

# **Home & Community-Based Services for Native Elders:**

## ***Pathway to CHR Targeted Case Management at Standing Rock Sioux Tribe***

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- **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

**Potential Benefits (cont'd)**

- **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

**Potential Benefits (cont'd)**



**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...

**Current direction in HCBS (cont)**

- 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)

- Training & Coordination
- Mentoring & Support
- QSP
- CNA
- Pre-nursing
- LPN, RN
- Apprenticeship Program

Tribal  
Colleges  
&  
"Next  
Steps"

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

Title VI  
Senior  
Services

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!**