



March 28, 2016 at 2:16 PM
Conference Room 329

House Committee on Health
House Committee on Human Services

To: Chair Della Au Belatti
Vice Chair Richard P. Creagan

Chair Dee Morikawa
Vice Chair Bertrand Kobayashi

From: George Greene
President and CEO
Healthcare Association of Hawaii

Re: Testimony in Support
HCR 141, Recognizing the Month of September as Sepsis Awareness Month in Hawaii, and
the Thirteenth Day in September of Every Year as Hawaii Sepsis Day

The Healthcare Association of Hawaii (HAH), established in 1939, serves as the leading voice of healthcare on behalf of 180 member organizations who represent almost every aspect of the health care continuum in Hawaii. Members include acute care hospitals, skilled nursing facilities, home health agencies, hospices, assisted living facilities and durable medical equipment suppliers. In addition to providing access to appropriate, affordable, high quality care to all of Hawaii's residents, our members contribute significantly to Hawaii's economy by employing over 20,000 people statewide.

The Healthcare Association of Hawaii would like to thank the committees for the opportunity to **support** HCR 141. This legislation would recognize September as Sepsis Awareness Month, and the thirteenth of September of every year as Hawaii Sepsis Day. We believe that this recognition could help to raise awareness of this issue. Our members and our organization are working diligently on this issue and we appreciate initiatives that complement those efforts.

Thank you for your consideration of this important matter.



March 28, 2016

State of Hawaii
House of Representatives

RE: HCR 140, HCR 141, HCR 142

Dear Representatives,

Sepsis Alliance is the nation's oldest and largest sepsis advocacy organization. We represent the millions of people who have been killed or injured by sepsis and millions more who will be victims unless changes are made. The Sepsis Alliance website, Sepsis.org, receives 1 million visits each year from patients, family members, health providers and other sepsis constituents.

Sepsis is not a new disease, yet it continues to take a life every 2 minutes and is known to fewer than half of U.S. adults. Sepsis takes more lives than breast cancer, prostate cancer and AIDS, combined. Tragically, sepsis is preventable or treatable in as many as 80% of cases. We can save as many as 200,000 American every year with improved awareness and education.

Sepsis Alliance strongly supports HCR 140 in that it is critical to have the data gathering in place to understand the impact of prevention, awareness and education efforts. We would also encourage the state to additionally gather information on the morbidity impact of sepsis which is significant.

Sepsis Alliance strongly supports HCR 141 in that Sepsis Alliance established Sepsis Awareness Month in 2011 to focus additional attention on the impact of this disease and to promote increased awareness and education efforts. Similarly, Sepsis Alliance partnered with the Global Sepsis Alliance to designate September 13 as World Sepsis Day. Supporting these events on a state level will help Hawaii bring focus to these calendar events in support of the state's commitment to reduce mortality and morbidity from sepsis.

Sepsis Alliance also strongly supports HCR 142 to establish and convene a sepsis best practices group. Sepsis initiatives across the country are uneven at best. There is a large opportunity to standardize improvements and increase the impact of best practices via a centralized repository and sharing organization.

Sepsis Alliance applauds your efforts to save lives and limbs from this epidemic disease.

With my best regards,

Thomas Heymann
President and Executive Director
theymann@sepsis.org

HLTtestimony

From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 28, 2016 6:59 AM
To: HLTtestimony
Cc: beckypgardner@gmail.com
Subject: Submitted testimony for HCR141 on Mar 28, 2016 14:16PM
Attachments: 2_1660.png

HCR141

Submitted on: 3/28/2016

Testimony for HLT on Mar 28, 2016 14:16PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Becky Gardner	Individual	Support	No

Comments: Re: Testimony in Support of: HCR140 / HR92 – NEED BASELINE INFORMATION ON SEPSIS & MORTALITY HCR141 / HR93 – SEPSIS AWARENESS MONTH HCR142/ HR94 – SEPSIS BEST PRACTICES GROUP I am writing in strong support for the above-referenced resolutions, which would individually, and as a whole, increase SEPSIS AWARENESS in Hawaii. My name is Becky Gardner. I wish to disclose that I am a state employee in an office that is administratively attached to the Department of Health. However, I submit this testimony not in my capacity as public servant, but as a concerned and interested resident of the State of Hawaii. Therefore, my testimony does not represent any views or position my office may or may not have. It is based upon my personal views alone. Before 4 years ago, I have never heard of SEPSIS. This is remarkable since I grew up in a home of health care providers, one of whom was an emergency room nurse. However, many might be as surprised, as I was, to learn just how common it is. According to the Global Sepsis Alliance: “In the U.S., sepsis accounts for far more deaths than the number of deaths from prostate cancer, breast cancer and AIDS combined.” <http://www.world-sepsis-day.org/?MET=SHOWCONTAINER&vCONTAINERID=11> I first heard of sepsis when I learned of the death of Patty Rohlfing, loving wife of a dear friend – Fred Rohlfing, whom many of you know personally and/or politically for his contributions to this state and country as not only having served in this very legislature; but as a federal judge; in the U.S. Navy; and on numerous state and county boards and commissions. Fred has been the engine behind many of the legislative proposals over the last few years regarding sepsis awareness and patient advocacy. Of particular note is SB666 during the 2013 Legislative Session. His testimony on that bill relates the details concerning his wife’s death, and is available here:

http://www.capitol.hawaii.gov/Session2013/Testimony/SB666_TESTIMONY_HTH-JDL_02-06-13.pdf
What is compelling about his recount is the seemingly countless opportunities for the health care professionals, front line staff, friends, and/or family that were present during the sudden demise of Patty’s health, to have picked up on some of the warning signs, or taken a more cautionary approach to avoid or mitigate the damages of septic shock. Of course, no one can be held at fault for not recognizing something they didn’t have awareness of in the first place. But creating such awareness, which might have saved Patty’s life, is the objective of these measures. A death due to Septic Shock has again recently impacted people close to me. On March 4, 2016, many grieved the loss of Jacob Reed – just 36 years old, an officer with the Honolulu Police Department, loving and doting husband to Cheryl Reed, and loving, giving father of two young boys – Ethan (6) and Noah (3). Jake was

young, healthy, fun, and a true friend to so many. His death happened so suddenly, stemming from something so common - bronchitis and pneumonia. In a matter of a few days, his pneumonia resulted in the release of a bacterial infection that got into his bloodstream that put him into septic shock and quickly led to liver and kidney failure. More information about Jake can be read here:

https://www.gofundme.com/a4s7cd8s?utm_source=internal&utm_medium=email&utm_content=cta_button&utm_campaign=upd_n Could this have been prevented with greater awareness; an understanding of what the risk factors are; and an appreciation and dissemination of best practice guidelines? I imagine such efforts would've made a difference for Patty, and Jake, and to all the people who love them and were loved by them. A simple google search for "Sepsis Awareness" brings up extensive material and resources that would help in our collective understanding and treatment. I therefore urge these committees to take full advantage of the work that's already done to understand and prevent sepsis, and help these efforts manifest into concrete preventative action and widespread knowledge of sepsis in Hawaii – through a SEPSIS AWARENESS MONTH; a STUDY of the INCIDENCES and RELATED MORTALITY; and a determination of BEST PRACTICES. Please pass these measures, in honor of Patty Rohlfing, Jacob Reed, and countless others who have died or have been affected by Sepsis. Pass these measures in the spirit of prevention for those who may survive the devastating consequences if this condition is better understood and detected. Thank you.

Please note that testimony submitted less than 24 hours prior to the hearing, improperly identified, or directed to the incorrect office, may not be posted online or distributed to the committee prior to the convening of the public hearing.

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KNOW THE SIGNS

KNOW SEPSIS

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OR MUSCLE
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PASSING
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S

SKIN
MOTTLED
OR
DISCOLORED

IN TREATING SEPSIS,
THE 1ST HOUR IS CRITICAL
THE FIRST 24 CAN BE DECISIVE.

From: mailinglist@capitol.hawaii.gov
Sent: Sunday, March 27, 2016 9:55 PM
To: HLTtestimony
Cc: chereed43@gmail.com
Subject: *Submitted testimony for HCR141 on Mar 28, 2016 14:16PM*

HCR141

Submitted on: 3/27/2016

Testimony for HLT on Mar 28, 2016 14:16PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
cheryl	Individual	Support	No

Comments:

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From: mailinglist@capitol.hawaii.gov
Sent: Sunday, March 27, 2016 8:41 PM
To: HLTtestimony
Cc: sanfordcheryl@gmail.com
Subject: *Submitted testimony for HCR141 on Mar 28, 2016 14:16PM*

HCR141

Submitted on: 3/27/2016

Testimony for HLT on Mar 28, 2016 14:16PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
cheryl sanford	Individual	Support	No

Comments:

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March 26, 2016

House Committee on Health
Rep. Della Au Belatti, Chair
Rep. Richard Cregan, M.D., Vice Chair

Re: HCE141 & HR93
Date: March 28, 2018
Time: 2:16 p.m.
Place: Conference Room 329

Testimony in Support

Chair Belatti, Vice Chair Cregan and members of the Committee on Health. I am writing this testimony as an individual and at the same time to support my close friend, Fredrick Rohlfing. HCR141 & HR93 if passed would recognize September as Sepsis Awareness Month and the thirteenth day in September as Hawaii Sepsis Day.

In 2011, The Sepsis Alliance recognized that more attention could be drawn to sepsis and sepsis awareness if there was a specific month dedicated to the cause. While efforts towards education for both the public and healthcare professionals are maintained throughout the year, having a dedicated Sepsis Awareness Month allows for organizations and facilities to organize activities for their staff, and for Sepsis Alliance supporters to make a concentrated effort on spreading information about sepsis.

The following year, the Global Sepsis Alliance, of which SA is a founding member, declared September 13th to be World Sepsis Day. This one day brings together people in health care and members of the public to recognize that sepsis is a global problem.

Septicemia is an insidious "equal opportunity disease" like cancer it affects the young and old, male and female, republicans and democrats, the rich and poor. It can start with any kind of infection, be it a cut on your arm, or an infection of the lungs, like pneumonia. The infection can spread throughout the body, shutting down organs and doing damage to muscle and tissue.

Septicemia is often misdiagnosed and once diagnosed it is often too far along to be effectively treated with antibiotics. Also the mortality rate for patients hospitalized with sepsis is more than eight times as likely to die.

In November 2015, statistical brief from the Healthcare Cost and Utilization Project (HCUP), the Agency for Healthcare Research and Quality (AHRQ), a division of the U.S. Department of Health and Human Services, and the Nationwide Readmissions Database (NRD). This HCUP Statistical Brief, Trends in Hospital Readmissions for Four High-Volume Conditions, 2009-2013, found that "sepsis as being responsible for the most readmissions to a hospital within 30 days after a hospital visit. The life-threatening and often misunderstood condition is also the most expensive diagnosis, leading to readmissions costing more than \$3.1 billion per year."

In the past the legislature has recognized numerous awareness months; February as Heart Month, March as Colorectal Cancer Awareness Month, and May as Asthma Awareness Month. A month and a day dedicated to Sepsis, will shine a light on one of the least understood and deadly medical conditions facing our people today.

Thank you for the opportunity to share my testimony with you today.

Warmly,

A handwritten signature in black ink, appearing to read "George S. Massengale". The signature is fluid and cursive, with a prominent initial "G" and "M".

George S. Massengale

From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 28, 2016 7:23 AM
To: HLTtestimony
Cc: juliesutera@gmail.com
Subject: *Submitted testimony for HCR141 on Mar 28, 2016 14:16PM*

HCR141

Submitted on: 3/28/2016

Testimony for HLT on Mar 28, 2016 14:16PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Julie	Individual	Support	No

Comments:

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HLTtestimony

From: Barbara Marumoto <repmarumoto@gmail.com>
Sent: Monday, March 28, 2016 12:58 AM
To: HLTtestimony
Subject: HCR 140, 141, 142 - SEPSIS - In Favor

Date: March 28, 2016 - 2:16 pm

To: Rep.Della Au Belatti, Chair
House Committee on Health

Re: Resolutions Regarding Sepsis - In Support
HCR 140
HCR 141
HCR 142

I think of sepsis as "sudden death syndrome", not only for infants, but for adults as well.. By the time it is diagnosed, it is often too late to save a victim. A million Americans suffer from this disease every year and many of them die or suffer severe long term effects. Here in Hawaii I understand that a HPD officer recently succumbed to a tragic death.

We now hear that dengue fever can result in "sudden dengue fever syndrome". Sepsis is the; 9th leading cause of death in the US.

Protocols to diagnose and treat this disease are improving rapidly, and it is critical that doctors and Emergency Room personnel must keep up with new developments.

The public must also become aware of this problem and understand the need for immediate treatment.

Because of the suddenness and severity of sepsis, I support the three resolutions before you and ask that the House Health Committee act *decisively* on these measures.

Mahalo,

Barbara Marumoto

From: mailinglist@capitol.hawaii.gov
Sent: Monday, March 28, 2016 12:44 PM
To: HLTtestimony
Cc: romala@yahoo.com
Subject: Submitted testimony for HCR141 on Mar 28, 2016 14:16PM

Categories: Blue Category

HCR141

Submitted on: 3/28/2016

Testimony for HLT on Mar 28, 2016 14:16PM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Romala Radcliffe	Individual	Support	No

Comments: Our best defense against sepsis is limiting exposure to infections by washing hands thoroughly and frequently. Those most vulnerable to sepsis include individuals who are receiving medical treatment, such as long-term steroids that weakens their immune system, the very old, those having a long-term health condition such as diabetes, recovering from surgery, have wounds or injuries as a result of an accident, or who have IV ports or catheters. If not treated quickly, sepsis can lead to multiple organ failure and death. Sepsis is a potentially life-threatening complication of an infection. Anyone can develop sepsis, but it's most common and most dangerous in older adults and those with weakened immune systems It is important for everyone to be aware of how sepsis occurs. Awareness is key. When we do visit friends or family who are in our hospitals or reside at our LTC facilities we can reduce the risk of them developing sepsis by observing good hand hygiene. We must remember to wash our hands. In 2011, sepsis was the most expensive condition treated in U.S. hospitals. Treatment was at an aggregate cost of \$20.3 billion. As more very frail and at-risk people are treated in our hospitals, and as acute care becomes more aggressive, the detection of sepsis is increasingly important. Reducing mortality due to severe sepsis requires hospitals to have an organized and systematic process that guarantees the early recognition of severe sepsis along with the uniform and consistent application of evidence-based treatments. In addition to the challenges of diagnosing and treating sepsis, mounting pressures are surfacing from the new SEP1 core measure, from the Centers for Medicare & Medicaid Services (CMS).

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