

NATIONAL HEALTH CARE FOR THE HOMELESS COUNCIL
HCH CLINICIANS' NETWORK
2013 OUTSTANDING SERVICE AWARD | NOMINATION FORM

NOMINATION APPLICATION CHECKLIST

- | | |
|--|-------------------------------------|
| <input type="checkbox"/> Nomination Form | <input type="checkbox"/> Resume |
| <input type="checkbox"/> Patient letter | <input type="checkbox"/> Photograph |
| <input type="checkbox"/> Letter of support | |

NOMINEE INFORMATION *(please type or print clearly)*

Full name of nominee and credentials

Nic Granum

Job Title

ICCT Project Director

Organization name

Central City Concern

Address

232 NW Sixth Ave. Portland, Oregon 97209

Telephone, Fax, Email

503-294-1681, 503-294-4321,

NOMINATOR INFORMATION

Nominator's name

Rachel Soloroff, Old Town Clinic (a Central City Concern program)

Address

232 NW Sixth Ave., Portland, OR 97209

Telephone, Fax, Email Address

503-294-1681/503-294-4321/news@ccconcern.org

Signature & Date

Email application and supporting documents to:
Pat Petty | HCH Clinicians' Network | ppetty@nhhc.org
Application Deadline: January 2, 2013 | Questions? Call 615/226-2292

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Please address each section below as thoroughly as possible since this is the information that the review committee uses to make its decisions. Attach additional sheets as necessary.

- **History of Care.** Nominees must currently provide care to homeless individuals. List job position(s), agency name(s) and service dates.

From August 2008 through November 2012, Nic Granum has been Program Manager of Central City Concern's Recuperative Care Program. This program provides housing, meals, intensive case management and follow-up primary health care to homeless individuals who have recently been hospitalized. The program also works for positive outcomes when patients leave the program - connection to ongoing care and safe housing are primary goals.

2003-2008, Outreach and Detox worker II, Hooper Detox/CHIERS and Sobering Station
Supervised and worked with shift crews of 2-5 employees to evaluate, transport and care for individuals incapacitated due to the effects of alcohol or drugs.

November 2012 to present, Project Director, Interdisciplinary Community Care Team, (ICCT)
ICCT is a new, inter-program team that will focus on improving cost and quality of care measures for some of CCC's most vulnerable and high risk individuals. Nic and three health workers will work to reach 135 patients/year to stabilize their health, housing and overall well-being. The ultimate goal of the program is to "bend the costs of Medicare down" and ultimately save \$35 million over a three-year period. Project is funded by a large community collaborative, supported by the Center for Medicare and Medicaid Innovation, and plays a pivotal role in our emerging coordinated care organization in the tri-county area.

- **Impact on Improving Health & Quality of Life of Homeless People.** Provide in detail from one to three examples that illustrate the creative and visionary work undertaken by the nominee that inspire you to nominate this clinician.

When Nic began working with RCP in 2008, it was a newly-established program beginning to establish contracts with area hospitals.

1. During his tenure with the program, he expanded RCP to all area hospitals and one Medicaid Managed Care Organization, and grew the program by 200%. To date, 992 patients have received compassionate and quality care after a hospitalization. He tirelessly marketed the program both locally and through contacts in the Healthcare for the Homeless Network. Recuperative Care demonstrated ways in which safety net providers familiar with the needs of homeless individuals can successfully partner with hospital systems in a way that contributes both to patient's long-term health and to institution's financial health. 74% of patients who left the program during Nic's tenure departed with their acute condition fully resolved; 64% were discharged to stable housing. 90% of patients who lacked a primary care provider at the time of admission successfully exited the program connected to a reliable primary care provider. In April 2010, Nic initiated aftercare case management for exiting patients. Of 506 patients exiting, 67% left with case management services which were most often delivered at the patient's housing.

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2. During the past year, he has also collaborated with Oregon Health and Sciences University to establish CTRAIN, a care transitions program which engages people discharged from the hospital with 30 days of intensive care transitions support (including nursing and pharmacist support) as well as establishing a primary care home. Outcomes include decreased morbidity and mortality and decreased hospital re-admission in the cohort Nic helped to connect to Central City Concern's Old Town Clinic.
3. In October 2008 the City of Portland conducted a survey of Portland's homeless population using the Vulnerability Index developed by Common Ground in New York. Nic volunteered three consecutive nights on the streets at 3 a.m. to survey people. In conducting the surveys, Nic realized the high level of medical fragility he was seeing on the streets, so in the following weeks he continued to talk with City staff about a partnership with Recuperative Care. The result was a contract for Recuperative Care to take ten of the most medically fragile individuals identified in the Vulnerability Index and provide them with medical respite, a primary care home, and assistance with transition to more stable housing. The City of Portland has continued to renew annual RCP funding to serve this population since 2008.

Nic understands the big picture, and the necessity to link multiple systems of care on behalf of individuals experiencing homelessness. His interest and commitment to this work brought him to his most recent position in CCC as Program Director for the ICCT project.

- **Community Collaboration & Outreach.** Provide from one to three examples that illustrate significant community collaborations that resulted in preventing or ending homelessness. Examples might be efforts that increase public awareness and understanding of homelessness; mentoring; working with educational institutions; coalition building on the local, state, regional or national level; etc.

Nic has embraced and expanded CCC's community partnerships beginning with his work with the Recuperative Care.

1. When he joined the program, it had four contracts with individual hospitals. Working closely with local hospitals, Nic has expanded the program's contract/referral network to include all Portland area hospitals. Furthermore, Nic has successfully developed relationships with hospital and HMO *plans* rather than simply connecting to individual hospitals. This has greatly solidified funding streams and has created efficiencies for hospitals as well. Nic also secured the Veterans Administration Hospital as a regular referral source.
2. Nic has excelled in involving others in the community in his work including Jesuit Volunteer Corps members (many of whom have gone on to medical school), and local non-profit organizations that support the program with volunteer hours, food and clothing for patients. He developed relationships which have enhanced the staffing capacity of Recuperative Care while providing training and mentoring to students and volunteers. He was instrumental in establishing

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contacts that brought medical residents, student nurses and social workers to Recuperative Care, as well as an on-going connection with the Jesuit Volunteer Corps which has successfully placed individuals in Recuperative Care since 2006. Nic developed relationships with area universities, expanding the degree of volunteerism in the program. Currently, Recuperative Care has benefitted from 2 years of a social worker from the University of Portland, and 4 years of a social worker student from Portland State University. Some of the expanded funding opportunities have been a direct result of students' work.

3. Nic has also engaged Portland Fire and Rescue to identify "hot spots" (ie. buildings owned by Central City Concern whose residents have frequent 911 calls) and develop interventions to decrease those calls. These efforts are still underway, but underscore Nic's commitment to establishing innovative partnerships.
 4. Nic has become actively involved with activities of the National Health Care for the Homeless Council and is Board Chair-elect of the Respite Care Providers Network Steering Committee. In the past 12 months, Nic has visited both Seattle and San Francisco to observe programs in other major metropolitan areas.
- **Above & Beyond.** Describe in 200 words or less how you think this individual goes above and beyond his or her job description requirements.

Nic has clearly gone above and beyond the call of duty in several occasions. He demonstrated his dedication during a severe winter storm that shut down the city with ice and snow, when he made it in to work every day to check on the welfare of his clients as well as those in other CCC programs, arranged to have the RCP van with snow chains transport an Old Town Clinic primary care provider to and from the clinic, and delivered medications to clients of our behavioral health program when they were unable to leave their homes. He also was able to drive up the hill to Oregon Health & Science University Hospital to pick up a new client even though the campus was "closed" because the roads were too snowy and icy.

Despite working 60+ hours a week, Nic continues to volunteer 12-20 hours weekly as a volunteer fire lieutenant, bringing additional support to the homeless and vulnerable in our community. (161 words)

- **Noteworthy Conduct.** Provide any information about the nominee's interests and activities outside homeless health care that you would like the review committee to take into account. Examples include community or volunteer service or activities related to the nominee's avocation.

Nic has displayed personal motivation by moving up within CCC and taking on increasing responsibilities after completing his Masters degree in Public Administration. Nic went to school while working on-call as an Emergency Medical Technician (EMT) at CCC's Hooper Detoxification Center and also volunteering as an EMT for the Tualatin Valley Fire & Rescue Department (TVFR), where he was promoted to Lieutenant in recognition of his leadership and dedication. Even with the long hours Nic works for CCC, he still volunteers with TVFR. In 2008, Nic completed an internship as a legislative aide with State Representative Mitch Greenlick, a leader on healthcare reform issues. He has been a volunteer CPR/First Aid instructor for the Red Cross since 2003. Since assuming his managerial position Nic continues to strive for personal

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and professional growth, attending continuing education lectures and seeking out mentorship from his supervisor to further develop his leadership and administrative skills.

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