



The Eastern Shoshone's Implementation of the Chronic Care Model: Our Evolution, Lessons Learned, and Our Future

National Indian Health Board
Public Health Summit

Catherine Keene, Executive Director Health Programs; Kellie Webb, Deputy Director
Shoshone Recovery; Elizabeth Shield, Supervisor. RN/Care Manager;
Naomi Harris, Chronic Disease Navigator

Introductions

LET'S GET MOVING

Learning Objectives

- Learn about the success the redesigning of the tribal health programs has done to improve outcomes in chronic disease and substance abuse.
- Learn about opportunities to collaborate with local, state, universities, and federal agencies and how lessons learned have improved the quality of life for community members.
- Learn about how the tribal health programs have implemented the chronic care model into their community

Wind River Morbidity and Mortality

- 32% on diabetic registry had HbA_{1c} > 9.0
- 67% > HbA_{1c} > 7.0
- 12% of population with diagnosed diabetes
- Average lifespan is 51 years of age
- Average lifespan with substance abuse is 39 years of age
- 50% of population smoke

Identifying our needs

- Focus Groups and interviews
 - Inadequate knowledge of Tribal members at-risk or diagnosed
 - Lack of training for tribal health, and lay health educator staff
 - Inadequate resources at IHS
 - Health care was IHS driven
 - Cultural differences and ineffective communication between tribal members and non-Indian providers
 - “Silos” of care

What is the ESTH Chronic Disease Model?

- An organizational approach to improving care for people with chronic disease through involvement of the community, health system, and patients in a collaboration that provides support, information, and education, and health care
- Our version of the The Indian Health Service’s Improved Patient Care model (IPC)

Structure – Identify Core Cultural Values

- Relationship
- Respect
- Responsibility
- Reciprocity

Structure – Identify Core Cultural Values

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| <ul style="list-style-type: none"> ▪ <u>Core Cultural Value</u> ▪ RESPONSIBILITY-
Quality of being responsible, accountability, trustworthiness ▪ Each person has gifts, talents and something to contribute to group, family and community | <p><u>Reinforced in Group</u></p> <ul style="list-style-type: none"> ▪ MODEL HEALTHY BEHAVIOR- ▪ Expectation of ES staff is to model healthy behaviors: respectful, boundaries, acceptance, and helpful attitude |
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Structure – Identify Core Cultural Values

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| <ul style="list-style-type: none"> ▪ <u>Core Cultural Value</u> ▪ RESPECT- An act of giving particular consideration, a high regard ▪ Each person's medicine is given value | <p><u>Reinforced in Group</u></p> <ul style="list-style-type: none"> ▪ SPEAKING THE TRUTH ▪ Honesty , Worthiness ▪ Restoring to original state of being- dignity. |
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Structure – Identify Core Cultural Values

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| <ul style="list-style-type: none"> ▪ <u>Core Cultural Value</u> ▪ RELATIONSHIP- Binding participants in an interrelated relationship, KINSHIP ▪ Interrelated ▪ Build on friendships, relationships, empathy for another human being. | <p><u>Reinforced in Group</u></p> <ul style="list-style-type: none"> ▪ HEALING HAPPENS IN RELATIONSHIP ▪ ES has emphasis on group processing. Isolation is a detriment to individuals growth. ▪ Solitude is good- Isolation, not so much. |
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Structure – Identify Core Cultural Values

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| <ul style="list-style-type: none"> ▪ <u>Core Cultural Value</u> ▪ RECIPROCITY- A shared, felt social Exchange ▪ Sharing of participants is an expectation within the group process, even if only being present is what they share that day | <p><u>Reinforced in Group</u></p> <ul style="list-style-type: none"> • LAUGHTER IS MEDICINE- ▪ Shared within the group. Each individual's sense of self is allowed • Seriousness is not a requirement of participants. |
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The Wind River Projects (#1)

- 5 year program funded by the Merck Foundation's Alliance for Reducing Diabetes Disparities (2009)
- Purpose- create and support a comprehensive community health system partnership to improve outcomes with diabetes and reduce health disparities
- Development of two interventions
 - Diabetes self management education (DSME)
 - Diabetes prevention

Wind River Project Goals #1

- Create and effective community coalition
- Developing and implementing community based educational and support services at risk
- Implementing Strategies for recruitment, retention, and follow-up to assist tribal members to make lifestyle changes
- Getting clinician buy-in and engagement

What we needed to do

- Train CHR – lay health educators to provide DSME that incorporated cultural components and recognition of significant challenges to healthy lifestyles facing our community
- Focused on providing a physical activity and nutrition education program for those with diabetes and pre-diabetes to delay onset

DSME and Pre-diabetes Intervention

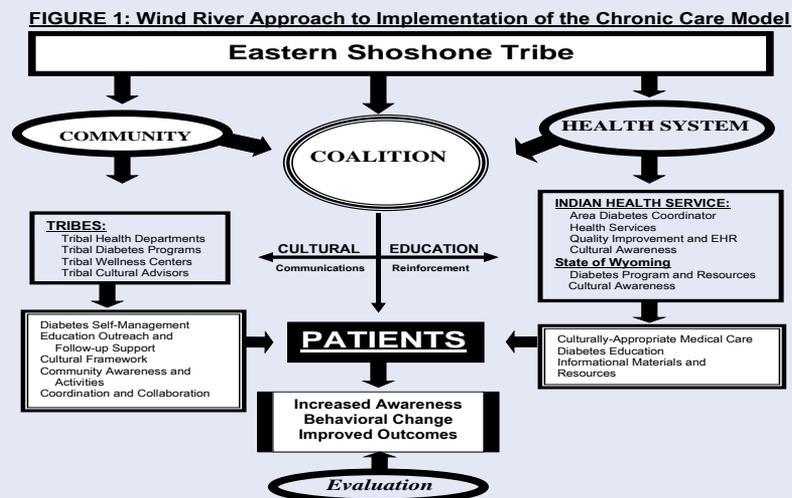
- DSME curriculum – 10 weekly sessions
 - Initial, lessons learned, adaptation
- DSME recruitment
- Prediabetes Intervention
 - Group Lifestyle Balance – University of Pittsburgh, Diabetes Prevention support Center
 - Incorporated into 12 weekly sessions
- DSME Follow-up

Creating a Community-based System of Care

- Improve coordination and collaboration among Tribal and other organizations that provide resources
 - Creation of the Wind River Coalition for Diabetes Mgnt and Prevention
 - Representatives from each Tribe, IHS, county Public Health, Wyo. Dept of Health

The Wind River Projects (#2)

- Introduction of a recovery oriented system of care (with Access to Recovery funding)
 - Collaboration with MT-WY Tribal Leaders
- Traditional cultural practices gained recognition at the same level of western practices
- WE RAN WITH IT
- Development of the STEP program and now with University of Washington



LET'S GET MOVING

What is Lifestyle Balance?

- Individuals taking control of their health
- Empowering individuals
- Team effort between providers, community, and individually
- Education about your health and desired outcome
- Educate on proper nutrition and the role of being active
- Holistic approach

Lifestyle Balance Curriculum

12+ week course:

Requires medical clearance before and follow up after graduation

- ✓ understand the importance of how food choices affect daily living
 - ✓ Value of food
 - ✓ Smart shopping
- ✓ learn about proper body mechanics and incorporating exercise into their daily lives.
 - ✓ Within 12 week program, experience a 7% reduction in weight

What does a general week look like

- Meet twice a week;
 - 1st day is data collection and group education and group activity
 - 2nd day is group activity
- Each week a different group education and may include providers
- Activities progress and are individualized

What does a week look like?

- In week 7, participants increase activity to 3 times/week
- Individuals are case managed depending upon needs
- Case Mgmt continues several weeks after graduation
- Every 3 months after graduation, follow-up continues for up to one year

LSB Week 7

- Welcome to your half way point
- Demonstration "Problem Solving"

What we learned over last 6 years

- What are our strongest successes
 - Comes from the community
 - Clients reducing or eliminating medication
 - Leadership development
 - Changes in family lifestyle
 - Our solutions lie within ourselves
- Before and After successes
 - Photos and individual/team success















Evaluation

Track: Client participation, weight loss, inches lost, personal testimonies, & follow-up lab work are reported

Prior to 2007 - 32% HbA1c > 9.0

By 2012 – 28% HbA1c > 9.0

47% of participants achieved reductions in HbA1c by 1.12 points

HbA1c >12, reduced by 3.0 points

Evaluation

- By end of year 4, 25% of tribal members with diabetes participated in LSB and DSME
- Changing the format, recovery efforts engagement of the client lasted longer with better outcomes
- STEP brought back self confidence and positive contribution to the community

Evolution of LSB at Wind River

- Adapted programming for women diagnosed with or had breast cancer
 - Nutrition and activity
- Adapted programming for a pilot for home gardening
 - Reductions in stress
 - Increase in activity
 - Reductions in HbA1c
 - Future possibilities - NIH

Evolution of LSB at Wind River

- Adapted programing for those at risk or have cardiovascular disease
 - Astra Zeneca Healthcare Foundation
- Creating a community of wellness
- Youth and Men's Wellness
 - University of Michigan – Men's Wellness
 - Collaborating with UNITY and ESCAPE
 - Eastern Shoshone Cross Age Peer Education
 - Prevention of Teen Pregnancy

Evolution of LSB and Recovery at Wind River

- Biggest success is the support received by the State of WY to initiate an "uncompensated care" demonstration project through CMS
 - Bring in needed resources to capture data and programming and capacity to:

Future of LSB at Wind River

- Adapting programming for Substance and Alcohol abuse
 - University of Washington funding
 - Rocky Mtn Epidemiology funding
- Adapting programming to decrease teen pregnancy
 - Office of Adolescent Health
- Adapting programming to decrease chronic disease overall and improve the quality of life

How has Tribal Health changed?

- ESTH staff are all certified nursing assistants
- ESR staff are all certified
- Adding program staff to meet identified needs
- LSB is our program
- We are a strong health-care entity
- Home visits
- Needs assessment
- IHS is a partner
- Leading our future

**A COMPREHENSIVE STRATEGY FOR
PREVENTION AND MANAGEMENT OF
DIABETES FOR AMERICAN INDIANS**

**Guide for Replication of the Wind River
Reservation Alliance for Reducing Diabetes
Disparities Project**



P.O. Box 536
Fort Washakie, WY 82514

and

Sundance Research Institute
P.O. Box 874
Sundance, WY 82729

Questions?

Contact information:

Eastern Shoshone Tribal Health/Shoshone
Recovery

PO Box 250

Fort Washakie, WY 82514

307-332-6805, 307-332-2203

www.esthealth.org

Publications:

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