

CARING FOR OUR MOST EXPERIENCED COMMUNITY MEMBERS

By Latimer Hoke

Vermont is one of five states in the USA to allow physician assisted suicide, more politely known as a version of "death with dignity." While this aspect of life is often overlooked, it does usually receive more attention than simply aging with dignity.

Biologically, as people age, they often find themselves more limited in their abilities to do things independently. Even bending over to tie one's shoes

or to pick up a dropped pen, something that younger folks take for granted, can be the most challenging aspect of the day for someone with an aging body. This fact of life – simple aging – is not usually a part of everyday discourse. For Sonya Brown, though, it's her job.

Brown is the SASH Coordinator for the Champlain Housing Trust in the Swanton and Grand Isle areas. SASH, or "Support and Services in

the Home," is a grant-funded program run by the Centers for Medicare and Medicaid Services (CMS), and anyone eligible for Medicare is also eligible for SASH. According to Brown, SASH as a formal program in Vermont, complete with a catchy acronym, started in 2008 in Burlington and has worked its way into other areas of the State. Its coordinators work through housing authorities like Cathedral Square, Barre and Winooski Housing Authorities, VT State Housing and in Brown's case, the Champlain Housing Trust.

CMS has figured out that "preventative maintenance" is cheaper than reacting to problems after they have occurred, thus there is no cost for participants to enroll in SASH. Living at home is also usually cheaper than moving into assisted living situations or "retirement" homes/communities, and many people would prefer to live at home, anyway.

People are usually referred to SASH from other agencies. For example, if a patient is discharged from a Rehab Center to home, the Rehab Center might connect them with the nearest SASH coordinator. Social Workers often make referrals, as do family members of participants, other SASH participants, and sometimes people self-refer.

The idea is that at the point that someone has identified that meeting everyday needs at home is a challenge, SASH will work with participants to figure out solutions. First, they will work with the participant to identify his or her needs and goals (usually the overall goal is to remain at home). Next, as a team, SASH and the participant will identify who can help meet those needs, including family and close friends, neighbors, volunteers and paid help. Not surprisingly, SASH partners with area agencies like the Franklin County Home Health Agency (FCHHA) and Champlain Valley Agency on Aging (CVAA).

Brown says that what is unique about SASH is that they have a dedicated "Wellness Nurse." For the Champlain Housing Trust, that is Mari Stuart-Bullock from FCHAA. "Having a nurse gives reassurance to people," says Brown. "Participants enjoy her visits and she is very approachable."

The role of SASH Wellness Nurses is relatively "low-impact," but significant. They can provide blood pressure checks for participants and foot care for people with limited flexibility. They also review medications and answer questions, as well as just making general housing check-ins. Simply rearranging a space or

removing loose carpeting can make it much safer for someone with limited locomotion.

Brown says that most of the services that SASH arranges and provides are really everyday activities that many people take for granted. Some of the participants on her caseload, which encompasses the Swanton area and Grand Isle, want help with tasks such as reading mail, shopping, cooking meals, and shoveling the front steps. Some participants just want visitors, especially some of her clients who are native French speakers.

Who provides these services? As mentioned above, SASH will work with participants to find people who can help out. A neighbor who is going to the grocery store might be able to pick up some groceries. Volunteers, perhaps High School students who need community service, could potentially read mail or just chat, perhaps practicing French.

Another role of SASH is to bring programs into the community, and bring people to programs. This includes "Start the Conversation" end-of-life workshops with FCHHA, and Healthy Living workshops with NMC. Some After School Programs also meet with senior citizens to work on crafts or baking. SASH uses many resources to achieve its goals, like Front Porch Forums, churches and other organizations.

In terms of check-ins with SASH to evaluate progress with the program, some participants receive in-home visits, and others go to meet with coordinators, depending on their needs and preferences.

Overall, SASH is a flexible program designed to meet the needs of its participants. It essentially formalizes and organizes acts of kindness and community building that have already been happening, but may have been under the radar, and perhaps hard for certain people to find.

A big question with any publicly funded program is, "Who's gonna pay for this." With SASH, while all taxpayers technically pay for it, SASH focuses on wellness and education, on being proactive and prepared. These efforts identify and prevent many problems before they happen, resulting in net cost savings. A simple check-in that prevents a medication dosing error or a fall is much cheaper than a ride in an ambulance and evaluation in the emergency room.

For those interested in volunteering to help people through SASH, to refer people, and to find more information, explore the statewide website, sashvt.org.

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