Makah Senior Health Home Program

Money Follows the Person- Tribal Initiative

We are grateful

- “ Money Follows the Person’s Tribal Initiative Grant, has played a major role to better the lives of our clients living in and outside of our reservation line.

- We been able to finance the operational needs for the Makah Health Home Program as well as go beyond meeting the needs for our clients and community members.

Makah Health Home Program

- The Makah Health Home Program is operated as a non-profit organization. The revenue we generate from our program goes into expanding our services, that literally goes back to the clients and our impoverished, at risk elders, who are not yet eligible to be on our program.

- With the revenues we have derived from our Health Home Program, we have been able to achieve the following:
  - Early this year, we were able to occupy an office space solely for our Health Home Program where our clients can come meet with our care coordinator for their various needs, enjoy a cup of coffee during their visits and enjoy the waterfront view of our office. This also provides confidence and peace of our clients regarding having privacy with discussing their various needs for assistance.

  - This August, we initiated our opening of our Makah Veterans Assistance office, we are now able to provide assistance to the veterans living in and outside of our reservation lines. These veterans usually have to travel to Seattle for services, are now able to drive to our Veterans office, which is shared with our Health Home office.

Makah Health Home in the midst of COVID 19 virus pandemic

- This year has been unusual due to the Covid-19 virus pandemic. The Makah Tribal Nation has been on a shelter in place order. The reservation is on a lockdown. Limited essential travelling allowed for our community members, and no visitors are allowed to enter the reservation.

- Since the Makah Tribe had the town on a lock down with shelter in place order. Our clients had been compliant with the shelter in place orders but had multiple questions concerning fear of the unknown, as the news media have continued to cover uprising deaths and spread of the virus coverages. The Makah Health Home and Senior Program, had been diligent in updating and information regarding concerns for the community wellness and safety guidelines in the form of flyers, directing them to tribal council respond video updates as well as providing multiple community resources.

- The Makah Health Home Program, working hand in hand with the tribal government and the local clinic, have been on the frontlines

- We provide education and disseminate printed educational literatures regarding the Covid 19 virus: the signs and symtpoms, and what to do if these symptoms are observed.

Makah Health Home in the midst of COVID 19 virus pandemic

- We continue to communicate with our clients, by phone calls as well as in person conversations, while practicing social distancing observing 6 feet distance apart and donning gloves and masks at every home visits.
- Our conversations include assessing for their current wellbeing, includes asking about any signs and symptoms of illness related to Covid-19. We continue to assist them with their health action plans on self management of their chronic diseases by providing recommendation, suggestions, finding resources to empower them in taking part of managing their health action plan and their own healthcare.
- We continue to diligently assess their abilities to perform their activities of daily living, in home caregiver relations, assist with medication reconcillation,

Makah Health Home in the midst of COVID 19 virus pandemic

- We continue to address and provide assistance to our clients in their various needs, such as scheduling and rescheduling medical apppointments, medication pick up, in home caregiver needs and finding resources for housing needs, home repairs, coordinate transportation needs, nutritional needs and many more.

- We continue to coordinate with their individual case managers and veterans representatives for their immediate needs.

Seniors & Health Home Program

Our senior program staff and health home staff have combined services to serve the senior citizens living on the Makah reservation.

We are committed to be in the frontline to provide essential services in providing nutritional needs to our clients and elderly.

The tribal lockdown started in March, and we are anticipating to be providing this service until this crisis is over.

- We provide daily hot lunch meals to all the elders who meet our qualifying criteria of being age of 65 and low income, added with our usual home bound elders.
- We serve a total of 60 hot lunch home deliveries and another 60 elders of groceries to subsidize their needs for making their own lunch. This helps with the financial stress when prices are higher within Neah Bay

Makah Health Home Program

- For our Health Home clients, we are able to purchase and provide a variety of nutritional supplements for the frail, undernourished elders with Ensure Plus supplements, as well as client- centered supplemental needs.

- We have also added Vitamins that are essential to boost their immune system, such as Vit c, Vit D3, Zinc and Elderberry all of these are beneficial to improve their body's immune system.

Recommendation and Interventions

- Developing health action plans with the client, coaching and pointing to healthier lifestyle, healthier food choices and basic and safe activities to enrich their well being
- Assisting with application to various benefits from Health and Community services, and CMS for Medicaid services providing subsidy of medical safety devices, nutritional supplements such as ensure for the frail and under-nourished; providing initial organic high protein and fiber supplements for obese and diabetic (with instructions to get doctor's approval) to assist help with weight management
- Providing pick up services for medications; referrals to medical, dental, vision, social services, naturopathic, behavioral services; provide assistance with adult protective service needs; provide transportation to medical appointments if there aren't other transport arrangements available; assist with escorting and advocating client with meeting with their providers in medical appointments, ER visits, hospitalization and getting involved in discharge planning to meet the needs when they are discharged to home or transition to a skilled nursing facility; and provide education and support life skills and safety awareness

Assessment and Evaluation

- Assessment and evaluation :
- Safety concerns, nutritional concerns
- Client's understanding of their health conditions, understanding of self-management of chronic diseases
- Needs of advocacy in escorting them to medical, dental, vision, social and behavioral service appointments, and making appointments as needed
- Transportation needs,
- Medication management and understanding needs,
- In home care giver needs, and
- Understanding of various benefits, resources available to them
- Evaluation any unmet needs.

The Makah Health Home Provides:

- The Makah Health Home follows and provides a group of 6 services that coordinates care across several domains, directed by state guidelines, as defined under section 2703 of the Affordable Care Act; they are as follows:

  - Comprehensive care management
  - Care coordination and health promotion
  - Comprehensive transitional care from inpatient to other settings, including appropriated follow-up
  - Provide individual and family support
  - Referral to community and social support services, if relevant;
  - The use if health information technology to link services , as feasible and appropriate

Link Up

- Connecting these individuals with state and community resources that assists their needs and remove obstacles to health management, can greatly improve their well-being, while avoiding expensive treatments for preventable consequences of unmanaged conditions.

- Sometimes the HealthCare challenges could seem like a big maze to go through, or a big web to untangle to our clients

In a focused group of individuals who have used our services.

- Our clients reported significant improvement in their health and quality of life.
- They participate in the health action planning and work towards achieving these goals
- Whether it be short term goals or working towards a more challenging long term goal.
- The improved health outcomes of our clients are even more rewarding.

We focus on:

- High health risk clients
- Most at-risk for adverse health outcomes
- At highest risk for hospitalization and
- Those at risk of mortality
- Most of these clients are likely to need / or already receive multiple Medicaid paid services.

Health Action Plans

- We encourage self-centered and motivated action plans to:
- Improve health related outcomes
- Reduce avoidable costs
- Ensure coordination
- Care transitions
- Increase confidence and skills of self-management of health
- Bridge our systems of care

Health Action Plan involves answering the questions

- What ? What is my goal ? Short Term ___ Long Term ___
- How much? How much can I do?
- How often? How often can I do this?
- When? When will I start? When do I plan to do this?
- Confidence level ? Is this achievable? Do I need to modify this plan?

Supporting our Home Care Aides

- We provide support services to our in home care givers. We are able to provide continuing education as needed.
- Coordinate with O3A, Health community services and case managers to meet the needs for In Home Health Care Aide to assist with light housework as well as ADLs
- We provide resources that the caregivers need, such as finding a respite caregiver, assistance in finding when they need a break, or looking into any concerns they may have regarding their own wellbeing.
- We offer assistance in getting training to family member caregivers,get tehm registered be a state certified Health Care Aide, and get paid while caring for their loved ones at their own home.
- We are able to provide training to all Health Care Aide caring for family members, through SEIU or DSHS Savvy Caregivers in Indian Country training, and provide classes for Powerful Tools for Caregivers.

Powerful Tools for Caregivers

Providing knowledge tools on how to care for themselves by:

- Identifying and reducing personal stress
- Communicating FELINGS AND CONCERNS
- Reducing personal stress
- Effective ways of communication in challenging situations
- Learning from emotions and mastering care giving decisions
- These tools in the management of stress, provides the ability to balance and maintain their wellness. This helps them stay in the caregivers job that benefits our clients.

Seniors & Health Home Program

For additional assistance

For our Health Home clients, we are able to purchase and provide a variety of nutritional supplements for the frail, undernourished elders with Ensure Plus supplements, as well as client- centered supplemental needs. We have also added Vitamins that are essential to boost their immune system, such as Vit c, Vit D3, Zinc and Elderberry all of these are beneficial to improve their body's immune system.

Makah Health Home Program

- We provide nutritional counseling, coaching and initiate safe, life changing lifestyle advices for our clients, who suffer from obesity, diabetes, high blood pressure and high cholesterol, by assisting them in search of a safe alternative to naturopathic consultation, nutritional consultation with outside resources.

- We also provide our clients an initial organic high protein, supplement with high fiber for clients to take to their providers, nutritionist or naturopathic providers for approval.

- Our clients are also offered DVDs on Yoga, and other simple home stretching exercises for seniors.

Makah Health Home Program

- Medical Advocacy support services:
- We provide assistance in advocacy in going with out clients to appointment s with specialists, to advocate for their needs and benefits
- Advocacy during emergency situations needing Emergency room visits, during hospital stays, assist discharge planning stages and transition planning to skilled nursing facilities, long term care or discharge home with Home health Nurse , PT, OT and bath aid services if needed.

Makah Health Home Program

- Legal and Social services advocacy:
- We direct clients to appropriate agencies for assistance with legal documents such as Living Will, Power of Attorney
- We direct and assist client with immediate needs to file for safety issues with our local law enforcement office or Social services for any suspicion or reported Elder abuse according to the Tribal Laws, as a self –governing body of government.

Makah Health Home Program

- Training for Staff :
- We are able to provide our staff in acquiring the continuing education required to maintain the WA State RN license
- Education completed:
- Covid -19 update trainings with: DSHS, CDC, NIH.
- Geriatric nursing, Diabetic continuing education
- Wound care, Foot care, continuing education
- Emergency nursing continuing education
- Basic Life Support for Health Care Workers certification

Makah Health Home Program

- Most Importantly, we are able to ensure that our clients/ community members receive culturally sensitive minded care from our services.
- We want to ensure our staff apply what they learn by honoring and respecting the culture and the way of life of all of our population
- We are now serving 30 clients in our Health Home Program
- We have come a long way. We will continue pushing forward to excellence in our services for our clients.

Money Follows the Person Tribal- Initiative

We extend our warmest heart felt gratitude.

These are all made possible

A Big Thank You

Klecko! Klecko!

Maureen Woods, Program Manager

Jan Li Hanson, RN Care Coordinator

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Nisqually Tribe Adult Healing House

LTSS and Medicaid Transformation Planning

Nisqually Indian Tribe

A picture is worth a thousand words

For the last 18 months, the Healing House has been working with the American Indian Health Commission (AIHC) and the Washington State Department of Health and Social Services (DSHS) towards obtaining a contract to operate an Adult Day Services program. We are 95% done with the application. We were working on an MOU agreement with Yelm Senior Center through South Sound Senior Program before COVID19 hit to provide lunches. We are waiting for Thurston County to enter Phase 4 to complete the agreement.

A picture is worth a thousand words

The Healing House Team consists of a Manager, R.N. L.P.N , and 7 CNAs. The current caregivers are state Certified Nursing Assistants (CNAs). We transitioned the skill level from caregivers to CNAs at the beginning of 2018 to provide better quality of service and in-home care for Elders. We currently have 1 opening for a new CNA, offering an opportunity to train, become certified, and begin a rewarding career in a medical field. We currently care for 6 clients (Elders) and since COVID19 our referrals for new Elders has been limited. In recent weeks we have been working on adding to our Elder list. We are looking to hire 1 more CNA & LPN before end of the year. We will then have a total of 8 CNAs.

Healing House Planning

Healing House Plan

2020-2021 Plan

- Finalize Application for Adult Day services with the State
- Coordinate billing components
- Develop food services for program
- Work with providers for referrals of Nisqually Elders
- After care follow up planning
- Provide prescribed home visits by Registered Nurse
- Coordinate LPN component to program
- Provide follow up to care that has ended and complete
- Provide CNA and light housekeeping services
- Coordinate PSA with community members to provide caregiver services
- Work with TERO to hire CNA's from the community
- Have 7 current CNAs. Currently have 1 opening. Looking to hire an additional CNA by end of the year
- And additional LPN
- Be able to provide care to more Elders in the community
- 6 clients that we provide services for, Referrals for additional Elders
- Coordinate necessary staff training
- Begin to research licensure or contract requirements for short term stay program for Healing House

LTSS GRANT-FUNDED PLAN

- Grant extended to March 31st 2021 Due to COVID19
- Develop a feasibility report for billing and contract opportunities
  - Medical transportation
  - Amerigroup Housing & Employment
  - Medicaid Random Moments & other medicaid reimbursement of LTSS
- Identify IHS and other contract opportunities for the Healing House, along with long term planning opportunities in short and long term patient stays
- Complete analysis of our current billing systems to strengthen medicaid billing, particularly for the Healing House
- Host at least two community events in order to survey community for planning input; November 2019 1st Elder's Dept. hosted survey event. Working on 2nd survey for additional input from community
- Community gathering
- Healing House Open House was December 2019

> *The Adult Healing House will provide referred Nisqually Adults a safe place to come and be cared for during the day. We will focus on a holistic approach incorporating cultural, social, intellectual, economic, emotional physical and spiritual needs. This program will strive to enable adults to remain independent as long as possible; to prevent higher cost of care by maintaining or improving current levels of functioning and to provide respite for family caregivers.*

Nisqually Adult Healing House

Thanks!

You can find me at
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