

















# LTSS in Our Community: Assisted Living

## Summary Report

decided based on a determination of service versus business. First, the programs determined the cost of their care, followed by resident rates.

The EKGALC primarily uses gaming revenue to cover costs for the care of its residents. The EKGALC then have the residents pay as they are able. The EKGALC administrator added, “So, we do have some rental revenue from residents. It doesn’t really cover a whole lot of the expense.... The main purpose of the facility was to have it here for our tribe.”

In determining their cost of care, the PIALF considered that each resident would have different needs that require different levels of care. However, the PIALF decided that a base rate would best inform the resident rate. Compared to other facilities in the area, PIALF’s base rate is considerably low. In justification of their rate, the PIALF administrator said, “we wanted to make sure that we are making it [as] affordable as we could for our elders,” since many do not qualify for Medicaid and need to privately pay.

The YKEALC conducted outreach to the community to educate them about the program and how it handles payment for services. To determine how a resident will pay for their care, first, the YKEALC determines the resident’s level of care. Then, the resident is assessed for qualification for assistance programs through either the State General Relief program or Medicaid. If the resident is not qualified for assistance, that resident will have to pay privately. It took time for the community to adjust to the idea that their personal savings may be needed to cover their care.

Each program tries to provide the best quality of life for their community and keep members close to home and family. However, facilities must maintain regulations and policies that permit affordable care through Medicaid reimbursement, state relief programs, third party insurance, or private pay. The challenge is finding a balance between the tribe’s intent, community needs, and state regulation requirements. Each community has a different approach and set of resources to accomplish this goal.

### Program Staff and Training

The EKGALC, PIALF, and YKEALC approach staffing and training needs similarly. For the most part, they recruited local staff through tribal employment or education programs. Each program identified a common health concern among its residents and works to provide their staff with the training they need to address these concerns in their care for provision. Further, each program closely follows state requirements for new hire training and the continued education of its staff.

The EKGALC worked with the tribal job placement program and educational programs to recruit staff to work at the facility. The tribe sponsored classes for nurses’ aides and sent several tribal members to school to receive needed education. Based on the community’s greatest health concern, diabetes, they developed staffing shifts that would best fit its residents’ needs. These shifts required the EKGALC to hire enough licensed practical nurses to staff every shift. For the continued education of its staff, the facility also holds monthly trainings that coincide with payday. For these trainings, facility staff review





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material on various topics on which they are then quizzed. The facility also works with the local Indian Health Service to provide in-person trainings.

At the YKEALC, the consortium set aside funding for staff training. Onboarding new staff includes 3 days of on-the-job training; orientation to the building and regulations; and resident care. Also, included in training are CPR, first aid, and training on dementia diseases. The facility is also interested in providing resiliency training for staff to boost their ability to overcome challenges in the work environment. The administrator is also establishing a formal staff evaluation process.

Each facility took pride in its ability to staff local tribal members. These staff introduce important cultural considerations for the facilities' residents. They understand the cultural needs of their residents, speak the language of the elders, and may even know their residents' families. This helps create an environment in which their residents feel at ease and at home.

### Cultural Considerations

The EKGALC, PIALF, and YKEALC developed their visions to include the community, which determined how culture tied into their program and the care of their residents. Culture is at the heart of each of these assisted living facilities. They incorporate traditions in the residents' daily lives through food, activities, and end-of-life considerations.

Hiring local staff who understand their communities' traditions and speak a shared language with residents was a key component of the facilities' staffing decisions. They further incorporate culture by designing daily activities and meals that incorporate traditions. Menus include local and traditional foods and are reviewed by a dietician and nutritionist. For instance, the YKEALC has local hunters and fishermen bring food for the elders, like moose, beaver, and salmon. The PIALF started chili pepper pots that residents can harvest for meals like beans and green chili or chili stew.

For these communities, the assisted living facility is a community hub. Activities that incorporate other community members help keep the culture vibrant for the residents. For instance, the EKGALC connected with the EKGALC daycare so children can come and sing with the elders. Elders attend community events like powwows and enjoy regalia-making classes. The residents determine many of the facility's activities.

Overall, the facilities discovered that state and federal regulations did not hinder cultural and traditional practices as they originally thought might happen. Further, state contacts even encouraged the facilities to incorporate traditions and practices into the daily lives of the residents. The tribes and consortium also facilitated great partnership opportunities by including the community into their planning process and vision development, which enabled the facilities to become community hubs as an added benefit for their residents.



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### Conclusion

The EKGALC, PIALF, and YKEALC each opened their assisted living programs within the last 5 years, starting in 2013. Each facility ran into their own challenges during development, and established community, and state partnerships that were beneficial. Recommendations for other tribes to consider when developing an assisted living facilities in their communities include:

- Research state and federal license requirements;
- Establish relationships with state departments and organizations;
- Build and use your community, state, and national network groups; and
- Establish a vision, mission, and policies for the facility early in the planning process (Abeita, 2017).

Each tribe and the consortium committed to providing long-term care because the need and community support were there. After the communities' initial commitment, it took time, research, planning, and networking to establish the assisted living facilities. Now each of these communities has a place where their elders can turn to seek long-term care without moving away from home. They can live in a place that is sensitive to their cultural needs and keeps them connected to their communities. Further, the facility employs local people and keeps generations connected—parents, children, and grandchildren—which allows the residents to continue giving back to the community.



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# LTSS in Our Community: Assisted Living

## Program Profile of the Edith Kassanoid Gordon Assisted Living Center

### Edith Kassanoid Gordon Assisted Living Center

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“It’s been in progress for 10 years and started with tribal members themselves asking.”

– *Melanie Lewis, Administrator, Edith Kassanoid Gordon Assisted Living Center*

#### Program Description

The Edith Kassanoid Gordon Assisted Living Center is tribally owned and operated by the Comanche Nation of Oklahoma. The center provides long-term services and supports to its residents, including activities of daily living. The center provides medication administration, personal care, transportation, meals, activities, and housekeeping. Center staff identified diabetes as the most common health concern among their residents and designed services to address it.

The center’s development began with tribal members’ interest in a long-term care facility. Once the tribe decided to build an assisted living center, the tribal business council and tribal members approved the project. Establishment of the center with fully supported by the tribe’s gaming revenues.

#### Successful Strategies

Center staff have seen success in their efforts to determine rates, recruit and train staff, and incorporate cultural into their care.

#### Resident Rates

The center bases resident rates on income, which amounts to a monthly rent. Typically, resident income comes from Social Security benefits. The Comanche Nation has a low-income subsidy program that supports residents housing rates. Private pay is also accepted by the facility.

**Operated by:** Comanche Nation

**Opened:** October 2014

**Total Rooms:** 9 rooms

**Contact Information:**

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**Community:** Edith Kassanoid Gordon Assisted Living Center serves elders aged 65 and older. The average resident age at the center is currently 85 years.





## LTSS in Our Community: Assisted Living

### Program Profile of the Edith Kassanoid Gordon Assisted Living Center

#### Staffing

The center worked with the tribal job assistance program and educational programs to recruit staff for the center. The tribe sponsored classes for nurse aides and sent several tribal members to school to receive needed education. Because the community's greatest health concern is diabetes, the center developed staffing shifts to best fit the needs of its residents who have diabetes. This shift schedule ensures that licensed practical nurses staff every shift, particularly to address the needs of insulin-dependent residents. This staffing schedule also meets Oklahoma regulations for treating patients with diabetes. The center also hired certified nursing assistants to provide personal care.

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"Look at population needs. Know what's there and how those needs bump against state regulations. Each [state's] regulations are different. They need to be aware of requirements and elder needs. Then try to see what's doable in the planning."

– *Melanie Lewis on development considerations for other tribes*

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"They know all the details about what our residents need, their personalities and being willing to step up and say 'I'm going to do this for them, I'm going to do that.' So, it's not just a job to them, they're providing a service to their community, that they are helping their own people.

– *Melanie Lewis on staff commitment*

The center has 20 staff, half of whom are nurses, followed by CNAs, a receptionist, a maintenance team, housekeeping, dietary staff that includes cooks and a certified dietary manager, an activities manager, and contract staff. Contract staff include a registered nurse consultant, dietician, medical doctor, and consultant pharmacist.

#### Staff Training

Employee's must meet Oklahoma State licensing requirements for training before their first day. The center holds monthly trainings that coincide with pay days. Employees review material on various topics and are then quizzed on the material. The center also works with the local Indian Health Service to provide in-person trainings.

#### Cultural Considerations

Culture is the heart of the center. The center incorporates traditions in the elders' daily lives through food, activities, and end-of-life considerations. For instance, the center connects with the Comanche daycare, and children come and sing with the elders. Elders attend community events, like powwows, and enjoy regalia-making classes. The residents determine many of the center's activities.

#### Future Considerations

The community is looking to expand the center's functions. Options include having other tribal programs housed at the center, like independent living, an elder nutrition center, or daycare services.



# LTSS in Our Community: Assisted Living

Program Profile of the Pueblo of Isleta  
Assisted Living Center

## Pueblo of Isleta Assisted Living Facility

“They are our elders. We want to give them quality care, quality of life. That’s our standard. They deserve the best care we can provide them.”

– Natalie Abeita, Administrator, Pueblo of Isleta Assisted Living Facility

### Program Development

Pueblo of Isleta’s long-term care facility had been in the making for almost 60 years. Efforts began with discussions that shared the pueblo’s hope to lighten caregiver burden for its families and keep elders in the community. Pueblo of Isleta identified grant funding in early 2000 to construct the assisted living building. The tribe also conducted a community survey to determine their community’s need and levels of support. These efforts resulted in tribal administration approval to develop the facility.

A consultant helped facility staff acquire state licensing. The facility is working to attain Medicaid certification and currently holds a temporary license.

### Successful Strategies

Facility staff have seen success in their efforts to acquire funding, meet client needs, and incorporate cultural into their care.

### Resident Funding

Facility staff developed a budget to determine a base rate for the cost of care for its residents, which accounts for fluctuations from varying resident needs.

Residents can access private pay, Medicaid, or tribal supplements to cover the cost of care. The facility is considering nonprofit status, as its goal is not to make a profit, but to provide a community service. Nonprofit status would also allow the facility to apply for certain grants.

**Operated by:** Pueblo of Isleta

**Opened:** October 2015

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**Community:** Pueblo of Isleta Assisted Living Facility is a 20-bed facility that services elders aged 60 and above. The community’s elder population has grown over the past several years.





# LTSS in Our Community: Assisted Living

## Program Profile of the Pueblo of Isleta Assisted Living Center

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“When I met with the state, they were positive and assuring that I could create activities and meals that were safe for the elders, and we did not lose the custom or tradition.”

– Natalie Abeita on cultural considerations

### Cultural Considerations

Within state and federal regulations, facility staff embrace culture and tradition to help keep it vibrant for the residents. They incorporate traditional meals with the help of a dietician and nutritionist, like beans and green chili or chili stew. The facility started seed pots that residents can harvest for their meals. For residents with dementia, cultural experiences that help with memory are especially important. Further, most staff are tribal members who speak the language.

### Lesson Learned

The facility offers the following considerations to tribes looking to develop assisted living facilities:

- Research state, federal, and Medicaid license requirements;
- Establish relationships with state departments and organizations;
- Develop a tribal elder code;
- Ask for help when needed and do not be afraid to reach out;
- Build and use a provider support network;
- Establish a vision and mission for the facility early in the development process; and
- Develop facility policies early on and seek guidance from the tribal counsel.

### Future Considerations

The facility is working to become self-sustaining, so it can continue to operate without supplemental funding from the tribe to cover resident care.

### Facility Services

The facility offers 24-hour care, and its each resident’s service plan is based on their care needs and developed with the resident and their family. Basic facility services include meals and daily activities, especially traditional activities, like making bread or tortillas. Other services include:

- Housekeeping and laundry;
- Increased interpersonal engagement;
- Medication assistance and management; and
- Resident connections to external health agencies, as needed for care.

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“I am honored the tribe let me take this project on and to be able to help it grow. I hope to see other pueblos and tribes build their own either assisted living or nursing home. The positivity that we are seeing in our elders from being within their own community—it keeps our traditions and culture alive.”

– Natalie Abeita on the impact of the facility on elders and the community



# LTSS in Our Community: Assisted Living

Program Profile of the Yukon Koyukuk  
Elder Assisted Living Center

## Yukon Koyukuk Elder Assisted Living Center

“We get lots of visitors, just like in any grandma or grandpa’s house in Indian Country; the coffee pot is always on, and the door is always open.”

– Agnes Sweetsir, Administrator, Yukon Koyukuk Elder Assisted Living Center

### Program Description

The Yukon Koyukuk Elder Assisted Living Center is owned by five tribes through a consortium. The center provides long-term services and supports to its residents, including activities of daily living. Each resident has a private unit with a bath and small living area. Dementia is the most common health concern among residents, and staff are trained to care for residents with dementia diseases.

The center’s development started 30 years ago as a discussion by elders. In the 1990s, the tribes became more aware that elders had to move away to receive the care they needed. In early 2000, the tribes established the consortium, began pooling resources, and conducted a feasibility study. By 2009, they finalized the construction plans, and the center’s doors opened in 2013.

### Successful Strategies

Center staff have seen success in their efforts to acquire funding, recruit patients, train staff, and incorporate cultural into their care.

### Funding Streams

The center secured funding for construction, furnishings, maintenance, upgrades, and resident care through the following sources:

- The Tribal Housing Authority,
- Alaska state and federal grants,
- The New Market Tax Credit,

**Operated by:** Yukon Koyukuk Elder Assisted Living Consortium (Nulato Tribe, Louden Tribe, Native Tribe of Koyukuk, Ruby Tribe, and Kaltag Tribe)

**Opened:** 2013

**Total Rooms:** 9 rooms

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**Community:** Yukon Koyukuk Elder Assisted Living Center is in a remote area that is only accessible by plane or river. Of its community, 20% of the of the population is over 55 and 5% is 75 years of age.







# LTSS in Our Community: Assisted Living

## Program Profile of the Yukon Koyukuk Elder Assisted Living Center

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“Design [the] facility and program with sustainability in mind, and let the local cultural values drive the design. We had to access a lot of resources to make our center energy efficient and sustainable.”

– Agnes Sweetsir on building construction

- Donations and tribal supplements, and
- Medicaid.

The center established a payment policy to direct how residents pay for care and a care plan that outlines resident care. The center also assesses qualifications for the state’s General Relief program or Medicaid. If residents do not qualify for assistance, the center develops a private pay schedule for them, and the consortium supplements resident care as needed.

### Assisted Living Acceptance

When the center initially opened, the center faced the following challenges with resident recruitment: (1) elders did not want to leave their homes, (2) the community associated a stigma with assisted living centers, and (3) elders were supporting family members.

To address this, the center reached out to the community through the elders’ families, friends, and providers. Direct, one-on-one conversations were the most beneficial to share information about the center services and address the community’s fears and concerns. Further, the center began to shift toward a community hub.

### Staff & Training

The center currently staffs seven and a half full-time employees who are all local tribal members. From the start, the consortium had set aside funding for staff training. Onboarding for new staff includes:

- 3-days of on-the-job training;
- orientation to the building, residents, and resident care;
- orientation to regulations, center practices, and duties;
- CPR and first aid training; and
- training on dementia diseases.

The center is looking to institute RESILIENCE training and establish a formal staff evaluation process.

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“We are truly an Athabascan assisted living home. We provide employment for our local people. We keep generations connected—children and grandchildren. Our elders are still giving back to the community. That makes a big difference to them and to the community.”

– Agnes Sweetsir

### Cultural Considerations

Development of the center’s vision included the consortium and community. The vision determined how the center would tie culture into its practice and resident care. Currently, the center is one of the main community hubs. Local hunters and fishers bring food for the elders—moose, beaver, and salmon. The center also administers a federal grant that brings community elders to the center for congregate meals.