



State of Connecticut
GENERAL ASSEMBLY

Commission on Children



**Testimony of Elaine Zimmerman
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**Public Health Committee
Connecticut General Assembly
February 6, 2009**

Senator Harris, Representative Ritter, and Members of the Committee:

Thank you for this opportunity to testify on behalf of the Connecticut Commission on Children concerning two bills before your committee today: R.B. 755 and R.B. 6309.

Raised Bill 755, An Act Concerning the Use of Asthmatic Inhalers and Epinephrine Auto-Injectors While at School

The Commission supports Raised Bill 755, which would permit children diagnosed with asthma or an allergic condition to possess an asthmatic inhaler or automatic prefilled cartridge injector at all times during school provided that the student has provided a written certification from specified licensed health care practitioners to the local or regional board of education.

We agree with the National Association of School Nurses that it is important to enable students with asthma to participate in the self-management of their condition and in the self-administration of prescribed, inhaled asthma medications on a case-by-case basis with parent, physician, student and school nurse involvement.

Nationally, asthma is the number one chronic illness causing school absenteeism. It accounts for nearly 20 million school days lost annually, or an average of 7.6 days per year missed for each student with asthma.¹

R.B. 755 would improve attendance and learning among students with asthma and allergic conditions. It would especially address the achievement gap and help Connecticut's low-income communities. Asthma rates are highest among Connecticut children in households with less than \$25,000 in income (13.5 percent), nearly twice as high as children in

¹ National Association of School Nurses. Position statement: *The use as asthma rescue inhalers in the school setting*. <http://www.nasn.org/Default.aspx?tabid=202>, (accessed Feb. 5, 2009).

households with incomes higher than \$75,000 (7.2 percent).² This bill is an important education and health strategy.

Raised Bill 6309, An Act Concerning Administration of the Department of Developmental Services

The Commission on Children calls your attention to section 9 of Raised Bill 6309, which makes technical changes to improve the operation of the Family Support Council, established by state law (CGS § 17a-219c) and consisting primarily of volunteer parents and other family members appointed by state officials. This technical provision would simply permit state commissioners and agency heads to appoint a designee to the council (current statute only permits state commissioners to do this) and eliminate the two-consecutive-term limitation for council members. The Commission supports these operational improvements to the Council statute.

On a related note, I encourage you to oppose the proposed elimination of the Family Support Council in Governor's Bill 6375. The Council is a valuable parent-led entity for children with disabilities and their families that receives no direct state funding. Its elimination would not save any money but would silence vulnerable families' voices at a time when those voices especially need to be heard.

The Family Support Council, along with the Family Support Network, serves as the de facto entry point for thousands of families who leave the hospital with a newborn diagnosed with serious health problems, or who seek assistance with medical and non-medical issues related to chronic and severe health problems of their children. The Council has established itself as an invaluable resource for families. It also plays an important policy role in advising state leaders on how to reform policies and practices for children with disabilities and their families.

A 2007 report by the Child Advocate demonstrated that Connecticut's system for children with special needs is broken. State systems are fractured; there is no single point of entry for information or support services.³ We need the Family Support Council to be present at the table to help fix that system.

² Environment & Human Health, Inc. (2003). *A survey of asthma prevalence in elementary school children*, 40. North Haven, CT: Author. <http://www.ehhi.org/reports/asthma03/asthma03.pdf> (accessed Feb. 5, 2009).

³ Office of the Child Advocate. (2007). *Children with special health care needs: A plan of action*. Hartford, CT: Author. http://www.ct.gov/oca/lib/oca/children_with_special_health_care_needs.pdf (accessed Feb. 5, 2009).