



STATE OF HAWAII  
DEPARTMENT OF HEALTH  
P. O. Box 3378  
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**Testimony in SUPPORT of SB 2394  
Relating to Influenza Immunization**

SENATE COMMITTEE ON WAYS AND MEANS  
SENATOR JILL N. TOKUDA, CHAIR

Hearing Date: February 25, 2016

Room Number: 211

- 1 **Fiscal Implications:** None for the Department of Health.
- 2 **Department Testimony:** The Department appreciates and applauds the efforts of our hospital
- 3 partners to improve and sustain high health care worker influenza vaccination rates at their
- 4 facilities via vaccination-related policy endeavors such as SB 2394. The findings of a 2013
- 5 Centers for Disease Control and Prevention review of related published literature indicated that
- 6 influenza vaccination of health care workers can enhance patient safety and reduce morbidity
- 7 and mortality in hospital patient populations. The mission of the Department of Health is to
- 8 protect and improve the health and environment for all people in Hawaii, and measures such as
- 9 SB 2394 clearly align with this mission.
- 10
- 11 Thank you for the opportunity to testify.



# HAWAII STATE CENTER FOR NURSING

Connecting Nurses. Transforming Healthcare.

**Written Testimony Presented Before the  
Senate Committee on Ways and Means**

**February 25, 2016 9:30 a.m.**

**by**

**Laura Reichhardt, NP-C, APRN, Director  
Hawai'i State Center for Nursing  
University of Hawai'i at Mānoa**

## **SB 2394 RELATING TO INFLUENZA IMMUNIZATION.**

Chair Tokuda, Vice Chair Dela Cruz, and members of the Senate Committee on Ways and Means, thank you for this opportunity to provide testimony in support for SB 2394 Relating to Influenza Immunization.

Research indicates that health care providers unvaccinated for influenza contribute to health care facility-related influenza outbreaks. Further, these outbreaks lead to increased patient morbidity and mortality, worker illness and absenteeism, and increased economic cost to the health care system.<sup>1</sup>

With regard to the nursing workforce, the Hawai'i State Center for Nursing (HSCN) is in support of this measure as a means to reduce exposure and potential illness from influenza through effective vaccination programs. Such programs will increase the safety of the health care system for its patients by its health care workers.

Therefore, the HSCN respectfully requests that the Senate Committee on Ways and Means consider SB 2394 favorably at this time. Thank you for your continued support of nursing in Hawai'i and for the time and consideration of this bill.

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<sup>1</sup> Stewart, A. M., & Cox, M. A. (2013). State law and influenza vaccination of health care personnel. *Vaccine*, 31(5), 827-832. doi:10.1016/j.vaccine.2012.11.063



**AONE Hawaii**

AONE Hawaii  
c/o PO Box 2774  
Honolulu, Hawaii 96803



THE AMERICAN ORGANIZATION OF NURSE EXECUTIVES, **HAWAII CHAPTER**

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**Written Testimony Presented Before the  
Senate Committee on Ways and Means  
February 25, 2016 9:30 a.m.**

By

Kate Woodard, RN, MPH  
Secretary, AONE Hawai'i Board

**SB 2394 RELATING TO INFLUENZA IMMUNIZATION.**

Chair Tokuda, Vice Chair Dela Cruz, and members of the Senate Committee on Ways and Means, thank you for this opportunity to provide testimony in support for SB 2394 Relating to Influenza Immunization.

Research indicates that health care providers unvaccinated for influenza contribute to health care facility-related influenza outbreaks. Further, these outbreaks lead to increased patient morbidity and mortality, worker illness and absenteeism, and increased economic cost to the health care system.<sup>1</sup>

With regard to the nursing workforce, AONE Hawai'i is in support of this measure as a means to reduce exposure and potential illness from influenza through effective vaccination programs. Such programs will increase the safety of the health care system for its patients by its health care workers.

Therefore, AONE Hawai'i respectfully requests that the Senate Committee on Commerce, Consumer Protection, and Health consider SB 2394 favorably at this time. Thank you for your continued support of nursing in Hawai'i and for the time and consideration of this bill.

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<sup>1</sup> Stewart, A. M., & Cox, M. A. (2013). State law and influenza vaccination of health care personnel. *Vaccine*, 31(5), 827-832. doi:10.1016/j.vaccine.2012.11.063

**From:** [mailinglist@capitol.hawaii.gov](mailto:mailinglist@capitol.hawaii.gov)  
**To:** [WAM Testimony](#)  
**Cc:** [ecabatu@hpsc.org](mailto:ecabatu@hpsc.org)  
**Subject:** Submitted testimony for SB2394 on Feb 25, 2016 09:30AM  
**Date:** Wednesday, February 24, 2016 10:38:40 AM

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**SB2394**

Submitted on: 2/24/2016

Testimony for WAM on Feb 25, 2016 09:30AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Elena Cabatu	East Hawaii Region of Hawaii Health Systems Corporation	Support	No

Comments: On behalf of the East Hawaii Region of Hawaii Health Systems Corporation consisting of Hilo Medical Center, Hale Ho`ola Hamakua and Ka`u Hospital, please accept this organizational support for SB2394. Mahalo.

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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**February 25, 2016 at 9:30 AM**  
**Conference Room 211**

**Senate Committee on Ways and Means**

To: Chair Jill N. Tokuda  
Vice Chair Donovan M. Dela Cruz

From: George Greene  
President and CEO  
Healthcare Association of Hawaii

**Re: Testimony in Support**  
**SB 2394, Relating to Influenza Immunization**

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.

We would like to thank the committee for the opportunity to testify in **support** of SB 2394. We support efforts to increase influenza vaccination rates at acute care facilities in Hawaii as a way to help protect patients receiving care in a hospital setting.

The Centers for Disease Control and Prevention (CDC), the Advisory Committee on Immunization Practices, the Healthcare Infection Control Practices Advisory Committee, and the American Hospital Association all recommend that health care workers in hospitals get a flu vaccine every year. There are three main benefits to yearly flu vaccines for healthcare workers in acute care facilities. First, healthcare workers reduce their chances of contracting the flu and subsequently passing it on to patients in those settings. Second, the workforce is better protected during a flu outbreak, helping to avert critical personnel shortages. Lastly, it provides an example to the general public that flu vaccines benefit public health.

According to the CDC, the flu can be a serious and potentially lethal disease. Young children, pregnant women, the elderly, and individuals with certain medical conditions such as asthma, diabetes, or heart disease are particularly at-risk for developing serious complications from the flu. Because these vulnerable populations are often treated in hospitals, the CDC finds that it is especially important for the health care workers in acute care facilities who directly care for these high-risk patients to get vaccinated annually.

Studies have shown that requiring hospital employees to get inoculated against the flu every year will increase vaccination coverage. A policy statement issued by the American Academy of Pediatrics (AAP) in support of mandatory annual vaccinations for healthcare workers aggregated a number of studies and reports to substantiate their position. The AAP reiterates that influenza poses serious risks for patients, and that immunization is the single most effective way to prevent contraction of the virus.<sup>i</sup>

The statement also provides evidence that voluntary immunization programs, unlike mandatory programs, do not significantly increase immunization rates among healthcare workers. The CDC also has telling numbers compiled on flu vaccine coverage. According to the agency, “[e]arly season flu vaccination coverage was higher among health care personnel whose employers required (85.8%) or recommended (68.4%) that they be vaccinated, compared to those whose employer did not have a policy or recommendation regarding flu vaccination (43.4%).”<sup>ii</sup>

Therefore, according to the AAP, state-based vaccination requirements are more reliable and efficient in increasing coverage rates for healthcare workers in hospitals. Having a state-based requirement could also make it easier for individual acute care facilities to follow because it would set uniform standards.

Because of the benefits of inoculation and state-based requirements, we would ask for your support of this proposal. This legislation will help to promote patient safety and avert personnel shortages during an outbreak in hospitals and will set a positive example showing the public health benefits of vaccinations. Thank you for your time and consideration of this measure.

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<sup>i</sup> <http://pediatrics.aappublications.org/content/136/4/809>

<sup>ii</sup> <http://www.cdc.gov/flu/healthcareworkers.htm>

**February 25, 2016 at 9:30am**  
**Conference Room 211**

**Senate Committee on Ways and Means**

To: Senator Jill Tokuda, Chair  
Senator Donovan Dela Cruz, Vice Chair

From: Michael Robinson  
Vice President -- Government Relations and Community Affairs

**Re: Testimony in Support, SB 2394, Relating to Influenza Vaccination**

My name is Michael Robinson, and I am the Vice President of Government Relations and Community Affairs for Hawai'i Pacific Health (HPH). Hawai'i Pacific Health is a not-for-profit health care system, and the state's largest health care provider and non-governmental employer. Hawai'i Pacific Health is committed to providing the highest quality medical care and service to the people of Hawai'i and the Pacific Region through its four hospitals, more than 50 outpatient clinics and service sites, and over 1,600 affiliated physicians. Hawai'i Pacific Health's hospitals are Kapi'olani Medical Center for Women & Children, Pali Momi Medical Center, Straub Clinic & Hospital and Wilcox Memorial Hospital.

HPH is writing in **strong support** of SB 2394 which would require mandatory influenza vaccinations for health care workers. In the United States, anywhere from 5% to 20% of the population contracts influenza every year and more than 200,000 people are hospitalized from seasonal flu-related complications. Annual influenza-associated deaths range from 3,000 to 49,000. However, many of these illnesses and deaths are preventable. The most efficient method of preventing annual influenza epidemics is through pre-exposure vaccination. The CDC estimates that influenza vaccination prevented approximately 7.2 million illnesses, 3.1 million medically attended illnesses, and 90,000 hospitalizations associated with influenza in the 2013-14 influenza season.

Despite long standing recommendations by the Association for Professionals in Infection Control and Epidemiology (APIC), the Centers for Disease Control and Prevention (CDC) and other national healthcare organizations, the response to voluntary programs has failed to increase immunization rates to acceptable levels required to substantially reduce healthcare-acquired influenza. In Hawai'i, the health care worker vaccination level is in the bottom 10% for the entire nation. That is why it is so critical that the legislature take action by passing SB 2394.

Ensuring that all of our hospital health care workers receive the annual influenza vaccination is the right thing to do. Mandatory vaccination programs help health care personnel carry out their professional duty to provide care to all patients without the threat of undue harm caused by influenza transmission. The public has a right to expect that health care workers and the institutions in which they work will take all necessary and reasonable precautions to keep them safe and minimize harm. **We urge this committee to pass SB 2394 unamended.**

Thank you for the opportunity to testify.



From: [mailinglist@capitol.hawaii.gov](mailto:mailinglist@capitol.hawaii.gov)  
To: [WAM Testimony](#)  
Cc: [joankutz@gmail.com](mailto:joankutz@gmail.com)  
Subject: Submitted testimony for SB2394 on Feb 25, 2016 09:30AM  
Date: Tuesday, February 23, 2016 8:01:54 PM

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**SB2394**

Submitted on: 2/23/2016

Testimony for WAM on Feb 25, 2016 09:30AM in Conference Room 211

Submitted By	Organization	Testifier Position	Present at Hearing
Joan Kutzer	Hawaii Nurses Association	Oppose	No

Comments: I am writing to you to URGE you to OPPOSE the following bill that infringe upon Healthcare Workers' rights: SB 2394. FLU SHOT MANDATES FOR HEALTH CARE WORKERS I urge you to also OPPOSE SB 2394. I am a member of the Hawaii Nurses Association/ OPEIU Local 50 Board of Directors and am a member of the OPEIU Nurse Council. The following is our OPEIU Nurse Council's position statement regarding the Mandatory Influenza Immunization Initiative: FLU VACCINES FOR HEALTHCARE WORKERS WHEREAS, OPEIU Nurse Council supports flu prevention for patients and the general public; and WHEREAS, nurses and other healthcare workers have a duty and a right to protect patients. Recent evidence shows mandatory flu vaccinations and masking policies fail these tests; and WHEREAS, flu vaccination policies requiring healthcare workers to be vaccinated have proliferated since the Virginia Mason case in 2004; and WHEREAS, such policies vary greatly from locale to locale; and WHEREAS, mandatory flu vaccinations as a condition of employment is unfair to healthcare workers; and WHEREAS, many employers have implemented religious exemptions to mandatory flu vaccination for their healthcare workers; and WHEREAS, many of those religious exemptions are vague and inconsistent with federal discrimination laws; and WHEREAS, the billion dollar pharmaceutical companies who provide flu vaccinations are lobbying Congress for a national policy requiring flu vaccination for healthcare workers; and WHEREAS, Medicare reimbursement rates may be effected by the number of healthcare workers who are vaccinated at that healthcare facility; and THEREFORE BE IT RESOLVED that the OPEIU 26th Convention commit itself to lobby for legislation requiring employers to educate their healthcare workers as to the benefits and limitations of flu vaccination and for healthcare employers to implement effective infection control to prevent the spread of flu without mandatory flu vaccination for employees. Sincerely, Joan Kutzer, RN

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P.O. Box 25665. Honolulu, HI 96825

**February 25, 2016 at 9:30am  
Conference Room 211**

**Senate Committee on Ways and Means**

To: Senator Jill Tokuda, Chair  
Senator Donovan Dela Cruz, Vice Chair

From: Gwen Navarrete Klapperich  
Interim President, Hawaii Immunization Coalition

**Re: Testimony in Support, SB 2394, Relating to Influenza Vaccination**

My name is Gwen Navarrete Klapperich, and I am the Interim President of the Hawai'i Immunization Coalition (HIC), a state-wide, community-based non-profit 501(c)3 coalition of public and private organizations and concerned individuals whose mission is to promote effective strategies to ensure that all of Hawaii's families are appropriately vaccinated against vaccine-preventable diseases. We are a 100% volunteer driven organization, and our board of directors is comprised of healthcare workers, educators, and private everyday citizens. I myself am **not** a clinician; but as a private citizen and the parent of a young man with autism, I want to be assured that my healthcare providers have taken appropriate measures to protect me and my family from vaccine-preventable diseases.

HIC is writing in **strong support** of SB 2394 which would require mandatory influenza vaccinations for health care workers. Our state's own history reflects the devastating effects of infectious diseases like measles, whooping cough, and influenza on the Native Hawaiian population. Between 1804 and 1920, over tens of thousands of Hawaiians were killed by influenza, a disease that can now be prevented through effective vaccination.

Influenza is not only contagious, it is expensive. The National Society for Human Resources Management (SHRM) cites a 2011 study that found "influenza responsible for 100 million workdays during the 2010-2011 flu season. That's \$7 billion in lost wages; two thirds of the missed workdays were employer paid sick time. The flu sliced more than \$10 billion off company productivity. In fact, many sources list influenza as one of the leading causes of employee absences." SHRM also advocates for influenza vaccination in its wellness presentation as an effective way to prevent the transmission of influenza among their employees, and my husband's company is just one of several organizations that hold annual in-house flu clinics as an employee benefit.

It is now week 6 of the current influenza season in Hawaii and the State Department of Health has reported testing over 10,000 patients for influenza, with over 800 cases testing as positive. While this may seem small in comparison to state population, I ask you to think of the number of healthcare workers who were exposed to the influenza virus during the intake, diagnosis, and treatment of these patients. An average healthcare visit means that a sick patient will encounter at least 4-5 employees from the moment they check into the facility to the time they check out. If

not vaccinated, every healthcare employee those patients came in contact has now been exposed to the influenza virus and may contract it themselves or unknowingly pass it onto other patients.

We require construction workers to wear hard hats and take precautions to insure the safety of the general public, and for everyone to wear a seatbelt and avoid cellphone usage while driving. Requiring healthcare workers to be vaccinated against one of the leading illnesses that cause patients to visit their offices is a similar requirement. Receiving the influenza vaccine is akin to wearing personal protective equipment (PPE) like gloves or masks. Getting vaccinated not only promotes patient safety but protects healthcare workers from a disease they are easily exposed to on a daily basis. In addition, as vital members of the community, requiring healthcare workers to receive the influenza vaccine insures a high rate of community immunity and wellbeing throughout the State of Hawaii

That is why it is so critical that the legislature take action by passing SB 2394; it is the right thing to do for every member of our community. **We urge this committee to pass SB 2394 unamended.**

Thank you for the opportunity to testify.

**Testimony of  
Gary M. Slovin / Mihoko E. Ito  
on behalf of  
Walgreen Company**

DATE: February 24, 2016

TO: Senator Jill Tokuda  
Chair, Committee on Ways and Means  
*Submitted Via [CPHtestimony@capitol.hawaii.gov](mailto:CPHtestimony@capitol.hawaii.gov)*

RE: **S.B. 2394– Relating to Influenza Immunization**  
**Hearing Date: Thursday, February 25 at 9:30 a.m.**  
**Conference Room: 211**

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Dear Chair Tokuda and Members of the Committee on Ways and Means:

We submit this testimony on behalf of Walgreen Co. (“Walgreens”). Walgreens operates stores at more than 8,200 locations in all 50 states, the District of Columbia and Puerto Rico. In Hawaii, Walgreens now has 20 stores on the islands of Oahu, Maui and Hawaii.

Walgreens **supports** S.B. 2394, which requires annual influenza vaccinations for health care workers.

Walgreens is committed to promoting public health by improving the accessibility of vaccines, including the influenza vaccine. We believe that expanding the use of the influenza vaccine in the hospital setting will serve as a valuable preventative tool. It will also promote overall health and awareness, both within in the health care industry and our community.

Thank you very much for the opportunity to submit testimony on this measure.

---

Gary M. Slovin  
Mihoko E. Ito  
C. Mike Kido  
Tiffany N. Yajima

999 Bishop Street, Suite 1400  
Honolulu, HI 96813  
(808) 539-0840



**Eric P. Douglas**  
Senior Director, Government Affairs

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**p** 847.559.3422  
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[Eric.Douglas@CVSHealth.com](mailto:Eric.Douglas@CVSHealth.com)

The Honorable Jill Tokuda, Chair  
Senate Committee on Ways and Means

Thursday, February 25, 2016  
Conference Room 211; 9:30 AM

**RE: SB 2394 – Relating to Influenza Immunization–IN SUPPORT**

Aloha Chair Tokuda, Vice Chair Dela Cruz and members of the Committee:

CVS Health appreciates the opportunity to submit testimony in support of SB 2394. As you may be aware, CVS Health proudly operates as the largest pharmacy chain in Hawaii, under our Longs Drugs banner with some 70 locations employing approximately 2900 colleagues here in the Aloha State. We offer our patients and clients a wide range of comprehensive, integrated pharmacy and health operations statewide including: Pharmacy Benefit Management (PBM) services (CVS/caremark), Specialty Pharmacy (CVS/specialty), Mail-Order and Retail Pharmacy (CVS/pharmacy/Longs Drugs), Retail Health Clinics (CVS/minute clinic) as well as a distribution center.

SB 2394, as written, would require annual influenza vaccinations for health care workers (as defined). CVS Health supports this goal. CVS Health/Longs Drugs is deeply committed to Hawaii, including the health and safety of patients and healthcare workers alike. Therefore we believe that expanding the utilization of the influenza vaccine among Hawaii's health care workers will help promote overall community health as well as raise awareness around the influenza virus and vaccine. In the United States alone, more than 200,000 persons are hospitalized and from 3,000 to 49,000 of those individuals die (Prevention, 2013-2014). Sadly, many of these illnesses and deaths are preventable as the CDC estimates that the influenza vaccine prevented slightly over 7 million illnesses and over 3 million illnesses requiring medical attention and some 90,000 hospitalizations during the 2013-2014 influenza season alone.

On behalf of CVS Health/Long Drugs Hawaii, we would like to thank you for your consideration of our comments in support of this measure and ask that the Committee pass SB 2394.

Respectfully,

Eric P. Douglas

Aloha Leaders:

As an individual, Registered Nurse, and working Infection Control Nurse, I support SB2394 which will require healthcare workers to obtain an annual influenza vaccination. A flu vaccine is needed every influenza season for two reasons:

1. The body's immune response from vaccination declines over time, so an annual vaccine is needed for optimal protection; and
2. Flu viruses are constantly changing so the formulation of the flu vaccine is updated annually to protect you from the changing viruses.

There is overwhelming medical evidence that influenza vaccination save lives. Influenza, or "the flu," can vary from a mild to severe respiratory illness leading to hospitalization, secondary infections including pneumonia, and even death. Over 60,000 people die each year from flu-related complications. Vaccination prevents illness and when enough people are vaccinated, can protect the non-vaccinated from influenza.

There is also overwhelming evidence that the influenza vaccine is safe and effective in persons who do not have a contraindication to the vaccine or its components. There are numerous studies that have debunked the few reports claiming the vaccinations cause autism and other maladies.

As an infection control nurse, my responsibility is to protect patients and healthcare workers. One of the easiest ways to protect everyone during influenza season is through vaccination and education. I also manage influenza vaccination data reporting to the Centers for Disease Control and Prevention (CDC). As you know, Hawaii healthcare facilities are struggling to increase influenza vaccination among their workers. This legislation will help the healthcare facilities protect our patients and communities while increasing our vaccination rates to meet mandatory goals set by the government and other regulatory bodies.

Thank you so much for considering my testimony and SB2394.

Sincerely,

Anne K. Massie, RN

**From:** [mailinglist@capitol.hawaii.gov](mailto:mailinglist@capitol.hawaii.gov)  
**To:** [WAM Testimony](#)  
**Cc:** [cshibuya@yahoo.com](mailto:cshibuya@yahoo.com)  
**Subject:** Submitted testimony for SB2394 on Feb 25, 2016 09:30AM  
**Date:** Wednesday, February 24, 2016 10:20:51 AM

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**SB2394**

Submitted on: 2/24/2016

Testimony for WAM on Feb 25, 2016 09:30AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Chad Shibuya	Individual	Support	No

Comments: Please support SB2394 which supports Influenza Vaccination for Healthcare Workers. I serve as the Director of Infection Control and Prevention at Hilo Medical Center. As someone who is highly invested in the science of healthcare, I do believe in the value of vaccinations. I also believe in freedom of choice for individuals, but sometimes the greater good must also be considered. Vaccines are not perfect, especially the Influenza Vaccine, which is admittedly one of the poorer vaccines out there. But it is the best thing we have for now to protect people from seasonal influenza. The vaccine does not give people the flu, and it has no association with the increase in Autism cases. To the best of my knowledge, it is not a government conspiracy either. If there were a vaccine for Ebola, MERS, Dengue, or Zika, people would probably line up for that. People do not always consider Influenza to be a serious illness, but realistically, influenza is a serious illness that will sicken and kill more people in a given year than any current Emerging Infectious Disease. Not everyone shares my view, but vaccination for healthcare workers is a moral obligation. It is something simple that we can do to reduce the risk of us getting sick and potentially making other people sick. The more people who get vaccinated, the better it works.

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February 04, 2016 at 9:00am  
Conference Room 229

**Senate Committee on Commerce, Consumer Protection & Health**

To: **Senator Roz Baker, Chair**  
**Senator Michelle N. Kidani, Vice Chair**

Re: **Testimony in Support, SB 2394, Relating to Influenza Vaccination**

My name is Dr. Denise Cohen, PhD, APRN, FNP-BC, a Professor of Nursing at UH Maui College and Clinical Director of the UHMC Campus Health Center. I am in **strong support** of SB 2394 which would require mandatory influenza vaccinations for healthcare workers.

Influenza is a seasonal contagion that is of worldwide importance. It is usually self-limiting but may cause serious complications and death. Globally, severe influenza infections develop in 3-5 million people annually, resulting in approximately 250,000 – 500,000 deaths. Approximately 20% of children and 5% of adults worldwide develop symptomatic influenza each

In Addition, Doctors Polan, Tosh, and Jacobson (2005) suggested that:

*“Health organizations must take responsibility for curbing yearly epidemics that profoundly influence the health of our patients, our health care workers, our communities, and our global health. The US health care system has largely remained self-governing with regard to many health policies. With the recognition that voluntary health care worker immunization programs achieve only dismal vaccination rates among health care workers, the medical community should take decisive action .”*  
*(Poland, Tosh, and Jacobson, 2005, Vaccine 23, p.2251-2255)*

According to Stewart, Cox, and O’Conner (2011) of the George Washington University School of Public Health recommend:

*“Since 1981, the Centers for Disease Control and Prevention (CDC) has recommended that all health care workers (HCWs) receive an annual influenza vaccination. The Healthy People objectives aimed for 60% coverage of HCW influenza vaccination by 2010 and 90% coverage by 2020. Although influenza vaccine uptake among HCWs has trended upward over the past several years, the percentage of immunized HCWs has remained approximately 40% between 2004 and 2008.”*



Despite long standing recommendations by the Association for Professionals in Infection Control and Epidemiology (APIC), the Centers for Disease Control and Prevention (CDC) and other national healthcare organizations, the response to voluntary programs has failed to increase immunization rates to acceptable levels required to substantially reduce healthcare-acquired influenza. In Hawai'i, the health care worker vaccination level is in the bottom 10% for the entire nation. That is why it is so critical that the legislature take action by passing SB 2394.

Ensuring that all of our hospital health care workers receive the annual influenza vaccination is the right thing to do. Mandatory vaccination programs help health care personnel carry out their professional duty to provide care to all patients without the threat of undue harm caused by influenza transmission. The public has a right to expect that health care workers and the institutions in which they work will take all necessary and reasonable precautions to keep them safe and minimize harm.

Thank you for this opportunity to testify

I appreciate the opportunity to testify in strong support for SB2394. I would like to see this bill passed UNAMENDED.

In our family we have a Tutu and a Dad who have compromised immune systems. When in contact with hospital staff, it is to be expected that our loved ones will be protected from contracting flu in the hospital.

Everyone in our family gets the flu shot every year to better protect themselves; we expect that hospital staff will do the same. It's inconceivable that this is not happening now.

When I think of babies being born in a hospital setting, I hope for a safe environment for them to start their lives because their immune systems are vulnerable.

Please think of **all** of the patients that need protection as you discuss this bill.

Thank you for consideration.

Judy Strait-Jones

808 258 0078

1: Influenza vaccine is safe.

The most common side-effect is a local reaction of soreness at the vaccination site affecting 10%-64% of vaccinees and usually resolves in 2 days or less. (WHO, 2012)

A summary of documented reactions:

<b>Nature of Adverse event</b>	<b>Description</b>	<b>Rate/doses</b>
Mild	Local reactions Injection site reactions Generalized reactions Fever in children 1 – 5 years of age Fever in children 6 – 15 years of age	10 - 64 per 100 12 per 100 5 per 100
Severe	Anaphylaxis Guillain-Barré Oculo-respiratory syndrome (events of moderate severity)	0.7 per 1,000,000 1 – 2 per 1,000,000 76 per 1,000,000

(WHO, 2012)

2. Do the preservatives in some multi-dose vials of the influenza vaccine increase the risk for developing Alzheimer's Disease?

"No. Thimerosal, a preservative that contains minute amounts of mercury, has been safely used in some vaccines and other products since the 1930's. No convincing evidence suggests that any harm has been caused by the low doses of mercury in vaccines. Despite scare stories linking flu shots with Alzheimer's disease, scientific studies suggest just the opposite: Alzheimer's risk declines among those vaccinated against diphtheria, tetanus, polio, and influenza. Moreover, a study published in the Journal of the American Medical Association on Nov. 3, 2004, showed that annual flu shots for older adults were associated with a reduced risk of death from all causes." (Weil, 2010)

3. Influenza is a serious illness killing approximately 36,000 Americans each year, about the same as breast cancer (40,000) and three times as many as HIV/AIDS (14,000). (Poland, Tosh, & Jacobson, 2005)

4: Influenza infected health care workers transmit influenza to patients.

In an influenza A, outbreak in a neonatal intensive care unit in 1998, 19 of the 54 patients on the ward tested positive for influenza A. Of these 19, 6 were symptomatic and 1 died. In a survey of the 150 medical staff involved during the outbreak, only 15% had received the influenza vaccination including 67% of physicians and 9% of nurses. Only 29% of staff with symptomatic influenza took time off from work. (Cunney, Bialachowski, Thornley, Smaill, & Pennie, 2000)

Another outbreak the same year in another bone marrow transplant unit illustrates the devastation that a hospital outbreak can have on its most vulnerable patients. Of the 25 confirmed cases of nosocomial pneumonia in the hospital, 40% were in the BMT ward, 2 of which died [21]. Surveys during this outbreak revealed a 12% vaccination rate among health care workers on the unit. The following influenza season, despite of an aggressive eight-pronged, but voluntary education program, 42% of health care workers on the bone marrow transplant unit still failed to receive influenza vaccine. (Weinstock, et al., 2000)

5. Influenza vaccine of health care workers is protective of patients.

A Scottish study compared mortality rates between long-term care hospitals that offered influenza vaccination to health care workers, where 51% were vaccinated, and hospitals that did not, where only 5% were vaccinated [7]. The result was nearly a 40% reduction in all-cause mortality among the patients cared for by the health care workers in the hospitals with higher levels of health care worker influenza vaccination. (Carman, et al., 2000)

6. Influenza vaccination of health care results in less lost work hours and saves money.

“Nichol et al. reported that healthy working adults who receive influenza vaccination have 25% fewer upper respiratory infections, 44% fewer doctor visits, and 43% fewer sick days off, saving an average of \$47 per person annually. A previous study by Nichol et al. revealed that among three different cohorts of 25,000 adults each studied over 3 years, influenza vaccination reduced pneumonia and influenza hospitalizations by 48–57%, all acute and chronic respiratory conditions by 27–39%, and all-cause mortality by 39–54%. This resulted in a direct savings per year averaging \$117 per person immunized.” (Poland, Tosh, & Jacobson, 2005)

7. Influenza vaccination of health care workers has been recommended by the CDC since 1981. (CDC, 2014) Nonetheless, voluntary immunizations programs in U.S. hospitals have failed to result in high rates of health care worker immunization.

## References

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**Senate Committee on Ways and Means**

To: Senator Jill N. Tokuda, Chair  
Senator Donovan M, Dela Cruz, Vice Chair

From: Laura Westphal RN MBA CPHQ  
Chief Nursing Officer Castle Medical Center

**Re: Testimony in Support, SB, 2394 Relating to Influenza Vaccination**

My name is Laura Westphal and serve as the past president of AONE Hawaii. AONE represents 150 nurse leaders in almost every aspect of the health care continuum in Hawaii. In addition, I am currently the CNO and Vice President of Patient Care at Castle Medical Center.

AONE Hawaii is writing in **strong support** of SB 2394 which would require mandatory influenza vaccinations for health care workers.

Despite long standing recommendations by the Association for Professionals in Infection Control and Epidemiology (APIC), the Centers for Disease Control and Prevention (CDC) and other national healthcare organizations, the response to voluntary programs has failed to increase immunization rates to acceptable levels required to substantially reduce healthcare-acquired influenza. In Hawai'i, the health care worker vaccination level is in the bottom 10% for the entire nation. That is why it is so critical that the legislature take action by passing SB 2394.

Ensuring that all of our hospital health care workers receive the annual influenza vaccination is the right thing to do. Mandatory vaccination programs help health care personnel carry out their professional duty to provide care to all patients without the threat of undue harm caused by influenza transmission. The public has a right to expect that health care workers and the institutions in which they work will take all necessary and reasonable precautions to keep them safe and minimize harm.

Castle Medical Center moved last year to mandatory influenza vaccination in 2015 and had an excellent response and participation from our associates.

Thank you for the opportunity to testify.

February 24, 2016 at 8:00am

**Senate Committee on Commerce, Consumer Protection & Health**

**To: Senator Roz Baker, Chair  
Senator Michelle N. Kidani, Vice Chair**

**From: Hawaii Immunization Coalition**

**Re: Testimony in Support, SB 2394, Relating to Influenza Vaccination**

My name is Dr. Celeste M. Baldwin, PhD, CNS, APRN and I live on Maui

I am writing as a nurse in **strong support** of SB 2394 which would require mandatory influenza vaccinations for health care workers. In the United States, anywhere from 5% to 20% of the population contracts influenza every year and more than 200,000 people are hospitalized from seasonal flu-related complications. Annual influenza-associated deaths range from 3,000 to 49,000. However, many of these illnesses and deaths are preventable. The most efficient method of preventing annual influenza epidemics is through pre-exposure vaccination. The CDC estimates that influenza vaccination prevented approximately 7.2 million illnesses, 3.1 million medically attended illnesses, and 90,000 hospitalizations associated with influenza in the 2013-14 influenza season.

Despite long standing recommendations by the Association for Professionals in Infection Control and Epidemiology (APIC), the Centers for Disease Control and Prevention (CDC) and other national healthcare organizations, the response to voluntary programs has failed to increase immunization rates to acceptable levels required to substantially reduce healthcare-acquired influenza. In Hawai'i, the health care worker vaccination level is in the bottom 10% for the entire nation. That is why it is so critical that the legislature take action by passing SB 2394.

Ensuring that all of our hospital health care workers receive the annual influenza vaccination is the right thing to do. Mandatory vaccination programs help health care personnel carry out their professional duty to provide care to all patients without the threat of undue harm caused by influenza transmission. The public has a right to expect that health care workers and the institutions in which they work will take all necessary and reasonable precautions to keep them safe and minimize harm.

Because of the lack of others in healthcare taking the need to vaccinate seriously, it is imperative that we raise the bar of expectations. I have seen student nurses and staff nurses come to work with the flu endangering patients and their peers. To rectify this, policies within each organization will need to adapt to each individual and their needs regarding sick time, as some organizations are quite punitive about sick calls. It will also require that the employers work with their staff to make this happen. Without a law to turn to, it will be more difficult for employers to increase the immunization rate for influenza. Employers need this bill to pass in order to make this change happen.

Mahalo, for taking the time to hear the thoughts of those in the trenches.

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**SB2394**

Submitted on: 2/24/2016

Testimony for WAM on Feb 25, 2016 09:30AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Pamela Carey-Goo	Individual	Support	No

Comments: As a nurse, infection preventionist and patient advocate I support the annual influenza vaccine for healthcare workers. I believe we should be for patient safety which includes preventing giving our patients infections and communicable diseases. The best thing we have available right now to protect ourself and others from the flu is the influenza vaccine.

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**SB2394**

Submitted on: 2/24/2016

Testimony for WAM on Feb 25, 2016 09:30AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Ron Klapperich	Individual	Support	No

Comments: The workers need to be protected from illnesses even more than they need to be from second hand smoke. It seems ironic that they're not allowed to smoke on the campus but they can spread the flu around if they choose not to get the seasonal vaccine.

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**Date:** Wednesday, February 24, 2016 4:39:00 PM

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**SB2394**

Submitted on: 2/24/2016

Testimony for WAM on Feb 25, 2016 09:30AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Rowena Okumura	Individual	Support	No

Comments:

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**Written Testimony Presented Before the  
Senate Committee on Ways and Means  
February 25, 2016 9:30 a.m.  
by  
Susan Lee BSN, RN, WCC**

**SB 2394 RELATING TO INFLUENZA IMMUNIZATION.**

Chair Tokuda, Vice Chair Dela Cruz, and members of the Senate Committee on Ways and Means, thank you for this opportunity to provide testimony in support for SB 2394 Relating to Influenza Immunization.

Research indicates that health care providers unvaccinated for influenza contribute to health care facility-related influenza outbreaks. Further, these outbreaks lead to increased patient morbidity and mortality, worker illness and absenteeism, and increased economic cost to the health care system.

1 Stewart, A. M., & Cox, M. A. (2013). State law and influenza vaccination of health care personnel. *Vaccine*, 31(5), 827-832. doi:10.1016/j.vaccine.2012.11.063

With regard to the nursing workforce, I support of this measure as a means to reduce exposure and potential illness from influenza through effective vaccination programs. Such programs will increase the safety of the health care system for its patients by its health care workers.

As an employee health nurse to over 350 employees both in direct and non- direct patient geriatric care I strongly urge this bill to protect our Kapunas and reduce the outbreak of influenza each year. I offer free influenza vaccines for all employees and still have only 71% of my nursing staff taking the vaccine and 76% of all employees. The percentages should be higher!

Therefore, I respectfully requests that the Senate Committee on Commerce, Consumer Protection, and Health consider SB 2394 favorably at this time. Thank you for your continued support of nursing in Hawai'i and for the time and consideration of this bill.

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**SB2394**

Submitted on: 2/24/2016

Testimony for WAM on Feb 25, 2016 09:30AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Thaddeus Pham	Individual	Support	No

Comments: As a public health employee, I fully support this bill UNAMENDED to ensure that our healthcare workers not only stay healthy but that they also keep from spreading disease to their patients.

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**SB2394**

Submitted on: 2/24/2016

Testimony for WAM on Feb 25, 2016 09:30AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
zeshan chisty	Individual	Support	No

Comments: This bill will help keep patients and healthcare workers safe and healthy.

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**SB2394**

Submitted on: 2/23/2016

Testimony for WAM on Feb 25, 2016 09:30AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Anna Tognaci	Individual	Oppose	No

Comments: There is overwhelming evidence that the flu-shot should not be mandated here is just one example: Please refer to below: Dr. Geier goes on to explain that flu is “the wrong thing to vaccinate against” because you have to keep re-vaccinating against it every year, unlike childhood infectious diseases, such as smallpox, that are only vaccinated for once. Dr. Geier points out how ridiculous it is spend billions of dollars on a vaccine that might, at its best, save about 50 lives a year, when there are far more serious problems causing death that are more worthy of that kind of expenditure. Mandatory Flu Vaccines for Healthcare Workers Violates HIPAA Law in the U.S. Dr. Karen Sullivan Sibert, MD, points out that the government mandate in Los Angeles County for healthcare workers who refuse to take an annual flu shot to wear a mask while on duty violates the HIPAA privacy law. She points out that hospitals are not requiring patients’ visitors and families to provide evidence of flu vaccination or wear masks, though they go in and out of patient care areas at will. Sited: <http://healthimpactnews.com/2014/doctors-against-mandated-flu-vaccines/>

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**From:** [Hang, Candace](#)  
**To:** [WAM Testimony](#)  
**Subject:** oppose sb2394  
**Date:** Wednesday, February 24, 2016 9:46:26 AM

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Dear WAM committee

I am writing to urgently plead that you **oppose bill SB 2394**. This bill mandates healthcare workers to obtain the influenza/flu shot and is scheduled to be heard on 2/25/16 at 0930.

I feel that it is truly an injustice to mandate such a thing.

I am a registered nurse and am including our unions position statement regarding this bill.

The following is our OPEIU Nurse Council's position statement regarding the Mandatory Influenza Immunization Initiative:

### FLU VACCINES FOR HEALTHCARE WORKERS

WHEREAS, OPEIU Nurse Council supports flu prevention for patients and the general public; and

WHEREAS, nurses and other healthcare workers have a duty and a right to protect patients. Recent evidence shows mandatory flu vaccinations and masking policies fail these tests; and

WHEREAS, flu vaccination policies requiring healthcare workers to be vaccinated have proliferated since the Virginia Mason case in 2004; and

WHEREAS, such policies vary greatly from locale to locale; and

WHEREAS, mandatory flu vaccinations as a condition of employment is unfair to healthcare workers; and

WHEREAS, many employers have implemented religious exemptions to mandatory flu vaccination for their healthcare workers; and

WHEREAS, many of those religious exemptions are vague and inconsistent with federal discrimination laws; and

WHEREAS, the billion dollar pharmaceutical companies who provide flu vaccinations are lobbying Congress for a national policy requiring flu vaccination for healthcare workers; and

WHEREAS, Medicare reimbursement rates may be effected by the number of healthcare workers who are vaccinated at that healthcare facility; and

THEREFORE BE IT RESOLVED that the OPEIU 26th Convention commit itself to lobby for legislation requiring employers to educate their healthcare workers as to the benefits and limitations of flu vaccination and for healthcare employers to implement effective infection control to prevent the spread of flu without mandatory flu vaccination for employees.

Please consider opposing bill SB2394  
With hope

Candace Hang  
509 University Ave  
HNL HI 96826



February 24, 2016

To: Senator Jill Tokuda, Chair and Senator Donovan Dela Cruz, Vice Chair and Senate Members of the Senate Ways and Means Committee

From: Cheryl Toyofuku, Pearl City, HI

Re: **Strong Opposition to SB 2394** relating to influenza vaccination

Decision Making Meeting: Thursday, February 25, 2016 at 9:30 a.m., Hawaii State Capitol, Room 211

I strongly oppose SB 2394. The State should not **REQUIRE** annual influenza vaccinations for health care workers. According to the bill, this mandate to receive the influenza vaccine as a precondition to employment and on an annual basis is in accordance with the latest recommendations from the Advisory Committee on Immunization Practices of the Center for Disease Control. As stated in my testimony for another bill: SB 2393, public confidence in these national vaccine policy makers is at an all time low. Valid reasons were stated for the violation of public trust, health and safety.

As SB 2394 states, “health care professionals are looked to for guidance on good health practice and receiving the flu vaccine set a positive example to the community”. But, please be aware that this bill is removing individual health care rights of these professionals. Here are some reasons why the State must not mandate vaccinations:

- Although this bill provides for medical and religious belief exemptions, the agenda and strategy to mandate vaccines is evidently sweeping our country, not only to health care workers, but to the general public. Removing exemptions will be the next step in violating our health care freedom.
- Thousands of adverse reactions to vaccines are reported to the Vaccine Adverse Events Reporting System. For the influenza vaccine, there are more than 104,465 adverse reactions, 9037 hospitalizations, 2003 injuries & disabilities and 1, 115 deaths. Adverse reactions include syncope, muscle aches & weakness, headache, arthralgia, gastrointestinal symptoms, lymphadenopathy, eye disorders, allergic reactions including anaphylaxis, angioedema, rhinitis, laryngitis, cellulitis, nervous system disorders such as dizziness, paresthesia, hypoesthesia, hypokinesia, tremor, somnolence, Guillan Barre syndrome, convulsions/seizures, facial or cranial nerve paralysis, encephalopathy, limb paralysis, insomnia, dyspnea, bronchospasm, throat tightness, rash.
- Regular flu shots contain egg protein and avian contaminant viruses, formaldehyde (carcinogen), resin (known allergen), thimerisol (mercury) in multi-dose vials (neurotoxic), triton x00 (detergent), gentamycin (antibiotic), polysorbate 8 (allergen, infertility in mice), sucrose (table sugar), gelatin (known allergen), aluminum (neurotoxin), ethylene glycol (antifreeze used as a disinfectant)
- Government health agencies and vaccine manufacturers spend an incredible amount of time, energy and tax dollars promoting the flu vaccine annually, along with the increasing schedule for other toxic vaccines. Wisdom should dictate that industry profits should not be prioritized over public health safety.

As our lawmakers, you are encouraged to invest time, energy, research and resources into other health programs that promote healthy lifestyles and health care, instead of adopting federal health policies that mandate more toxic vaccinations.

Dear Lawmakers,

Hawaii Nurses Association (HNA), is the exclusive representative for Registered Nurses (RN), employed at the majority of non-state/gov health care facilities statewide. We have proudly represented our members for almost 100 years. HNA remains dedicated to improvements to safe working conditions within the healthcare industry.

However, in regards to [HB 1946](#) and [SB 2393](#) and [HB 1945](#) and [SB 2394](#) our concerns surrounds the potential affects this will have on our members and their right to bargain the impact and implementation of these policies.

The Union recognizes the purpose of influenza vaccinations and supports those who desire to be vaccinated. Influenza vaccine is commonly available during the fall of each year and is encouraged as a proactive measure to help decrease the presence of transference of the influenza virus. However, recent review of study has proven the efficacy of the flu vaccine to be as low as 1 month following inoculation. Influenza vaccinations have also yet to obtain a 60% efficacy rate which can last longer than 6 months. In comparison to TB, polio, small pox vaccines which are effective 100% of the time and are mandated, the CDC only recommends influenza vaccination. The Union believes that flu vaccinations should remain voluntary and optional at all healthcare facilities.

Developing an Immunization policy in a healthcare facility has never been an issue for Union support. However, due to the variances from one health care facility to another, the right to bargain the impact and implementation of such immunization policies are paramount for Unions exclusively. Reasonableness of such policies are often the challenge; from mandatory vaccinations with limited exemptions and stringent disciplinary actions for violators including termination, to vaccinations and masks with no exemptions, to no vaccination so wear a mask with no exceptions, and HIPPA violations. These variances call for Unions to discuss and possibly bargain the impact and implementation of such policies to protect their member's interests and to honor "just cause". These policies have continued to morph into less reasonable forms now being proposed to law makers to sustain the unreasonableness of their vaccination policies.

We are also well aware of the 2% reimbursement which health care facilities will gain for achieving certain levels of inoculation within their facilities, which appears to be a potential buy in for these businesses. But law makers need to respect civil rights of health care workers from big business ploys like this.

This opens up the door for more businesses to go crying to law makers to fight their battles because they are not able to be reasonable with their workers and their Union, when they want to make an extra buck. They're not awarding all those who get vaccinated, our members with this money. Employers feel

that by offering it free is a way of giving. But making it a job requirement is not giving, HCW's basically must comply with it or else...our concerns continue to rise!

Mandatory flu vaccination questions:

Will my personal health care information and privacy be protected if I choose to or not elect to be vaccinated with the influenza vaccine?

Will I lose my job in the healthcare facility I work in if I so choose not to elect to be vaccinated with the influenza vaccine?

Can I continue to elect not to receive the influenza vaccine as long as I want?

Am I receiving the same vaccine as those covered by CMS?

I notice that all CMS insured influenza vaccines contain thimerosal. Can I be disciplined by my health care facility if I refuse to accept this vaccine because it contains thimerosal?

Are there influenza vaccines insured by CMS that do not contain thimerosal?

What happens if my health care facility refuses to purchase non-thimerosal vaccines; will the employer be forced to pay for a non-thimerosal vaccine if I chose to get it from a different vendor?

What happens if I get sick with flu like symptoms, after receiving the influenza vaccine, will law makers allow employers to discipline me, or use this time period towards an attendance policy violation?

Will influenza policies include philosophical exemptions?

What about health care workers civil rights and personal rights?

Why do we have a National Childhood Vaccine Injury Act of 1988, which provide federal dollars "vaccine injury compensation program" for vaccine injury victims, if vaccines were safe?

I hope you will not accept these changes these Bills will impose on our members and future members, at this time. This requires much more critical thinking and discussions with other experts in this field. I do offer my services as well.

Thank you for your consideration,

Print Name \_\_\_\_\_

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**SB2394**

Submitted on: 2/23/2016

Testimony for WAM on Feb 25, 2016 09:30AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
denise woods	Individual	Oppose	No

Comments: Hello, I am writing to oppose forcing health care workers to take a medication (the flu vaccine) that has no proven efficacy. We need to base our health care decisions on evidence based practice. There is no evidence that the flu vaccine is ever a good match, and even if it is, there is no proof that it reduces the severity or incidence of influenza (please see package insert that comes with flu vaccines for this information). It is a civil rights violation to force any group of people to take a medication, but it is so much more offensive when the medication has no proof or working, but does have common side effects of pain, malaise, fatigue and body aches for 1-2 days after injection. This is absurd and insulting. Denise Woods, RN Kapaa, HI

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**SB2394**

Submitted on: 2/24/2016

Testimony for WAM on Feb 25, 2016 09:30AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Jessica Mitchell	Individual	Oppose	No

Comments:

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**SB2394**

Submitted on: 2/24/2016

Testimony for WAM on Feb 25, 2016 09:30AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Karen Maclsaac	Individual	Oppose	No

Comments:

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**SB2394**

Submitted on: 2/24/2016

Testimony for WAM on Feb 25, 2016 09:30AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Lois J Young	Individual	Oppose	No

Comments: Dear Sirs: Thank you for your public service to our beloved state. I'm writing in opposition to mandatory vaccination of healthcare workers based on our right to choose what goes in our body. I've read controversial information and prefer to side with caution considering some of the ramifications of the flu shot. Please be mindful of our personal right to vaccinate. Please vote NO on this bill. thank you, Lois Young

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Chair Tokua, Vice Chair Dela Cruz, and members of Senate Committee on Ways and Means thank you for the opportunity to provide testimony opposing SB 2394 relating to influenza immunization.

According to the CDC, the 2014-2015 flu shot was only approximately 19% effective.

Flu shots are invasive medical procedures and can induce a range of symptoms including Guillan-Barre Syndrome and anaphylactic reactions.

The Cochrane Collaboration concluded "There is no evidence that only vaccinating healthcare workers prevents laboratory-proven influenza or its complications (lower respiratory tract infection, hospitalization or death due to lower respiratory tract infection) in individuals aged 60 or over in Long Term Care Institutions and thus no evidence to mandate compulsory vaccination of healthcare workers".

Physicians, in the American Medical Association Code of Ethics, affirm philosophical and religious exemptions for themselves. Employees should not be discriminated against for choosing not to take a flu vaccine.

Nobody should be forced to have to choose between the flu shot and their job.

Sincerely,

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I OPPOSE HB 1945 and SB 2394, which would mandate health care workers receive a yearly flu vaccine.

As a registered nurse of 19 years, one of the most important aspects of my job is patient safety and I know this is true for every healthcare professional who enters this field for the right reasons. That being said, protecting our patients begins with taking care of ourselves and many feel the flu vaccine is one such way. I know I believed this for many, many, years. That was until a series of personal events in my daughter's health *forced* me to look outside of conventional medicine after it miserably failed her for 2 1/2 years. Much personal learning was obtained through that time and through it I learned and continue to learn ways to improve my own health. I also learned at this time about the flu vaccine and how unpredictable it is from year to year. Directly from the CDC's own website, a table covering annual flu vaccine effectiveness from 2005-2015 showed a range from 10%-60% effective. Based on this information, their own data proves that on any given year the flu vaccine has a 40-90% failure rate. The reason being, again directly from the CDC, "recent studies show vaccines can reduce the risk of flu illness by about 50-60% among the overall population during seasons *when* most circulating flu viruses are like the viruses the flu vaccine is designed to protect". Even with their own data supporting otherwise, the vaccine is promoted as being highly effective. A prime example of this failure is last years abysmal 18% effectiveness rate. Despite its very low effectiveness rate the CDC continued to push this vaccine to the bitter end of flu season. Of course when you produce close to 200 million vaccines there is a lot of money to be lost if they go unused. the CDC also admits that "determining how well a flu vaccine works is challenging" and that "during years when the flu vaccine is not well matched to circulating viruses, it's possible that *no* benefit from flu vaccination may be observed." Flu vaccines target three to four flu viruses that are predicted to be the most common types for the upcoming flu season. However, there are over 300 kinds of flu viruses, and it takes your body from two weeks to three months to produce a full viral response to the vaccine. Three months after vaccination, the vaccine is essentially useless to your body's immune system, although the damaging, long-term side effects may last a lifetime. Flu vaccines also affect the unborn. Tragically, the rate of miscarriages among pregnant women who received flu vaccines during the 2009-2010 season increased 4,250 percent, a frightening statistic which was carefully hidden from the public by the CDC, until a CDC doctor was confronted and admitted that the CDC was aware of the spike in fetal deaths.

Another important fact is that our law says that you must do a double blind field study to prove *efficacy and long-term safety* yet when it comes to the flu vaccine the law for some reason is not followed! These studies cannot be done because every year a new flu vaccine must be produced based on the educated guesses of the scientist on what flu strains may be most prevalent for the upcoming flu season, hence the unpredictability. The law also states that you must tell people it is an experimental vaccine if there is no safety and efficacy testing. I had never been told, that the flu vaccines I had received in the past were experimental, have you? Where is the informed consent?

I also learned of the serious, if not life threatening side effects. 330 deaths have been reportedly caused by the flu vaccine, and over 103,000 adverse events have been reported, numbers that could realistically be increased significantly due to underreporting. One study of flu vaccine statistics shows that thirty percent of flu vaccines result in unwanted side effects, with up to six percent including serious effects such as hospitalization, permanent disabilities, paralysis, brain damage, increased risk of contracting swine flu, allergic reactions, narcolepsy, Guillain-Barre syndrome, increased risk of Alzheimer's disease, and death. It is we, the healthcare workers who care for these vaccine injured patients. I was even told by a hospital administrator that this is the reason they have one of the lowest flu vaccine compliance rates in the ICU, because they are the ones who care for the vaccine injured, i.e. the Guillain-Barre syndrome patients. It is the reason one of my co-workers refuses the flu shot. If you have to force educated healthcare workers to take a flu shot maybe it is time to pause and ask why?

Healthcare workers must be permitted to refuse the annual seasonal influenza vaccination without fear of reprisal for medical, religious, or personal reasons. NOBODY should be forced to have to choose between a flu shot and their job. Although nurses and other healthcare workers have a duty and a right to protect patients, recent evidence shows mandatory flu vaccinations fail to provide any benefit. On its own website, Physicians, in the American Medical Association Code of Ethics, affirm philosophical and religious exemptions for themselves. Employees should not be discriminated against for choosing not to take a flu vaccine. The exemption clause for all these reasons should be extended to the healthcare worker and the masking policy for those exempted be removed. I have not found one study that proves masking healthy individuals reduces the spread of the flu vaccine. The only purpose it does serve is to make a healthcare worker so uncomfortable that they give in and take the flu shot. It is a manipulative and coercive tactic, nothing more, nothing less. Another concern that has been expressed by nurses I work with is, how would a psychiatric patient, one with possibly paranoia, or schizophrenia, or even pediatric patients, perceive a masked healthcare worker. Can you imagine a toddler having a masked nurse caring for him or her for 8-12 hours? Or have you ever tried to effectively communicate with a mask on, especially with someone who may have hearing impairment and may need to read lips. If a study does exist on the benefits of masking then based on the **unpredictability** of the flu vaccine I propose that **ALL** Healthcare workers, vaccinated and unvaccinated mask for the entire flu season because isn't this what this policy is about preventing the spread of the flu virus?

Sincerely,  
Maly Nakoa

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**Subject:** \*Submitted testimony for SB2394 on Feb 25, 2016 09:30AM\*  
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**SB2394**

Submitted on: 2/24/2016

Testimony for WAM on Feb 25, 2016 09:30AM in Conference Room 211

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Yvonne Geesey	Individual	Oppose	No

Comments:

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