



Department of Health & Human Services, Centers for Medicare & Medicaid Services

Tribal Nursing Home Best Practices

Trauma and Person-Centered Care



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Introduction

Across Indian Country, nursing homes owned by tribes and by American Indian and Alaska Native (AI/AN) organizations offer culturally appropriate settings where elders receive 24-hour care. Tribal nursing homes seek to accommodate individual lifeways and preferences to ensure that elders can age with comfort and dignity in their communities.

Understanding how trauma has affected a resident's life is an important consideration in tailoring care to the individual. Exposure to traumatic events can have harmful, long-lasting impacts on a person's wellbeing. Trauma-informed care (TIC) is an approach to care that acknowledges the impacts of trauma on a patient's health and helps to improve care for patients with complex care needs that result from trauma.

Because TIC is an emerging care model, many tribal nursing homes may not have formal TIC frameworks in place. However, many of them apply a patient-centered approach to care that acknowledges the role of trauma in an elder's care needs. Person-centered care involves learning about, acknowledging, and honoring individual lifeways and preferences. This report briefly explores the trauma-informed care model and then provides an overview of how three tribal nursing homes approach care for residents who have experienced trauma.

What Is Trauma-Informed Care?

The Substance Abuse and Mental Health Services Administration defines trauma as effects that result "from an event, series of events, or set of circumstances a person experiences as physically or emotionally harmful or life-threatening" that have "lasting, adverse effects" on the person's wellbeing.ⁱ Research shows that people who experience trauma, especially during childhood, are more likely to have chronic disease and behavioral health issues. They are also at higher risk for the leading causes of illness, death, and disability among adults in the United States.ⁱⁱ

In AI/AN communities, many people deal with historical trauma that began with forced relocation, removal, and assimilation policies and continued with the geographic isolation and barriers to resources that these policies created. For example, because of assimilation policies, many of today's AI/AN elders attended boarding schools, where they were prohibited from speaking their language or practicing their cultures.

These circumstances, in addition to other traumatic events that a person may experience in their lifetime, such as witnessing or experiencing violence, create complex layers of trauma for many AI/AN elders. Depression is common among people who have experienced trauma, and it can affect an elder's motivation to live. Those dealing with trauma may also experience homelessness, social isolation, substance use disorders, or other barriers to engaging effectively with their health care, which can result in poor health outcomes. Further, elders may have experienced recent trauma from elder abuse, which can include neglect, physical or sexual violence, or financial exploitation by a loved one or caregiver.

Trauma-informed care is a framework for understanding the role trauma plays in a person's overall wellbeing and helps care providers adjust their strategies accordingly. This approach

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acknowledges the far-reaching effects of trauma and the potential for recovery by integrating sensitivity, cultural humility, and best practices into care. Trauma-informed care in long-term care settings acknowledges and respects elders' life experiences, helps them feel safe, and empowers them to make their own care decisions. For these reasons, trauma-informed care is an appropriate strategy for providing person-centered care and addressing the health and economic disparities AI/AN elders face.

The principles of trauma-informed care include:ⁱⁱⁱ

- **Safety:** create an environment that protects residents from physical harm and promotes a sense of emotional security
- **Trustworthiness:** earn residents' trust through open, respectful communication
- **Choice and collaboration:** provide services according to patients' individual preferences and values and encourage them to make their own care choices
- **Empowerment:** offer avenues through which residents can provide feedback and advocate for their own needs, including an ombudsman or dedicated staff member who can advocate on behalf of the residents

Using these TIC principles, the Denver Indian Family Resource Center developed a trauma-informed care model specifically for working with AI/AN people.^{iv} Tribal nursing homes can adopt similar approaches in working with AI/AN elders. Some of their recommended strategies include the following action strategies:

- Recognize the impacts of historical trauma and current issues on Native people.
- Encourage each person to share their unique experiences and accept their individual cultural identity.
- Include culturally responsive approaches, such as traditional healing ceremonies and cultural practices, that support the person's cultural identity and overall wellbeing.

Approaches to Patient-Centered Care

Leadership from the following tribal nursing homes shared their approaches to offering patient-centered care for residents who have experienced trauma.

- **Oglala Sioux Lakota Nursing Home**, in Rushville, NE; owned by Oglala Sioux Lakota Nursing Home, Inc., and managed by Native American Health Management
- **Utuqqanaat Inaat Nursing Home**, in Kotzebue, AK; operated by the Maniilaq Association
- **White River Healthcare Center**, in Rosebud, SD; owned and operated by the Rosebud Sioux Tribe

Although the facilities interviewed have not formally implemented TIC frameworks, each use of them uses patient-centered approaches, including tailored care for those who have experienced trauma, to care for all residents. Leadership of the White River Healthcare Center identified establishing formal TIC policies as the next step in providing care for nursing home residents affected by trauma.

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The nursing homes reported working with elders who have faced a variety of traumatic experiences, including:

- Elder abuse or neglect
- Child abuse
- Spousal abuse
- Sexual assault
- Family dysfunction, such as experiencing abandonment during childhood
- Substance use
- Accidents
- Hardships resulting from economic disparities
- Traumatic deaths of loved ones
- Incarceration of loved ones
- Historical trauma
- Trauma that occurred in boarding school settings

The following sections summarize input from these organizations and offer examples of how they care for elders who have experienced trauma. The approaches outlined in this report include suggestions for communicating with residents and staff about trauma, strategies for being emotionally supportive of residents and adjusting care to meet their needs, and ways to acknowledge historical trauma and integrate culture when caring for residents.

Discussing Trauma with Residents

The nursing home administrators interviewed for this report follow approaches to learning about a resident's trauma that are rooted in the resident's cultural communication norms. The Oglala Sioux Lakota Nursing Home and White River Healthcare Center inquire directly about traumas the resident has experienced, while the Utuqqanaat Inaat Nursing Home encourages these discussions to unfold over time, at a pace that feels comfortable to the elder.

In efforts to understand an elder's traumas and how to tailor care to that person's needs, the Oglala Sioux Lakota Nursing Home gathers social information, including details about past traumas, during the admission process.

We have a gentleman who lost his leg when he was seven years old in a combine accident. I asked him about that when we had his admission. I told him, "I want to hear the story because the more I know about you, the better care we can give you."

– Jacque Knight, Oglala Sioux Lakota Nursing Home

After a resident's admission to the facility, Oglala Sioux Lakota Nursing Home staff continue to observe the person's behavior and communicate with other staff members about people, activities, or situations that appear to trigger a negative reaction. Staff brief each other about this behavior so they can respond to each resident's needs with sensitivity.

During the admission process, the White River Healthcare Center staff assess whether an elder has experienced abuse or other types of trauma, and they continue to monitor the resident over time. Commonly, they learn that elders admitted to the facility suffered recent neglect or abuse.

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In their later ages, a lot of times people who come to us have trauma from neglect in the home setting. Either the family is unable to provide the care they need or there's substance abuse in the home that's preventing them from caring for the elder appropriately, so the elder comes to us.

– Whitney Ryan, Director, White River Healthcare Center

At the Utuqqanaat Inaat Nursing Home, staff do not ask upfront for details about residents' trauma, but instead wait for the elders to disclose that information when they feel comfortable. To promote a sense of emotional security, staff members devote time to gaining the elders' trust and understanding their comfort level. When an elder chooses to discuss their traumas, the protocol is for nursing home staff to quietly listen to the elder, encourage them to describe things in their own words, and thank them for sharing their story. Afterward, the nursing home staff monitors the resident to identify and respond to any negative reactions the elder may experience from discussing traumatic events. The nursing home briefs new staff on any known traumas among residents to help them be sensitive to each elder's needs.

We want them to feel protected and listened to. We take a lot of time to get to know the elders.

– Karen Kyler, Utuqqanaat Inaat Nursing Home

Providing Patient-Centered Care

Offering emotional support to residents who have experienced trauma promotes the elder's overall wellbeing. The three nursing homes encourage staff to monitor residents' emotional states and be emotionally supportive of the residents by showing that they believe the elders' accounts of trauma and understand them. The Oglala Sioux Lakota Nursing Home employs a psychotherapist who can offer counseling for the residents, and the White River Healthcare Center contracts with a nearby behavioral health agency for counseling services. As appropriate, the Utuqqanaat Inaat Nursing Home involves family members, tribal doctors, or spiritual leadership to provide emotional support for residents.

There's a big push for the care we provide to be holistic and patient-centered. If we're leaving out that aspect of it, then we're doing a disservice to the resident because we are not meeting all their needs.

– Whitney Ryan, Director, White River Healthcare Center

The nursing homes also train staff to empower the elders by encouraging them to make and express their own care choices. When a resident first enters the facility, staff ask about care preferences and preferred activities or traditions. In their communication with the elders, staff express a value for residents' independence, and they work to honor individual care preferences to the greatest extent possible.

Employing staff who speak the residents' native language helps reassure all elders and may make it easier for them to communicate about their traumas in their own words. This aspect of person-centered care can be especially helpful for tribal elders who have dementia, since they often begin to revert to the language they spoke at home as children.

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In addition to language barriers, aggression is a common challenge as dementia progresses, especially among elders who have experienced trauma. Identifying the root of aggressive behavior can be difficult. In these situations, White River Healthcare Center staff apply person-centered care by redirecting the elder to an activity they enjoy. At the time of hire and once a year subsequently, all staff members receive training on appropriate communication strategies for people with dementia and on interventions for aggressive behavior.

Another element of patient-centered care for all nursing home residents who have experienced trauma is to avoid reminders of a resident's trauma that may re-traumatize the elder. Utuqqanaat Inaat develops care plans for each resident to help caregivers avoid known triggers. The other two nursing homes provided examples of how they have tailored care to avoid exposing residents to situations that may re-traumatize them.

What Works for Us: Avoiding Re-Traumatization

A resident at the Oglala Sioux Lakota Nursing Home has told nursing home staff about trauma she previously experienced when she witnessed a sexual assault against a female elder. For this reason, she has expressed that she does not want to receive care from male staff members. Management has instructed the staff to ensure a female staff member is always available to attend to this resident's personal care needs.

The White River Healthcare Center building has two separate wings for elders, and they place female elders in one wing and male elders in the other, out of respect for the cultural preference many of the elders have expressed. This approach also helps create a sense of safety for female elders who have experienced violence. The facility works to hire staff who share the same strong regard for privacy and modesty that is common among their elders.

Acknowledging Historical Trauma

Many elders in tribal long-term care settings suffer from historical trauma, including trauma they experienced during the boarding school era. Most Oglala Sioux Lakota Nursing Home residents attended boarding schools as children.

They were taken away from their families and put in these boarding schools, and the only time they saw their families was for two months in the summer. They had their language taken away, their identities basically taken away.

– Pam McDonald, Oglala Sioux Lakota Nursing Home

Native children who attended boarding schools were conditioned against acknowledging the traumatic effects of these schools, and as a result, elders often refrain from speaking about these experiences. To help soothe historical trauma, the Oglala Sioux Lakota Nursing Home nurtures the cultural identities of all residents. They host cultural events, such as drum groups, to help residents reconnect with their culture.

What Works for Us: Healing Through Culturally Appropriate Care

The Utuqqanaat Inaat Nursing Home integrates cultural components into everyday life at the facility. For example, the nursing home serves traditional foods, hosts traditional activities, and employs as many Native staff members as possible, some of whom speak Inupiat. They also integrate tribal doctors and traditional medicine into care. If the residents wish, staff members incorporate spiritual support into care, such as singing or reading to the elders.

Conclusion

Implementing a formal trauma-informed care framework may help tribal nursing homes build on the patient-centered, culturally informed care they already provide. Full integration of the TIC approach would involve developing policies and protocols based on TIC and providing staff training on the TIC principles.

Through TIC, tribal nursing homes can understand the effects of trauma on an elder's wellbeing and tailor services to support their healing and address the ways in which trauma has affected their health. Tribal nursing home residents often face multiple, intertwined sources of trauma, which many include historical trauma and trauma from the resulting isolation; repression of their cultural identities from attending boarding schools; trauma from elder abuse; and other traumas they have experienced, such as a physical accident, sexual assault, or the traumatic deaths of loved ones.

Culturally appropriate communication with nursing home residents about their traumas, as well as communication among staff about an elder's care preferences and possible triggers, is important for understanding and addressing trauma. Other aspects of person-centered care in Indian Country include acknowledging the role of historical trauma; providing emotional support to elders who have experienced trauma; and incorporating cultural elements, including Native languages, into care. By continuing to acknowledge the role of trauma in residents' long-term care needs, tribal nursing homes can help enhance the overall wellbeing of the elders they care for.

ⁱ SAMHSA's Trauma and Justice Strategic Initiative. (2014). SAMHSA's concept of trauma and guidance for a trauma-informed approach. Retrieved from <https://store.samhsa.gov/system/files/sma14-4884.pdf>.

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