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

LTSS Research: Nursing Home Facility Inventory Nursing Homes in Indian Country

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Nursing Homes in Indian Country

Table of Contents

Background	2
Nursing Home Facilities in Indian Country	
Medicare Nursing Home Compare	
Tribal Nursing Home Education Collaborative	
Background	5
The Collaborative Progress	
Nursing Home Facility Support and Development	6
Appendix A	7
Tribally Operated Nursing Home Facilities	7
Appendix B	11
NHF Five-Star Rating Summary Table	11
References	12



Background

By the year 2030, there will be 2.5 times as many American Indian and Alaska Native (Al/AN) elders as there were in 2012.¹ Health issues common among Al/ANs—poor nutrition, obesity, substance use disorders, violence, and injuries—combined with the delayed health care access many elder Al/ANs face due to geographic isolation, poverty, and insurance issues often result in many Al/AN elders enduring deteriorating health conditions while seeking care during later stages of disease.² Al/AN elders regularly grapple with issues of chronic disease and comorbidity that require 24-hour care.³ Unfortunately, nursing home facilities that provide this type of skilled care are generally located great distances from tribal lands, forcing Al/AN elders to leave their families and homes to receive the care they need. These facilities also often lack culturally sensitive tools and protocols to use when working with elder Al/ANs and their families. Combined, these factors contribute to high rates of elder loneliness, alienation, and isolation, especially if the elder does not speak English.⁴

Many tribes are working to keep their elders at home through the development of long-term care facilities that benefit their community by keeping elders in the community. Currently more than a dozen of these nursing home facilities (NHFs) are operating in Indian Country, all of which are Medicaid- or Medicare-certified. The Medicare Nursing Home Compare (MNHC) website⁵ lists each tribally operated nursing home, and provides stakeholders with the ability to review how NHFs meet regulations to provide care to the community. Additionally, the Nursing Home Education Collaborative—a newly established platform for tribal nursing homes—aims to develop best practices and build nationwide links between identified stakeholders to assist these NHFs to overcome existing barriers to care. This report provides an overview of established NHFs operating in Indian Country and highlights how the Nursing Home Education Collaborative strives to benefit tribal nursing homes moving forward.

Nursing Home Facilities in Indian Country

Currently, there are 16 established, tribally operated NHFs in the United States—10 of which have been in operation for more than 20 years. A new home in Nebraska owned by the Oglala Sioux Tribe is scheduled to open in early 2016. Table I lists each nursing home by state. Over half of the tribally operated NHFs have a bed capacity at or under 50 beds, and two NHFs (the



¹ Kauffman & Associates 2016

² Kitzes 2002; Arenella et al. 2010; Marr, Kitzes, Neale, and Wolfe 2012; Portman and Garret 2006; National Cancer Institute 2011

³ Finke, Bowannie, and Kitzes 2004; Hampton 2005; Indian Health Service 2006; Kitzes 2003; Arenella et al. 2010

⁴ Branch 2010

⁵ http://www.medicare.gov/nursinghomecompare

Choctaw Residential Center in Mississippi and the Caring House in Arizona) have a capacity of 100 or more beds. The Oglala Sioux Nursing Home in Nebraska will have 60 beds.

Two NHFs are in discussion or development phases: the Native Veterans Nursing Home in Arizona and the Edith Kassanavoid Gordon Assisted Living Center in Oklahoma. Appendix A, Tribally Operated Nursing Home Facilities, lists all of the tribally operated NHFs in Indian Country, along with detailed information about each facility.

Table I. NHFs in the United States by State

State	Nursing Home
Alaska	Utuqqanaat Inaat, Quyanna Care Center, and Yukon Kuskokwim Elder's Home
Arizona	Caring House, Chinle Nursing Home, and Archie Hendricks, Sr. Skilled Nursing Center
Minnesota	Jourdain/Perpich Extended Care Center
Mississippi	Choctaw Residential Center
Montana	Blackfeet Care Center
Nebraska	Carl T. Curtis Health Education Center, and Oglala Sioux Nursing Home
New Mexico	Laguna Rainbow Nursing Facility
North Carolina	Tsali Care Center
South Dakota	White River Health Care Center
Washington	Colville Tribal Convalescent Center
Wisconsin	Anna John Resident Centered Care Community
Wyoming	Morning Star Care Center

Medicare Nursing Home Compare

In 2008, the Centers for Medicare & Medicaid Services (CMS) developed the MNHC website to provide nursing home comparisons for the public. The MNHC website only lists NHFs that are Medicare- or Medicaid-certified and provide skilled care, such as nursing, physical therapy, occupational therapy, and speech therapy.

The comparisons are based on CMS' Five-Star Nursing Home Quality Rating System. The rating system "assigns each nursing home an overall rating and three component ratings for health inspections, staffing, and quality measures, based on the extent to which the nursing home meets CMS' quality standards and other measures." Each rating can range from one to



⁶ U.S. Government Accountability Office 2012, p. 1

five stars, five stars indicating a high quality of care and three indicating "average" quality of care. Each nursing home identified on the MNHC has an overall rating, lists penalties within the past 3 years, and provides a rating per the following categories:

- Health and fire-safety inspections are annual inspections conducted by the state to ensure NHFs meet Congressional requirements on measures of nutrition and diet, pharmacy services, and resident rights, to name a few;
- The NHF staffing category assesses the number of NHF staff (registered nurse, licensed practical nurse, certified nursing assistant, and physical therapist) and the amount of staff availability (measured in hours) per NHF resident;
- Quality measures that analyze the Minimum Data Set (MDS), an annual assessment completed by NHFs detailing residents' health, physical functioning, mental statuses, and general well-being.

The MNHC includes the 16 tribally operated nursing homes. Appendix B, NHF Five-Star Rating Summary Table, summarizes the ratings for each tribally operated NHF, finding that:

- Four NHFs received a four-star overall rating, showing an increase of two NHFs that received four-star ratings last year,
- One NHF received a three-star overall rating,
- · Eight NHFs received two-star overall rating, and
- Three NHFs received one-star overall ratings.

In the Staffing category, 13 NHFs rate at or above average, with 4 NHFs receiving five stars. In the Health & Fire Safety Inspections and Quality Measures categories, three of the NHFs rated average. Eight NHFs scored at or above average for Quality Measures, with three NHFs receiving a five-star rating. Eight NHFs listed penalties, with two homes receiving penalties during 2015.8

⁸ According to the Medicare.gov Nursing Home Compare website, "penalties may be imposed on a nursing home when a serious deficiency is cited or if the nursing home fails to correct a deficiency for a long period of time." The nature of penalties is not provided.



⁷ The MNHC website notes that nursing home profile data comes from annual comprehensive inspections plus the previous 3 years' complaint investigations, with comparisons to state and national averages for each category. Specifically, the data comes from CMS' Health Inspection Database and the MDS. CMS' Health Inspection database includes annual state NHF inspections and complaint investigations. The MDS assessment is completed by each Medicare- or Medicaid-certified NHF for each resident to aid the NHF's development of individual care plans for residents. The MNHC website notes that NHFs provide all of the data, and that "nursing home inspectors review it, but don't formally check it to ensure accuracy."

Tribal Nursing Home Education Collaborative

Background

The Tribal Nursing Home Education Collaborative (the Collaborative) is a platform for tribal nursing homes to establish best practices and to build nationwide links between identified stakeholders. The Collaborative provides an opportunity for tribal nursing homes to network, discuss best practices, promote evidence-based education, and provide trainings and quality assurance interventions and linkages. Tribal nursing homes work together toward a common goal of providing culturally appropriate care to the most valued population of Native elders and the disabled. These nursing homes provide excellent care and serve as community facilities to care for aging tribal members, delivering cultural assistance unavailable elsewhere. Kay Branch from the Alaska Native Tribal Health Consortium and Debbie Dyjak from the Archie Hendricks Senior Skilled Nursing Facility in Arizona formally organized the Collaborative in October 2015, with an inaugural meeting in Phoenix, AZ. The meeting hosted 25 attendees from tribal nursing homes across Indian Country. Attendees discussed the development of a planning document and next steps, focusing on the following areas:

- Workforce development
- Education
- Advocacy
- Funding opportunities
- Communication
- Regulatory relief

The Collaborative meets on a monthly basis, and has an identified steering committee. The Collaborative has a strong network that includes:

- Tribal nursing home administrators, nursing leadership, and board members
- Tribal assisted living facilities
- Cultural experts
- Banner Alzheimer's Institute
- University of Arizona's Geriatric Workforce Enhancement Program
- Federal programs like Quality Improvement Organizations, Administration on Community Living, Indian Health Service, and CMS

The Collaborative Progress

In 2010, Branch conducted a survey of tribal nursing homes to identify NHF service funding sources and services. Building from the first survey, Branch and Dyjak conducted a second survey in 2015. The results from the 2015 survey identified tribal nursing home successes, such as policy and staff development and dementia training provision. The survey also identified some nursing home challenges, such as a lack of understanding by regulators, money and



financing, and staff transportation. Nursing homes also identified training needs for staff that included quality assurance, particularly with the introduction of the new Quality Assurance and Performance Improvement process, career advancement for staff, customer service, and approaches to residents.⁹

In May and July 2015, Branch and Dyjak facilitated a two-part webinar series as part of CMS' long-term services and supports monthly webinar program. ¹⁰ Each webinar focused on the challenges and best practices of tribal nursing homes. Six nursing homes participated in the webinar series: Utuqqanaat Inaat (Alaska), Yukon Kuskokwim Elder's Home (Alaska), Archie Hendricks, Sr. Skilled Nursing Center (Arizona), Chinle Nursing Home (Arizona), Carl T. Curtis Health Education Center (Nebraska), and Morning Star Care Center (Wyoming). A second, two-part webinar series is scheduled for 2016.

In addition, the Collaborative is scheduled to present its ideas and practices on serving traditional foods in tribal nursing homes to the National Congress of American Indians and the National Indian Council on Aging in 2016.

The Collaborative offers a forum for stakeholders to communicate, collaborate, and educate each other and the public about the challenges facing tribal nursing homes and the innovative solutions developed to overcome them. Dyjak and Mellisa Heflin (from the Alaska Native Tribal Health Consortium) are co-leading the Collaborative with the vision that Native elders will receive the best possible care in an environment that honors their culture, language, autonomy, and—ultimately—their health and well-being.

Nursing Home Facility Support and Development

Operation of a nursing home facility is a financially challenging endeavor, and obtaining the necessary certifications has been a long-standing barrier to tribal communities in the development of health care services and facilities culturally and financially. Thirteen of the tribally operated NHFs have existed for more than 10 years. Tracking changes that occur with each tribal NHF is important to understand how existing NHFs meet regulations while creating an environment that fits the needs of its community's elders. The induction of the Collaborative is an opportunity for existing NHFs to directly communicate with each other and establish best practices. These efforts help NHFs overcome existing barriers for tribes looking to keep elders in the community.

 $^{{}^{10}\,\}underline{\text{https://www.cms.gov/Outreach-and-Education/American-Indian-Alaska-Native/AIAN/LTSS-Technical-Assistance-Center/Webinars.html}$



⁹ Branch and Dyjak 2016

Appendix A

Tribally Operated Nursing Home Facilities

An asterisk (*) indicates NHFs that are in discussion and development phases

Alaskan Region

Tribal Affiliation	NHF Name and Address	Contact	Beds, Year Opened
Maniilaq	Utuqqanaat Inaat	Valdeko Ivan Kreil, Administrator	18 beds,
Association	436 Mission St.	valdeko.kreil@maniilaq.org	2011
	PO Box 510	P: (907) 442-3321	
	Kotzebue, AK 99752	F: (907) 442-7250	
Norton Sound	Quyanna Care Center	Angela Gorn, Administrator	18 beds,
Health Corporation	1100 Greg Kruschek Ave.	agorn@nshcorp.org	1988
	PO Box 966	P: (907) 443-3357	
	Nome, AK 99762	F: (907) 443-3368	
Yukon Kuskokwim	Yukon Kuskokwim Elder's	Gerald Hodges, Administrator	18 beds,
Health Corporation	Home	gerald_hodges@ykhc.org	2013
	1100 Chief Eddie Hoffman Hwy.	P: (907) 543-6782	
	PO Box 528	F: (907) 543-6780	
	Bethel, AK 99559		

Northwestern Region

	Tribal Affiliation	NHF Name and Address	Contact	Beds, Year Opened
I	Blackfeet Nation	Blackfeet Care Center	Martha Spotted Eagle, Administrator	47 beds,
ı		728 S. Government Sq.	mytanagirl@yahoo.com	1970
ı		PO Box 728	P: (406) 338-2686	
		Browning, MT 59417	F: (406) 338-7779	



Tribal Affiliation	NHF Name and Address	Contact	Beds, Year Opened
Confederated Tribes	Colville Tribal Convalescent	Glenda Whitelaw, Administrator	44 beds,
of the Colville	Center	glenda.whitelaw@colvilletribes.com	1981
Reservation	1 Convalescent Center Blvd.	P: (509) 634-2878	
	PO Box 150	F: (509) 634-2889	
	Nespelem, WA 99155		
Shoshone Tribe of	Morning Star Care Center	Cathy Keene, Director	45 beds,
the Wind River	4 N. Fork Rd.	Tribal Health Programs	1980
Reservation	PO Box 859	esth.director@gmail.com	
	Fort Washakie, WY 82514	P: (307) 332-6902	
		F: (307) 332-4279	

Southwestern Region

Tribal Affiliation	NHF Name and Address	Contact	Beds, Year Opened
Gila River Indian	Caring House	Christopher Daroczy, Administrator	100
Community	510 S. Ocotillo Dr.	cdaroczy@gricc.org	beds,
	Sacaton, AZ 85147	P: (520) 562-7400	1992
		F: (520) 562-7406	
Navajo Nation	Chinle Nursing Home	Wayne Claw, CEO	79 beds,
	5755 E. Main St.	wynclaw@yahoo.com	1968
	PO Box 910	P: (928) 674-5216	
	Chinle, AZ 86503	F: (928) 674-5218	
Navajo Nation	Native Veterans Nursing	NA	NA
	Home*		
	Chinle, AZ		





Midwestern Region

Tribal Affiliation	NHF Name and Address	Contact	Beds, Year Opened
Comanche Nation	Edith Kassanavoid Gordon Assisted Living Center* Lawton, OK	NA	NA
Red Lake Band of Chippewa Indians	Jourdain/ Perpich Extended Care Center 24856 Hospital Dr. PO Box 399 Red Lake, MN 56671	Gary Hjelmstad, Interim Administrator P: (218) 679-3400 F: (218) 679-3434	47 beds, 1984
Omaha Tribe of Nebraska	Carl T. Curtis Health Education Center 100 Indian Hills Dr. PO Box 250 Macy, NE 68039	Kourtney Williams, Administrator Kourtney.Williams@ihs.gov P: (402) 837-5381 F: (406) 837-4216	25 beds, NA
Oglala Sioux Tribe	Oglala Sioux Nursing Home Whiteclay, NE	NA	60 beds, <i>Open</i> 2016



Tribal Affiliation	NHF Name and Address	Contact	Beds, Year Opened
Rosebud Sioux Tribe	White River Health Care Center 515 E 8Th St. PO Box 310 White River, SD 57579	Carol Gregg, Administrator wrhccbus@goldenwest.net P: (605) 259-3161 F: (605) 259-3106	52 beds, 1974
Oneida Nation	Anna John Resident Centered Care Community 2901 S. Overland Rd. PO Box 365 Oneida, WI 54155	David Larson, Administrator dlarson@oneidanation.org P: (920) 869-2797 F: (920) 869-3238	48 beds, 1978

Eastern Region

Tribal Affiliation	NHF Name and Address	Contact	Beds, Year Opened
Mississippi Band of	Choctaw Residential Center	Wendy Moran, Administrator	120
Choctaw Indians	135 Hospital Cir.	wendymoran.crc11@yahoo.com	beds,
	Philadelphia, MS 39350	P: (601) 656-2582	1987
		F: (601) 656-0670	
Eastern Band of	Tsali Care Center	David Hunt, Administrator	72 beds,
Cherokee Indians	55 Echota Church Rd.	davihunt@nc-cherokee.com	1995
	Cherokee, NC 28719	P: (828) 554-6506	
		F: (828) 497-5347	



Appendix B

NHF Five-Star Rating Summary Table

NHF Name	Will Tive Star Nating Sammary Table										
Quyanna Care Center (AK) 3 4 2 3 5 5 2 2 1 1 Yukon Kuskokwim Elder's Home (AK) 2 2 1 1 5 5 NA 3 1 2 Blackfeet Care Center (MT) 3 2 2 1 5 4 3 3 0 1 Colville Tribal Convalescent Center (WA) 1 2 1 2 3 2 4 3 0 1 Center (WA) 1 1 1 1 1 3 3 3 0 2 Morning Star Care Center (WA) 1 1 1 1 1 1 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 1 2 2 3 4 3 3 2 3 </th <th>NHF Name</th> <th>Overall Rating 2015</th> <th>Overall Rating 2016</th> <th>Health & Fire Safety Inspections 2015</th> <th>Health & Fire Safety Inspections 2016</th> <th>Staffing 2015</th> <th>Staffing 2016</th> <th>Quality Measures 2015</th> <th>Quality Measures 2016</th> <th>Penalties (Actual #) 2015</th> <th>Penalties (Actual #) 2016</th>	NHF Name	Overall Rating 2015	Overall Rating 2016	Health & Fire Safety Inspections 2015	Health & Fire Safety Inspections 2016	Staffing 2015	Staffing 2016	Quality Measures 2015	Quality Measures 2016	Penalties (Actual #) 2015	Penalties (Actual #) 2016
Yukon Kuskokwim Elder's Home (AK) 2 2 1 1 5 5 NA 3 1 2 Blackfeet Care Center (MT) 3 2 2 1 5 4 3 3 0 1 Colville Tribal Convalescent Center (WA) 1 2 1 2 3 2 4 3 0 1 Morning Star Care Center (WA) 1 1 1 1 3 3 3 3 0 0 Caring House (AZ) 1 2 1 1 5 4 1 2 0 1 Chinle Nursing Home (AZ) 1 2 1 1 3 4 3 2 1 2 Archie Hendricks, Sr. Skilled Nursing Center (AZ) 4 4 2 2 5 4 5 5 0 0 Laguna Rainbow Nursing Facility (NM) 3 4 2 0 3 4 5 5 0	Utuqqanaat Inaat (AK)	3	2	2	2	5	5	2	1	2	2
Home (AK) 2 2 1 1 5 5 NA 3 1 2	Quyanna Care Center (AK)	3	4	2	3	5	5	2	2	1	1
Colville Tribal Convalescent Center (WA)		2	2	1	1	5	5	NA	3	1	2
Center (WA) 1 2 1 2 3 2 4 3 0 2 Morning Star Care Center (WY) 1 1 1 1 1 1 3 3 3 3 0 0 Caring House (AZ) 1 2 1 1 5 4 1 2 0 1 Chinle Nursing Home (AZ) 1 2 1 1 3 4 3 2 1 2 Archie Hendricks, Sr. Skilled Nursing Genter (AZ) 4 4 2 2 5 4 5 5 0 0 Laguna Rainbow Nursing Facility (NM) 3 4 2 0 3 4 5 5 0 0 Jourdain/Perpich Extended Care Center (MN) 1 1 1 1 4 2 1 1 0 2 Carl T. Curtis Health Education Center (NE) 3 3 2 3 5 2 2	Blackfeet Care Center (MT)	3	2	2	1	5	4	3	3	0	1
(WY) 1 1 1 1 1 1 3 3 3 3 0 0 Caring House (AZ) 1 2 1 1 5 4 1 2 0 1 Chinle Nursing Home (AZ) 1 2 1 1 3 4 3 2 1 2 Archie Hendricks, Sr. Skilled Nursing Facility (NM) 4 4 2 2 5 4 5 5 0 0 Laguna Rainbow Nursing Facility (NM) 3 4 2 0 3 4 5 5 0 0 Jourdain/Perpich Extended Care Center (MN) 1 1 1 1 4 2 1 1 0 2 Carl T. Curtis Health Education Center (NE) 3 3 2 3 5 2 2 2 0 0 White River Health Care Center (SD) 2 1 1 1 3 3 4 4 2 3 0 0 Anna John Resident Center (MS) 2		1	2	1	2	3	2	4	3	0	2
Chinle Nursing Home (AZ) 1 2 1 1 3 4 3 2 1 2 Archie Hendricks, Sr. Skilled Nursing Center (AZ) 4 4 2 2 5 4 5 5 0 0 Laguna Rainbow Nursing Facility (NM) 3 4 2 0 3 4 5 5 0 0 Jourdain/Perpich Extended Care Center (MN) 1 1 1 1 4 2 1 1 0 2 Carl T. Curtis Health Education Center (NE) 3 3 2 3 5 2 2 2 0 0 White River Health Care Center (SD) 2 1 1 1 3 1 5 4 0 0 Anna John Resident Center Community (WI) 4 4 3 3 4 4 2 3 0 0 Choctaw Residential Center (MS) 2 2 3 2 3 4 1<	<u> </u>	1	1	1	1	3	3	3	3	0	0
Archie Hendricks, Sr. Skilled Nursing Center (AZ) 4 4 2 2 5 4 5 5 0 0 Laguna Rainbow Nursing Facility (NM) 3 4 2 0 3 4 5 5 0 0 Jourdain/Perpich Extended Care Center (MN) 1 1 1 1 4 2 1 1 0 2 Carl T. Curtis Health Education Center (NE) 3 3 2 3 5 2 2 2 0 0 White River Health Care Center (SD) 2 1 1 1 3 1 5 4 0 0 Anna John Resident Centered Care Community (WI) 4 4 3 3 4 4 2 3 0 0 Choctaw Residential Center (MS) 2 2 3 2 3 4 1 1 0 0	Caring House (AZ)	1	2	1	1	5	4	1	2	0	1
Nursing Center (AZ) 4 4 2 2 5 4 5 5 0 0 Laguna Rainbow Nursing Facility (NM) 3 4 2 0 3 4 5 5 0 0 Jourdain/Perpich Extended Care Center (MN) 1 1 1 1 4 2 1 1 0 2 Carl T. Curtis Health Education Center (NE) 3 3 2 3 5 2 2 2 0 0 White River Health Care Center (SD) 2 1 1 1 3 1 5 4 0 0 Anna John Resident Centered Care Community (WI) 4 4 3 3 4 4 2 3 0 0 Choctaw Residential Center (MS) 2 2 3 2 3 4 1 1 0 0	Chinle Nursing Home (AZ)	1	2	1	1	3	4	3	2	1	2
Facility (NM) Jourdain/Perpich Extended Care Center (MN) Carl T. Curtis Health Education Center (NE) White River Health Care Center (SD) Anna John Resident Centered Care Community (WI) Choctaw Residential Center (MS) 3 4 2 0 3 4 5 5 0 0 A 1 1 1 1 4 2 1 1 1 0 2 2 2 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		4	4	2	2	5	4	5	5	0	0
Care Center (MN) 1 1 1 1 4 2 1 1 0 2 Carl T. Curtis Health Education Center (NE) 3 3 2 3 5 2 2 2 0 0 White River Health Care Center (SD) 2 1 1 1 3 1 5 4 0 0 Anna John Resident Centered Care Community (WI) 4 4 3 3 4 4 2 3 0 0 Choctaw Residential Center (MS) 2 2 3 2 3 4 1 1 0 0		3	4	2	0	3	4	5	5	0	0
Education Center (NE) 3 3 2 3 5 2 2 2 0 0 White River Health Care Center (SD) 2 1 1 1 3 1 5 4 0 0 Anna John Resident Centered Care Community (WI) 4 4 3 3 4 4 2 3 0 0 Choctaw Residential Center (MS) 2 2 3 2 3 4 1 1 0 0	· ·	1	1	1	1	4	2	1	1	0	2
Center (SD) 2 1 1 1 3 1 5 4 0 0 Anna John Resident Centered Care Community 4 4 3 3 4 4 2 3 0 0 (WI) Choctaw Residential Center (MS) 2 2 3 2 3 4 1 1 0 0		3	3	2	3	5	2	2	2	0	0
Centered Care Community (WI) 4 4 3 3 4 4 2 3 0 0 Choctaw Residential Center (MS) 2 2 3 2 3 4 1 1 0 0		2	1	1	1	3	1	5	4	0	0
(MS) 2 2 3 2 3 4 1 1 0 0	Centered Care Community	4	4	3	3	4	4	2	3	0	0
Tsali Care Center (NC) 2 2 1 1 5 5 3 4 0 0		2	2	3	2	3	4	1	1	0	0
	Tsali Care Center (NC)	2	2	1	1	5	5	3	4	0	0



References

- Arenella, C., Domer, T., Finke, B., Kaur, J., Merriman, M. P., & Ousley, A. (2010). Adaptation, dissemination, and evaluation of a cancer palliative care cirriculum for the Indian health system. *Journal of Palliative Care*, *26*(1), 15-21.
- Branch, K. (2010, November 1). Tribal long-term care programs: on the ground. *Indian Health Service Long-Term Care in Indian Country: New Opportunties and New Ideas Conference*. Washington, DC.
- Branch, K., & Dyjak, D. (2016). Tribal Nursing Homes: Best Practices and Challenges, Part 2.
 CMS LTSS Webinars. Retrieved from https://www.cms.gov/Outreach-and-Education/American-Indian-Alaska-Native/AIAN/LTSS-Technical-Assistance-Center/Webinars.html
- Finke, B., Bowannie, T., & Kitzes, J. (2004). Palliative care in the Pueblo of Zuni. *Journal of Palliative Medicine*, 7(1), 135-143.
- Hampton, J. (2005). End-of-life issues for American Indians: a commentary. *Journal of Cancer Education*, *20*(1 Suppl.), 37-40.
- Indian Health Service. (2006). *Guidelines for Palliative Care Services in the Indian Health System.* Retrieved September 15, 2014, from http://www.uaa.alaska.edu/elders/upload/ihs_palliative-care-services.pdf
- Kauffman & Associates, I. (Director). (2016). Long-term Services & Supports: A Gathering of Tribal Leaders [Motion Picture]. Retrieved February 12, 2016, from https://www.youtube.com/watch?v=vsN 07YxlYo
- Kitzes, J. (2002). Guidelines for discussing palliative care and end-of-life planning in American Indian/Alaska Native Communities. *IHS Provider*, *27*(5), 89-92.
- Kitzes, J. (2003). Palliative care: an emerging issue for American Indians and Alaska Natives. *The Journal of Palliative Care Pharmacotherapy, 17*(3-4), 201-210.
- Marr, L., Kitzes, J., Neale, D., & Wolfe, V. (2012). Confronting myths: The Native American experience in an academic inpatient palliative care. *Journal of Palliative Medicine*, *15*(1), 71-76. doi:10.1089/jpm.2011.0197
- McDonald, F., Allery, A., Ludtke, R., & McDonald, L. (2005). *Native American Map for Elder Services (NAMES): A Long-term Care Planning Tool Kit.* National Resource Center on Native American Aging, Center for Rural Health, University of North Dakota School of Medicine and Health Services.



- National Cancer Institute. (2011). *A Look at End-of-Life Issues for Native Americans*. Retrieved 2014, from http://www.cancer.gov/cancertopics/disparities/lifelines/2011/palliative-care-ai.pdf
- National Resource Center on Native American Aging. (2002). Functional Limitations and the Future Needs for Long Term Care. Retrieved March 10, 2015, from http://ruralhealth.und.edu/projects/nrcnaa/pdf/02-1.pdf
- Portman, T., & Garrett, M. (2006). Native American healing traditions. *International Journal of Disability, Development, and Education, 53*(4), 453-469. doi:10.1080/10349120601008647
- United States Government Accountability Office. (2012). CMS needs milestones and timelines to ensure goals for the five-star quality rating system are met. Retrieved March 10, 2015, from http://www.gao.gov/assets/590/589564.pdf

