



6. **Counties Impacted:**     Antrim                     Benzie                    Charlevoix  
    Grand Traverse     Leelanau                Manistee

7. **Brief Description** (purpose of funding); include statement of need:

The Grand Traverse Pavilions provides Short-Term and Long-Term Skilled Care to more than 240 aging adult “Residents” acknowledging the Pavilions is their “home” during their stay. Of this population, the number of residents on dialysis fluctuates at any given time based on the severity of medical conditions and the admission of new short-term or long-term residents.

Hemodialysis is a long and tiresome procedure for any patient who is required to undergo this treatment in order to simply live. For those that need this life saving treatment the procedure can be time consuming and exhausting. In the elderly the consequences of this procedure can become magnified, often with complications and unfortunate negative health outcomes. “The quality of life in elderly with renal failure becomes a very relevant clinical problem in everyday clinical practice” (Sladoje-Martinovic, Mikolasevic, Bubic, Racki, & Orlic, 2014, p. 694). The availability of treatment at our local community dialysis center is, at times, over capacity, leaving only excessively early morning or late night treatment times available. Emergency or “acute” dialysis treatments are conducted at the hospital.

The sad reality is that some of our communities most frail and/or elderly are being forced out into the harsh Northern Michigan elements, or required to make an exhausting 6 hour round trip to Grand Rapids, to receive care because local dialysis resources are often un-available. For this reason, the Grand Traverse Pavilions is looking to partner with a Home Dialysis provider at our facility by establishing a “Dialysis Den” exclusively for our residents. By December 1, 2019, the Pavilions anticipates a fully operational daily home hemodialysis (Dialysis Den) available to our residents, providing in house hemodialysis within our facility. Once the program is fully operational, we will be able, as a facility, to monitor and gather data related to the outcomes of providing hemodialysis in house. At that time, the facility would be able to decrease necessary transportation by at least thirty (30) trips per week, thereby freeing up staff to tend to other patient care duties.

Funds provided by the Tribal Council Allocation would be utilized specifically to provide an additional dialysis station in 2020, which could accommodate up to five additional treatments per day.

8. **This question only pertains to Public School Systems. If you are not a Public School system, skip to question 9.**

- (a) **Program formula: (1) \$5,000. Per school + (\$1,000 x # of GTB member students) = allocation.**

**Please note: 1) In completing this section, only provide the student numbers of currently enrolled GTB members; do not include the general Native American data of your school system; and 2) there will be a cap of \$100,000 per school, based on the school’s GTB membership count.**

(b) Recommendation from Parent Committee: \_\_\_\_\_ YES \_\_\_\_\_ NO

(c) Describe parent involvement in project: \_\_\_\_\_

(d) Does the school receive Title IX Indian Education Funds? \_\_\_\_\_ YES \_\_\_\_\_ NO  
If yes, how much: \_\_\_\_\_

9. What are the start and completion dates of the proposed project?

Start February 2020 Completion: Services would be ongoing

10. Has applicant received prior awards through the Tribe's 2% funding allocation?

X YES \_\_\_\_\_ NO. If yes, please list the start and end dates and amount:

August, 2010 – October, 2010 Amount: \$6,000

11. Are all of the previous allocations expended? X YES \_\_\_\_\_ NO.

If no, what are the start and end dates and amounts:

12. Is the proposed project new X or a continuation project \_\_\_\_\_?

If this is a continuation project, please explain why there is a need to continue funding:

13. **Impact of Gaming on local program: (e.g., increase in student population, resulting from increase in Tribal employment or increase in emergency services to Casino patrons).**

Approximately one (1) in ten (10) of the population in the United States has some form of chronic kidney disease (CKD). Of those, 30.5% are ages 60-69 and 32.9% are over the age of 70 (Center for Disease Control [CDC], 2017). Elderly are at higher risk for complications and prolonged after-effects than a younger adult. The five most common after-effects of hemodialysis are low blood pressure, dry and itchy skin, nausea and vomiting, restless leg syndrome and muscle cramping (Coping With The Top Five Side Effects of Dialysis, 2017). As a result of these issues, we began to explore a better way to manage treatment for residents who require hemodialysis.

The benefits to support the Grand Traverse Pavilions establishing internal hemodialysis services go well beyond the immediate benefits to our long term skilled nursing residents and rehabilitation (short-term) patients. We acknowledge that by removing the estimated 126 hours per week of dialysis services, for Pavilions residents/patients currently provided at the community Dialysis Center, would in essence make this critical service available to more members of our local community who require life-sustaining dialysis treatment. This

program could have a far-reaching impact, greatly reducing the current number of dialysis patients, and their families, that would have to travel out of the community to receive treatment.

For hospital patients needing rehab or a long-term nursing stay, the discharge planners at the hospital will have more options for patients needing dialysis. Simply put, once this program is implemented, the Pavilions would be able to accommodate more residents who require hemodialysis. Currently, many long-term care facilities are unable to admit patients who require hemodialysis due to lack of available treatment options or staffing necessary to accommodate the associated transportation to and from the service.

**14. How will the success of the project be assessed (evaluation plan)?**

This program will allow our residents to receive hemodialysis 4-5 days a week without ever having to leave their home - the Grand Traverse Pavilions facility. Hemodialysis in the aging adult population can take up to six (6) hours to complete. This does not include travel time or time spent due to complications. For most requiring long-term skilled nursing care, this time is extended by one (1) to three (3) hours, allowing time for limited mobility, staging and personal care breaks, making the process potentially a full 8 hour day. With the time spent traveling to and from the center and time to complete the treatment, the elderly usually end up exhausted with little to no appetite or energy to participate in essential rehabilitation or other general activities. It is difficult for any medical facility to admit more than a few dialysis patients who require this level of care (hemodialysis) due to transportation issues, inability to provide staff assistance for the transport, and finding availability for treatment at a local dialysis center.

Our goal is to bring dialysis service to our residents, which will enhance their daily activities and quality of life. The proposed on-site treatment will be shorter in length allowing our residents to retain energy for other daily activities. Bringing the service in house will allow our residents to have treatments daily without being excluded from social activities and standard therapy session, which are essential to their overall wellness. Travel for the elderly in the winter can be treacherous, and fall risks are a major concern for this population whose conditions are already compromised. For the facility, it will decrease transportation runs, decrease staff time needed outside the facility for transportation accompaniment. One of the greatest benefits for our residents is that they will no longer have to rise before 6 am for their appointment or return to the facility after 8 pm.

At the Pavilions, success is measured in customer satisfaction, clinical outcomes, and the quality of life we provide those who reside in our facility. One of the key indicators will be the ability of a patient to tolerate and participate in rehab activities of daily living. The data will be collected through a simple scoring process modeled after the minimum data set for self-performance in eating, bathing, dressing and mobility. The goal for this data is to show that with more frequent, less traumatic hemodialysis treatments, a patient will have enough energy to

participate in their daily care. This data will be collected over the period of 12 months initially and may continue after evaluation.

Of ultimate consideration, the recorded increase in survival rates for nursing home patients' receiving daily home hemodialysis had a median overall survival rate of 50 months (over 4 years) vs. 30 months (2.5 years) for conventional dialysis nursing home patients.

15. **If new staff is required, will preference be given to Native American applicants?**

YES  NO

As a government agency, we must maintain Equal Opportunity Employment and, therefore, are unable to give preference to any segment of the population. However, we do offer a "free" Certified Nurse Assistant (CNA) program at the Grand Traverse Pavilions. Participants that successfully complete the training are immediately offered employment at the Pavilions, and additional staff will be hired for PACE, thus making this opportunity available to anyone who is sincerely interested in serving our aging adult population.

16. **Budget:** Please attach a one-page itemization of the planned budget. Include explanation for each category of the budget.

Dialysis Den itemized budget attached.

Note: **A final report on expenditure of funds and project results will be due to the Tribal Council 30 days after project completion.**

GRAND TRAVERSE PAVILIONS  
Dialysis Den Capital Project  
11/6/2019

<u>Sources of Funds</u>	<u>Total</u>
Grand Travers Pavilion	\$ 129,000.00
G.T. Pavilions Foundation (confirmed)	\$ 20,000.00
Biederman Foundation Grant (confirmed)	\$ 25,000.00
Oleson Family Foundation (confirmed)	\$ 10,000.00
Tribal Council 2% Allocation	\$ 20,500.00
Other Grants	\$ 53,500.00
<b>Total Source of Funds</b>	<b>\$ 258,000.00</b>

<u>Uses of Funds</u>	<u>Qty.</u>	<u>Unit Cost</u>	<u>Tribal 2% Grant</u>	<u>Other</u>	<u>Total</u>
Building Renovations	1	\$ 16,500		\$ 16,500.00	\$ 16,500.00
Dialysis Machines	12	\$ 19,500	\$ 19,500.00	\$ 214,500.00	\$ 234,000.00
Dialysis Chairs	6	\$ 1,000	\$ 1,000.00	\$ 5,000.00	\$ 6,000.00
Televisions	3	\$ 500		\$ 1,500.00	\$ 1,500.00
<b>Total Use of Funds</b>			<b>\$ 20,500.00</b>	<b>\$ 237,500.00</b>	<b>\$ 258,000.00</b>

**Tribal Council Allocation of 2% Funds  
Application Form**

**PLEASE NOTE:**

Under the terms of the consent decree, which settled *Tribes v. Engler* (Case No. 1:90-CV-611, U.S. Dist. Ct., West. Dist. Mich.), the Grand Traverse Band of Ottawa and Chippewa Indians, as defined in the stipulation, has agreed to pay 2% of its video gaming revenue to local units of government (i.e., local township, village, city, county board of commissioners, public school system).

**\*ONLY APPLICATIONS FROM LOCAL UNITS OF GOVERNMENT LOCATED WITHIN  
GTB'S 6-COUNTY SERVICE AREA WILL BE CONSIDERED FOR 2% FUNDING**

1. Allocation Cycle:  JUNE - New submission date, Postmarked by MAY 31st  
 DECEMBER - New submission date, Postmarked by NOVEMBER 30th
2. Name of Applicant: Grand Traverse Veterans Affairs / Reining Liberty  
Address: 2650 LeFramier Rd  
Traverse City, MI 49684  
Phone #: 231-959-6070 Fax #: 831-929-1983  
Printed Name: Michael Roof  
• Authorized Signature: [Signature]  
(Signature of local unit of government official; e.g., county/city official, township supervisor, village president, college president, school superintendent)  
Title: Director  
E-mail address: MR00F@grandtraverse.org  
  
Printed Name of contact person: Michael Roof  
Telephone #: 231 959 6070 Fax #: 231 929 1983  
E-mail address: MR00F@grandtraversc.org
3. Type of Applicant:  
 Local Government  
 Local Court  
 Township  
 County Commissioner  
 Road Commission  
 Public School District  
 College  
 Charter School  
 Public Library  
 Sheriff/Police Department  
 Fire Department  
 501c3 applying through local unit of government (name): REINING LIBERTY RANCH





Attachment to 2% Application  
Fall 2019 – Item # 7  
Reining Liberty Ranch

Reining Liberty Ranch serves Veterans who have been diagnosed with Post Traumatic Stress Disorder (PTSD) and or Traumatic Brain Injury (TBI). These conditions can cause individuals to socially isolate from family, friends, work and the community at large with some becoming suicidal. Our Equine program and Veterans Outreach Program are designed to provide a safe, welcoming, community environment which will assist in re-integration to the community at large while having access to other Veterans at the ranch. The ranch is open to visits from Veterans every day where they can come enjoy the gardens, fire circle, horses and other small animals available to their families as well.

We are a member of the "Professional Association of Therapeutic Horsemanship, International" (PATH). We use PATH professionally certified instructors who are present in all programs involving Veterans. Therapeutic Riding (THR) has been shown to reduce the symptoms of PTSD (anxiety, emotional numbing, and flashbacks) which can make Veterans' transition back to civilian life very difficult. A study published in the Military Medical Journal on 19 January, 2018 concluded that a 3 week THR program was effective, and a 6 week program produced clinically significant outcomes in PTSD levels. There have since been multiple other studies done on the impact of equine therapy supporting the study mentioned above.

As part of our Outreach Program, we serve a weekly dinner for Veterans in a warm setting that allows for relaxation and comradery. We serve an average of 60 meals monthly on Thursday evenings. Our outreach also includes social outings such as; dinner and a movie, sporting events, fly fishing and more. Outings into the community are a key factor in developing comfort over time in social situations.

Reining Liberty is a safe place for our Veterans to gather, speak openly with each other, share their gifts and support for each other by helping new Veterans who enter our programs. Veterans also serve our community by mentoring with our "at risk youth" equine programs. We support the Veteran through programs and activities that include their entire family.

We seek to fill a gap in services by providing our programs at no cost to Veterans or their families.

8. This question only pertains to Indian Education Programs of Public School Systems. If you are not an Indian Education Program of a Public School system, skip to question 9.

(a) **Program formula: (1) \$5,000, up to \$10,000 per school district + (\$1,000, up to \$1,500 x # of GTB member students) = allocation. The increase to the formula will be determined by the previous timely 2% report received, and the data provided within the report on the success of the school's Indian Education Program as a result of the 2% allocation.**

**Please note: 1) In completing this section, only provide the student numbers of currently enrolled GTB members; do not include the general Native American data of your school system; and 2) there will be a cap of \$100,000, up to \$125,000 per school, based on the school's GTB membership count and data provided within the 2% report received from the previous year.**

(b) Recommendation from Parent Committee: \_\_\_\_\_ YES \_\_\_\_\_ NO

**Please have the Parent Committee sign the attached Certification Form.**

(c) Describe parent involvement in project: \_\_\_\_\_

(d) Does the school receive Title VII Indian Education Funds? \_\_\_\_\_ YES \_\_\_\_\_ NO  
If yes, how much: \_\_\_\_\_

9. What are the start and completion dates of the proposed project?

Start JAN, 2020 Completion Dec, 2020

10. Has applicant received prior awards through the Tribe's 2% funding allocation?

YES \_\_\_\_\_ NO. If yes, please list the start and end dates and amount:

JANUARY 2015 - DECEMBER 2015 and amounts: 9,857<sup>00</sup>

JANUARY 2019 - DECEMBER 2019 and amounts: 10,000.<sup>00</sup>

\_\_\_\_\_ and amounts: \_\_\_\_\_

11. Is the proposed project new \_\_\_\_\_ or a continuation project  \_\_\_\_\_?

If this is a continuation project, please explain why there is a need to continue funding:

Our programs have shown to be effective as evidenced by test scores, Veteran narratives and CONTINUED involvement with the ranch. Measurements show positive outcomes in both anxiety and depression.

12. If the previous project has been completed, did you submit your 2% report? \_\_\_\_\_ YES \_\_\_\_\_ NO. *N/A*

**The 2% report must be submitted one year from the date you received your 2% award. If your report has not been submitted, your current application will not be considered! 2% Reports are mandatory for future grant considerations. Mail your 2% report to: Attn: 2% Reports; GTB, 2605 N.W. Bay Shore Drive, Peshawbestown, MI 49682.**

13. Impact of Gaming on local program: (e.g., increase in student population, resulting from increase in Tribal employment or increase in emergency services to Casino patrons).

*GRANTS from Tribal gaming allow the ranch to provide A VARIETY of SERVICES & PROGRAMS including our core program, 6d, TRAVERSE Horses & Heroes.*

14. How will the success of the project be assessed (evaluation plan)? *PARTICIPANTS are surveyed at program BEGINNING & END using the BECK ANXIETY INVENTORY AND Beck Depression INVENTORY INDEX. This allows OUR staff to evaluate needs AND FORMULATE PLANS of SERVICE.*

15. If new staff is required, will preference be given to Native American applicants?

\_\_\_\_\_ YES \_\_\_\_\_ NO *N/A*

16. Budget: Please attach a one-page itemization of the planned budget. Include explanation for each category of the budget.

**IMPORTANT!! BEFORE YOU MAIL YOUR 2% APPLICATION, PLEASE REMEMBER TO:**

- 1) Execute authorized signature on first page, question #2.
- 2) Attach 1-page budget
- 3) Attach Parent Committee Certification Form if application is from an Indian Education/Title VII Program.
- 3) Submit by appropriate deadline:
  - **If for June cycle, postmarked by May 31st.**
  - **If for December cycle, postmarked by November 30th.**

**Mail completed 2% applications to:**

**Attention: 2% Program  
Grand Traverse Band of Ottawa and Chippewa Indians  
2605 N.W. Bay Shore Drive  
Peshawbestown, MI 49682**

**If you have any questions, please call 231-534-7601.**

Reining Liberty Ranch Budget

GT Band 2% Grant = Fall 2019

Veteran Outreach and Gd. Traverse Horses 4 Heroes Budget

Veteran Weekly Dinners	# 52 Weeks	\$ 3,000.00
Veteran Outreach Program	# 12 Months	\$ 12,000.00
<u>Equine Activities &amp; Therapy</u>	<u># 40 Weeks</u>	<u>\$ 15,000.00</u>
2020 Budget Total		\$ 30,000.00
		X 38% (see below)
<b>Amount Requested</b>		<b>\$ 11,400.00</b>

According to data collected from the Gd. Traverse Vet Center, the number of area Veterans is shown by county for the 6 county service area in 2015. We are requesting 38% of our total program budget as that percentage of Veterans reside in Gd. Traverse County.

<u>County</u>	<u># of Veterans</u>	<u>% of Total</u>
Antrim	2220	13%
Benzie	1827	11%
Charlevoix	2291	13%
<b>Gd. Traverse</b>	<b>6552</b>	<b>38%</b>
Leelanau	1952	11%
Manistee	2517	14%
Total Veterans	17,359	100%



Grand Traverse Band of Ottawa and Chippewa Indians  
2605 N.W. Bay Shore Drive  
Peshawbestown, MI 49682

RE: Reining Liberty Ranch

To whom it may concern:

As the Director of the Grand Traverse County Department of Veterans Affairs, I am very aware of the great work that Reining Liberty Ranch does. They have established themselves as a therapeutic place for veterans to go to reacclimatize themselves with non-military society.

Their organization does not get involved in political or unethical practices and well respected within the veteran community.

I write this letter in full support of their 2% application to assist in funding for Therapeutic Riding Veterans Outreach and Veteran Dinners.

If you have any further questions, please feel free to reach out to me.

Respectfully,

Michael W. Roof

