Home & Community-Based Services for Native Elders:

Pathway to CHR Targeted Case Management at Standing Rock Sioux Tribe

Presented by: John Eagle Shield & Elaine Keeps Eagle & Chris Burd
• Describe

- Potential benefits of improving Home & Community-Based Services (HCBS) in rural Native communities (10”)
- History of CHRs in pursuing HCBS objectives at Standing Rock Sioux Tribe (SRST) (10”)
- Targeted Case Management (TCM): Our Current & Future pathway to HCBS through the CHR program at SRST (15”)

Objectives
• Ability for Elders & people with disabilities to:
  • “Age in place”
  • Maintain connections to family, community, & traditions through the life span
  • Maintain role of making contributions within community as an elder
  • Have their preferences honored

Potential Benefits of HCBS in Rural Tribal Communities
• Opportunity:

  ◦ To re-claim tradition of respectfully caring for elders at home by family members
  ◦ To explore full range of health care options offered through Medicaid program in ND
  ◦ To model alternative options along a continuum of long-term care
Opportunity:

- To avoid institutionalization of elders who can successfully live in the community for longer periods of time if assisted with ADLs & IADLS
- To create care-giver agency as an economic development tool
- To provide care that is sensitive to cultural perspectives
Possible with strong partners
Many Partners along the way

- Administration on Aging
- National Resource Center on Native American Aging (NRCNAA)
- Spirit Lake Nation Elders Advisory Group
- Cankdeska Cikana Community College
- Sitting Bull College
- CMS Region VIII
• Our Friends at Spirit Lake Nation

Setting Priorities
• CHR-TCM Project at Standing Rock

Standing Rock Sioux Tribe
Quite a Journey for SRST CHRs
• CHR Program nationally 44 years old
• CHRs have long history focusing on care of elders in Indian Country

• 7 years ago, discussions began with ND State Medicaid-HCBS programs to utilize unique CHR skills in helping elders access care in their home settings
• January, 2012 a State Plan Amendment (SPA) to the ND Medicaid State Plan was approved for CHRs to provide Targeted Case Management (TCM)

History of SRST CHRs in HCBS
July 2012 to April 2013: Attempt to change policy through legislation to increase availability of independent social workers to improve access to HCBS

April 2013: Legislation passed in the ND House, *but failed in the Senate*...
  - So... no ability to contract with “independent” social workers for HCBS

April 2013: Back to the drawing board! We see 3 avenues open...
A) CHRs to partner more closely with Elderly Nutrition Program
   1. Standing Rock Elderly Nutrition just received a NICOA grant to increase number of Caregivers
   2. TCM role by CHRs is a natural “fit” to integrate with caregiver role in Nutrition Program

B) Work with Tribal Leadership towards hiring of LSW & LPN under the Tribe
   1. Specific to HCBS planning

C) Work with Tribal Leadership towards Contracting with IHS for providing long-term care options for the future

Three Potential Avenues to effectively improving HCBS
Currently Implementing grant for the state-required training for CHRs to pilot TCM at Standing Rock Sioux Tribe

- Gerontology Course & Case Management Course being offered through Sitting Bull College at SRST in 2013
- Gerontology Course completed by May 1
- Case Management Course completed by June 15

CHR-TCM: Our **Current** Pathway to Improving HCBS
- Culturally adapted training in Gerontology

**NECC Gerontology Course**
• Continued meetings with state & regional Medicaid-HCBS personnel
  ◦ Develop the details for reimbursement process under Medicaid through the approved SPA
• Model the process at SRST
• Provide TCM training across all ND Tribes
• Pursuit of additional grant monies
• Pursue TCM in SD
• Main goal by 2015 to have Tribal HCBS Agency as “hub” for elder services

CHR-TCM: Immediate direction to Improving HCBS at SRST
Integration among:

- CHR Program
- Elderly Nutrition Program
- Tribal HCBS Agency
- Home Health Agency
- Hospice Services
- Elderly Protection Services
- Care-giver Respite & Support Program
- “One-Stop Shop” for elder services
- Native American Health Providers
- State & County & Tribal Services

Future Direction for an effective long-term care continuum
HCBS Strategic Model (Burd, et al 2008-2013)

Tribal Colleges & "Next Steps"
- Training & Coordination
- Mentoring & Support
- QSP
- CNA
- Pre-nursing
- LPN, RN
- Apprenticeship Program

Title VI Senior Services
- Outreach
- Caregiver Support/Respite
- "Navigators"
- QSP job assignments
- Meals
- Nurse Consultant
- Elderly Protection Team
- Social Worker Consult for Caregivers

Other Community Resource Programs: Present & Future
- Local Disability Experts
- Home Health Agencies
- Hospital Social Workers
- Hospice / Swing Beds
- QSP / HCBS Agencies
- Training sites
- County/State programs

Tribal Health Programs, CHRs
- Primary Providers
- Elderly Nutrition Program
- Medical Transportation
- Benefits Coordination
- Medication set-up
- Targeted Case Management
- Tribal LSWs for HCBS
Fortitude, Courage... and our Thanks!