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## MICHIGAN LIFESPAN RESPITE SERVICES PROGRAM

**House Bill 4476** 

Sponsor: Rep. Barb Vander Veen Committee: Family and Children

**Services** 

Complete to 6-2-03

## A SUMMARY OF HOUSE BILL 4476 AS INTRODUCED 3-27-03

The bill would create a new act to establish the Michigan Lifespan Respite Services Program within the Department of Community Health (DCH). The program would seek to encourage and develop a statewide coordination of respite services by providing policy and program development support; providing technical assistance to community respite programs; developing and distributing information regarding respite programs; promoting the exchange and coordination among state and local governments, community respite programs, individuals served by respite programs, and respite care advocates; promoting statewide access to community respite programs; and monitoring and evaluating the implementation of community respite programs.

The bill would define "respite care" as providing short-term relief to primary caregivers from the demands of ongoing care for an individual whose health and welfare would be jeopardized if left unattended.

The Department of Community Health would coordinate the establishment of community respite services programs. These programs would be operated by a community-based private non-profit or for-profit agency or public agency that provides respite care. Each community respite services program would have to involve key local individuals and agencies in the program planning process and establish an advisory program to advise the community program as to how the program could best serve the needs of families and caregivers of individuals in need of respite care. The department would establish at least six community lifespan respite services in the state within one year of the bill's effective date.

Respite services made available by the Michigan Lifespan Respite Services Program would have to include a flexible array of respite care options that are responsive to family and caregiver needs and available to the family and caregiver prior to "crisis"; be sensitive to the unique needs, strengths, and cultural values of individuals, families, and caregivers; offer the most efficient access to an array of coordinated respite care built on existing community support and services; "be driven by community strengths, needs, and resources"; and use a variety of funds, including family or caregiver funds, private and volunteer resources, and public funds. In addition, the Michigan program would use funds appropriated to the program for the establishment and implementation of community programs; implementation of the Michigan program; and costs related to developing provider recruitment and training, information and referral, and outreach, and other components of providing respite services.

The department would be required to implement rules to carry out the purposes of the bill, including criteria, procedures and timelines for determining which organizations are to receive funding for community lifespan respite services programs and a requirement that each community program publicize contact information.

Analyst: M. Wolf

<sup>■</sup>This analysis was prepared by nonpartisan House staff for use by House members in their deliberations, and does not constitute an official statement of legislative intent.