

Man pursues dream to provide homeless with respite care

[BARBARA COTTER](#)

2012-12-11 21:07:39



Some people dip into their savings to pursue extravagant, self-satisfying dreams: buying a plane, trekking through Nepal, investing in a mountain chalet or a sleek sports car.

Greg Morris hit up his savings to chase a dream, but the main beneficiaries will be homeless people who need care and a whole lot of support after they're released from local hospitals.

Since 2009, the director of Peak Vista Community Health Centers' Homeless Medical Clinic has worked to start a medical respite program for homeless patients. After a lot of research, a few setbacks and a successful year-long pilot project that ended in October, Morris is on the verge of launching Ascending to Health Respite Care, which will begin as a recuperative program for people with low-acuity medical issues, and possibly expand to include more serious cases.

"This whole recuperative model makes sure they're not going back to the hospital in a relatively short period of time because there's no place for them to recuperate and adhere to a discharge plan," says Morris, a physician's assistant whose passion for working with the homeless population also plays out on a national stage through his work with the National Health Care for the Homeless Council. "Fifty percent of the homeless who are discharged to the streets or shelter end up back in the hospital within 90 days."

Closing the revolving door on ER visits and in-patient care saves hospitals money. A 2011 report from the National Health Care for the Homeless Council shows that three health systems in Richmond, Va., were spared \$11.2 million in costs over two years by partnering with a respite program. Other hospital systems saved from \$185,000 to \$6.2 million.

"A homeless person stays in the hospital five days longer than someone who is housed," says Morris, whose "beta test" for Ascending to Health is estimated to have saved local hospitals about \$482,000.

But Morris says the program is so much more than just saving costs and getting homeless patients back on their feet after a hospital stay. During the pilot, the respite care patients used beds at the Salvation Army's R.J. Montgomery New Hope Center, and he wants to continue that relationship.

"It's heavy on case management," he says of the program. "Are there benefits they qualify for? Can we get them into housing? Can we plug them in with family members? What can we do to break this cycle of homelessness? The big end result of this is to get them into supportive housing."

With the pilot over, Morris is trying to secure grants and line up financial support from Colorado Springs' two hospital systems to restart the program permanently. He got a boost last week when his nonprofit received 501c3 status, which will make it easier to land grants. He also has a meeting with the CEO of Memorial Hospital this month, but already, the system seems pleased.

"We often start applications for Medicaid and disability with a patient who is homeless; however, follow-up once they leave the hospital is impossible," Memorial said in a statement. "Greg and the community agencies have done phenomenal work helping with the follow-up in getting the patients connected to agencies to complete these applications.

"This program has been extremely valuable to the patients we've referred and is a great asset to the community."

Bob Holmes, executive director of Homeward Pikes Peak and a member of Ascending to Health's board, said, "to have a place where these people can recuperate is a godsend."

"He's very passionate, and that's wonderful," Holmes says of Morris. "I would love to see him get more support from the community — especially the medical community."

Eventually, Morris would like to expand the program to include a "step-down" facility that could take more serious discharge cases. He envisions it serving Pueblo and other southern Colorado communities. He sees a day when he'll turn the operation over to someone else, because he's keeping his day job with Peak Vista. "Providing daily care is my passion," he says.

And if the program takes off, he might even be able to repay himself.

"I've dumped all the resources I have into this," says Morris, 52.