A: Identify and plan for the future by identifying the need for upgrading resources to optimize operations.

Strategy B: Implement value-added information technology systems; improve and integrate the functionality of current software.

Strategy C: Ensure the security, reliability and accuracy of IVH systems and technology.

## Information Technology

### Highlights:

- ✓ Transition to a new electronic medical records system, Point Click Care, began in June
- ✓ Additional security added to IVH wireless network
- ✓ Increased bandwidth for staff and residents
- ✓ Transitioned to Workday from HRIS

## Finance

### Highlights:

- ✓ Deficiency-free finance audit from the state auditor in September 2022 for FY22

## Agency Performance Measures FY 2022- Finance

Performance Measure	Target	Results	Internal Strategies/Considerations
# of Reportable Financial Deficiencies/Regulatory Agencies	0	0	IVH maintains a system of internal controls that is supported by best practices that includes duties, safeguarding of assets, safeguarding confidential information, review and approval for internal processes, timeliness for meeting financial deadlines, and supporting documents for all transactions.

## Facilities Management

### Highlights:

- ✓ Nurse Call System: The nurse call system project is underway. This 2.5-million-dollar project will improve the response time to our nursing staff when our residents need assistance. The existing nurse call system parts are being phased out so it was essential to replace the system. This project will consist of replacing all physical devices in the resident rooms and the public use restrooms. Benefits include:
  - When a call comes in, a wearable device called Vocera will receive a voice notification when the physical device is activated.
  - Voice activated hands-free technology for direct communication to a base telephone or a cellular phone.



- ✓ Pharmaceutical Distribution System: Loftus 2nd floor renovation is 75% complete. Respiratory Therapy and Central Supply have been relocated to Loftus 2nd floor to provide their services to our residents in a secure hygienic atmosphere.



- ✓ Renovation of the baseball field: The community and leaders of IVH wanted to improve our baseball field so residents would be able to enjoy America's favorite pastime. The outpouring of support from the community was at no cost to IVH because it was donated labor time, material and money.



- The field was stripped of uneven grass and leveled out
- Trees were placed outside the fence in the outfield
- New concrete was laid down
- Siding was placed on the concession stands
- New flagpole, out of bounds poles and many other updates



**Quaker Oats of Cedar Rapids graciously spearheaded renovation of the IVH ball field. First Little League Baseball game was held Sept 17, 2022.**



## Agency Performance Measures FY 2022- Facilities Management

Performance Measure	Target	Results	Internal Strategies/Considerations
Percentage of maintenance work orders that are completed within three days	88%	94.6%	Track maintenance work order completion.
Percentage of resident travel to external medical appointments arranged and met by IVH transport services	95%	99%	Maintain communication between the living units and the dispatch office.
Percentage of resident satisfaction with IVH housekeeping services	97%	84%	Resident <b>Quality of Life</b> annual survey. Monthly inspections of resident care areas, offices and custodial service support equipment.

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## Goal 3: Improve Employee Knowledge & Engagement

Strategy A: Provide staff advancement and growth opportunities both personally and professionally

Strategy B: Expand work-based learning opportunities for employees.

Strategy C: All service lines and departments will be engaged in Quality Assurance Performance Improvement (QAPI) to make decisions and drive improvements and use measurements to determine if improvement efforts were successful.

Strategy D: Develop leaders by recognizing and fostering the growth of individuals' skills, strengths and talents.

### Staff Advancement and Growth- Human Resources

#### Highlights:

- ✓ HR has provided leadership trainings on FMLA, Reasonable Accommodations, Performance Evaluations, and Investigations. Training was also provided to staff regarding the upgrade in UKG and the Workday system.
- ✓ During the COVID pandemic HR provided on-the-job training to those wishing to be CNAs.
- ✓ IVH has had 81 promotions from July 2021 until June 2022.

### Quality

#### FY2022 Highlights:

- ✓ Revised the Quality Assurance and Performance (QAPI) Plan for 2022 which provides a framework for making quality decisions to support the Iowa Veterans Home mission and strategic goals. This plan utilizes facility data to identify areas to improve, investigate causes of issues identified, trend adverse events, and evaluate performance improvement activities. All facility staff and residents are encouraged

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to be involved in identifying opportunities for improvement, partake in performance improvement teams, and provide ongoing feedback.

- ✓ The QAA Committee consists of our 10 senior team members, infection preventionist, and compliance officers that meet quarterly to coordinate and evaluate the activities of the program.
- ✓ The QAPI Steering Committee consists of 36 interdisciplinary team members that meet monthly; all departments at the Iowa Veterans Home are represented. The Steering Committee reviews findings and concerns and prioritizes activities.
- ✓ Education on the IVH QAPI Program provided to all staff on the LMS
- ✓ abaqis Management Software utilized by Quality to complete our Facility Assessment and Resident & Family Satisfaction/Quality of Life Surveys
- ✓ IVH was invited to showcase our QAA/QAPI activities at a Telligen LTC Spotlight virtual event held on Jan 26 for four states (CO, IA, IL and OK)



## Education Department

### Highlights:

- ✓ New Employee Orientation (NEO) provided to a total of 200 employees (1:1) and in-person NEO (restarted in April) provided to 42 employees
- ✓ Assure all trainings are of high quality, in terms of both presentation and content.
- ✓ Created procedures for materials submission, updated forms, educated staff on creating learning objectives.
- ✓ Created folders for training tools on the shared computer drive for all staff to access.
- ✓ Conducted quarterly Interdisciplinary Training Needs meetings to elicit input from staff throughout the facility as to training needs and desires



- ✓ Goal of providing 40 classes between January 1, 2021 and December 31, 2021 was exceeded; 95 classes were provided within this time frame
- ✓ IVH Education provided over 27 hours of nursing-related training to licensed nursing staff and 14 hours to Resident Treatment Workers
- ✓ Six hours of Chronic Confusion and Dementing Illness (CCI) training was provided to all staff working in dementia-care units
- ✓ Residential Treatment Workers (RTWs) were provided over 14 hours of training
- ✓ Video services provided this fiscal year:
  - Commandant C4 Response Videos were initiated 2x/month
  - Commemorative 9/11 video was produced
  - In-person MDS training for the interdisciplinary teams was taped for those not present (8-hour training)
- ✓ Completed Iowa Board of Nursing (IBON) Providership Renewal paperwork which is required every 5 years
- ✓ The following action plan is in place for performance improvement:
  - All mandatory training will be scheduled prior to April to allow for adequate completion time by the end of the fiscal year

## Agency Performance Measures FY 2022- Education

Performance Measure	Target	Results	Internal Strategies/Considerations
Percentage of IVH employees attending annual education	99%	91%	Send supervisors notice of evaluations due. Performance Goals will be set for each employee to promote growth. Quarterly audit results will be communicated to leadership team.

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## Goal 4: Increase Employee Retention

Strategy A: Provide a healthy workplace that supports needs and workplace relationships.

Strategy B: Provide timely performance evaluations to show appreciation for employee accomplishments and deliver compensation increases on time.

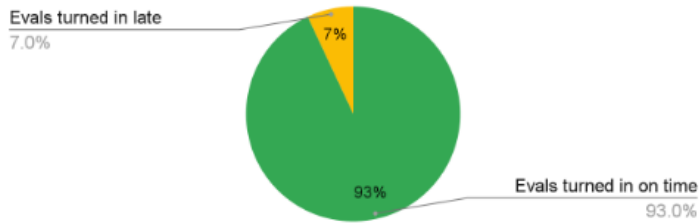
### Increase Employee Retention- Human Resources

#### Highlights:

- ✓ IVH set up quarterly CMA payments in September of 2021 to assist with retaining employees with the CMA certification
- ✓ IVH set up employee referral program to incentivize employees to refer applicants that are CNAs or CMAs
- ✓ Blanket AARs were established for new hires and increased rate of pay for those individuals working as Resident Aides, Resident Treatment Workers, LPNs, and RNs
- ✓ As a performance improvement measure, HR started tracking and trending evaluations. IVH Leadership has been focusing our attention on the need to complete timely employee performance evaluations. Our expectations for timely evaluations are now more stringent- all signatures must be completed on the evaluation by the end of the month in order to count as a timely eval. The following action plans are in place:
  - Reminder to supervisor of upcoming evaluations due
  - Education by HR Director provided to Supervisors on Performance Evaluations
  - Monthly results of performance evaluations completed timely is reported at QAPI and Synergy meetings

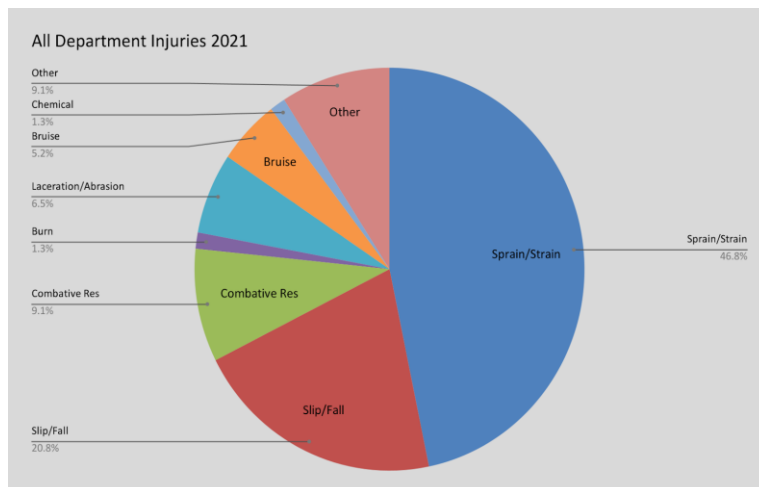


### June 2022 Performance Evaluations



✓ As a performance improvement measure, Employee Health is tracking employee injuries and sharing results with the QAPI committee with the goal of reducing preventable musculoskeletal injuries by 10%. The following action plans are in place:

- Identification (by department) of what types of injuries are occurring
- Targeted body mechanics education developed with staff input
- Targeted interventions in food service to reduce risk of burns



### Agency Performance Measures FY 2022- HR

Performance Measure	Target	Results	Internal Strategies/Considerations
Percentage of employee performance evaluations completed in a timely manner on an annual basis	99%	56%	Send supervisors notice of evaluations due. Timeliness of performance evaluations are now tracked and addressed at quality improvement (QAPI) meetings.
Rate of lost work days due to injury on the job	3.5	7.2	Educate staff about injury reduction and safe working practices.

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## Goal 5: Recruit Employees/Volunteers

Strategy A: Offer incentives for seeking employment at IVH.

Strategy B: Develop community partnerships to promote IVH.

Strategy C: Evaluate the hiring process and develop new avenues for recruitment.

Strategy D: Advocate for nontraditional backgrounds.

Strategy E: Provide childcare at IVH free of charge to the children of IVH staff aged 5 and younger.

### Recruit Employees/Volunteers- Human Resources & Volunteer Services

#### Highlights:

- ✓ IVH participated in the Lean initiative held with the Department of Management to streamline the hiring process and develop a quicker way to hire new employees.
- ✓ IVH took a lead setting up open interviews and working with DAS to refer applicants the day of their interview.
- ✓ HR established incentives and recruitment payments for Food Service workers, Resident Treatment Workers, CNAs, LPNs, RNs, Nurse supervisors, Nurse Clinicians, and individuals working weekend packages.
- ✓ Community Partnership developed with Vocational Rehab
- ✓ HR attended a Reverse Job Fair with Voc Rehab and IowaWorks.
- ✓ Open interviews stationed at IowaWorks Marshalltown location.
- ✓ Recruitment efforts are ongoing to recruit employees, including high school and community college career fairs.
- ✓ Partnership established with DOC Mitchellville to reduce mandates and assist with the workforce in the Food Service Department.
- ✓ Teacher externship held at IVH on July 13 which included 1 ½ hour tours of IVH.



### Farewell to Heinz Hall

Heinz Hall Recognition Ceremony held June 1st. Heinz Hall was constructed in 1896 and was called the “Old Peoples Building.” In 1923 the north end was added. Residents were relocated to the Amos Fox building in May. Heinz Hall is now vacant and future plans being developed to utilize this space.

## Memorial Day- May 30, 2022



*Thank you for your support!*