

TESTIMONY TO STATE LEGISLATIVE COMMITTEE ON HUMAN SERVICES
RE HOUSE BILL 5483
**AN ACT CONCERNING THE ESTABLISHMENT OF A LIFESPAN RESPITE
COALITION**

My name is Mary Jane Cannon. I am a Licensed Clinical Social Worker in the state of Connecticut and former Director (now retired) of Reachout, Inc. a private agency serving young children who have developmental disabilities and their families.

I am speaking today as Chair of the Board of Directors of the Connecticut Lifespan Respite Coalition to request that the Coalition be recognized as a state Council, reporting annually to the Governor and to the Legislature.

The CT Lifespan Respite Coalition is a nonprofit organization which was initiated in the year 2000 at the request of several parents seeking respite in the care of their young child with developmental problems. The Coalition quickly grew to include the respite needs of families providing care to persons *of all ages and varied difficulties* as group-after-group heard about the Coalition and asked to join. The critical need for respite for so many of Connecticut's families became blatantly apparent and the Coalition now has over 350 members.

Membership in the Coalition consists of family members and caregivers as well as representatives of public and private agencies and of municipal services. A mutual interest in respite, as a personal family need or as a frequent need of an agency's clientele is the basis for the diverse membership in the Coalition.

Respite is the planned or emergency short term care of an individual of *any* age who has disabilities, or chronic or terminal illnesses, or other special needs. It is *not* "baby sitting". It provides needed relief to the caregiver who is responsible for the well-being of the person with special needs. It is also the opportunity to provide an enriching and meaningful experience for the individual adult or child who has special needs. It may occur in the persons' home, in a community setting, or in another mutually agreed upon setting. It may be for only a few hours, overnight, or for a week or more. It is temporary, short term substitute care.

Respite is one of the most frequently requested and most cost effective services sought by caregivers. It is also one of the most difficult to obtain. Numerous studies have documented the cost-effectiveness of respite care in providing support to families, in reducing stress of the caregiver, in delaying or avoiding out-of-home placements, and for those caregivers who are also employed, improving their work attendance and job performance. (ARCH Annotated Bibliography of Respite and Crisis Care, Second Edition, 2002).

The national Caregivers Lifespan Respite Care Act of 2006, passed by Congress and signed by President Bush this past fall, authorizes competitive grants to those states which demonstrate a readiness to utilize these federal funds to provide improved respite availability *across the lifespan*.

As indicated, the Act states that preference will be given to those states which demonstrate their ability to implement the in-state *networking of existing resources as well as the innovative collaborative development of new resources*. It is anticipated that these funds will be available for awarding to states in 2009.

By authorizing the CT Lifespan Respite Coalition as a state Council, the Legislature provides recognition and validation that Connecticut is a state fully ready to implement federal funding to improve respite.

As a Council, the Coalition will report annually to the Governor, and to the Legislature, on the progress of its primary goal; namely to facilitate the networking of all of the public and private agencies within the state that provide respite or have clients regularly seeking respite. This will include continued outreach to other organizations and agencies, as well as meetings with community groups and others,- activities with which the CT Lifespan Respite Coalition has considerable experience already.

Our work toward this goal will be geared to preparing Connecticut to become a viable, and compelling recipient of federal funding to improve respite in our state, when such funding becomes available.

It is the hope of its more than 350 members that the CT Lifespan Respite Coalition be recognized as a state Council.

Thank you for your attention,

Mary Jane Cannon, MSW, LCSW
Chair, CT Lifespan Respite Coalition
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