

Testimony on H.608
Senate Health and Welfare, March 16, 2018
Molly Dugan, Director of SASH, Cathedral Square

Thank you Madam Chair for the opportunity to testify on H. 608. My name is Molly Dugan and I direct the SASH (Support and Services at Home) program and am employed by Cathedral Square the statewide administrator for SASH. The program has been in existence since 2011 when after a successful pilot we obtained Medicare Demonstration funds to expand statewide in connection with the Blueprint for Health.

SASH is a statewide program that uses the affordable housing network and community health and services providers as a platform to provide comprehensive care management and coordination for older adults and adults with disabilities.

SASH and Cathedral Square support H. 608 and the formation of the Older Vermonters Act workgroup to take a comprehensive look at the value that older Vermonters contribute to our communities and identify remaining gaps in service and supports.

While we support H. 608, **we respectfully request that a representative from SASH be added as a member of the Older Vermonters Act Working Group as defined in Section 3(b)**. We believe that SASH will provide a valuable and unique perspective to the Working Group. Why? For the following reasons:

1. The SASH program operates out of non-profit and public housing organizations in every nook and cranny of the state- from Island Pond to Townshend, St. Albans to Brattleboro. Our staff works where our participants live. We know the fabric of these communities because we work so closely with our participants in their home and communities.
2. SASH provides a population health approach- we serve the continuum of needs- we have participants in very good health and fully employed as well as participants who are extremely frail and in needs of intense coordination of services. Our support matches the need identified. We focus on prevention as well as rapid response.
3. Our program was established from the beginning to be a partnership model- we do not work in isolation but rather rely on formalized partnerships between the affordable housing organization, area agencies on aging, home health network, designated mental health and developmental disability organizations, primary care practices, community hospitals, etc. to provide a coordinated approach to assist our participants with their self-identified goals. We have always been a connector program.
4. We are a new program (relatively speaking) and will bring lessons learned about establishing and maintaining real and effective partnership to the Working Group.
5. SASH was established to be a statewide presence and our organizing infrastructure is based on ensuring a statewide reach of support and services to our participants and a robust training and communication system to our staff and partners. We believe we have valuable insight to share about creating a statewide system.

Please consider adding a representative of the statewide SASH model to the working group membership.

Thank you for your time.

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