

SB846



STATE OF HAWAII  
DEPARTMENT OF EDUCATION  
P.O. BOX 2360  
HONOLULU, HAWAII 96804

**Date:** 02/04/2015  
**Time:** 01:15 PM  
**Location:** 229  
**Committee:** Senate Education

**Department:** Education

**Person Testifying:** "Kathryn S. Matayoshi, Superintendent of Education"

**Title of Bill:** SB 0846 RELATING TO EDUCATION.

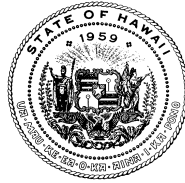
**Purpose of Bill:** Authorizes Department of Education (DOE) employees and agents to volunteer to administer auto-injectable epinephrine to a student with anaphylaxis in an emergency situation. Allows DOE to make arrangements to receive auto-injectable epinephrine supplies from manufacturers or suppliers. Requires DOE to report on the status of implementation.

**Department's Position:**

The Department of Education (Department) supports the intent of SB 846. This bill will allow Department employees and agents to volunteer to administer epinephrine in an emergency situation to students with anaphylaxis when needed. Volunteers will also receive training in the proper administration of epinephrine.

Parents or guardians provide the school with any medication required to be administered to their child during the school day.

However, the Department has concerns about the potential fiscal implications related to any direct purchases of auto-injectable epinephrine supplies from auto-injectable manufacturers or suppliers. As such, the Department respectfully requests that the following language be removed from this measure (p.3, lines 11-13): *"The department may also make arrangements to receive auto-injectable epinephrine supplies from auto-injectable epinephrine manufacturers or suppliers."*



STATE OF HAWAII  
DEPARTMENT OF HEALTH  
P. O. Box 3378  
Honolulu, HI 96801-3378  
doh.testimony@doh.hawaii.gov

**Testimony in SUPPORT of SB 846  
Relating to Education**

SENATOR MICHELLE N. KIDANI, CHAIR/SENATOR JOSH GREEN, CHAIR  
SENATE COMMITTEE ON EDUCATION/HEALTH

Hearing Date: February 4, 2015

Room Number: 229

- 1 **Fiscal Implications:** Purchase and resupply of auto-injectable epinephrine annually at Department of  
2 Education (DOE) schools.
- 3 **Department Testimony:** The purpose of this bill is to enable schools to have trained, volunteer DOE  
4 employees or agents who could provide emergency administration of epinephrine for anaphylaxis to  
5 students that have a prescription from their physician. This will increase the availability of individuals  
6 who could respond to a student with anaphylaxis by providing intramuscular epinephrine quickly and  
7 safely.
- 8 Parents of students provide auto-injectable epinephrine to the school based on prescriptions provided  
9 by the student's physician, nurse practitioner or physician assistant. Participation of the manufacturer  
10 in the procurement process through the DOE, instead of the parent, does not provide additional benefit.
- 11 **Offered Amendments:** Remove statement on page 3, line 11-13: "The department may also make  
12 arrangements to receive auto-injectable epinephrine supplies from auto-injectable epinephrine  
13 manufacturers or suppliers."



**S E A C**  
**Special Education Advisory Council**

919 Ala Moana Blvd., Room 101

Honolulu, HI 96814

Phone: 586-8126 Fax: 586-8129

email: [spin@doh.hawaii.gov](mailto:spin@doh.hawaii.gov)

February 4, 2015

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Advisory Council**

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Ms. Martha Guinan, *Vice  
Chair*

Ms. Brendelyn Ancheta  
Dr. Tammy Bopp  
Dr. Robert Campbell  
Ms. Deborah Cheeseman  
Ms. Annette Cooper  
Ms. Shari Dela Cuadra-Larsen,  
*liaison to the Superintendent*  
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Ms. Jenny Gong  
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Ms. Valerie Johnson  
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Ms. Kau'i Rezentes  
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Dr. Daniel Ulrich  
Dr. Amy Wiech  
Ms. Cari White  
Ms. Jasmine Williams  
Ms. Susan Wood

Amanda Kaahanui, Staff  
Susan Rocco, Staff

Senator Michelle N. Kidani, Chair  
Senate Committee on Education  
Senator Josh Green, Chair  
Senate Committee on Health  
State Capitol  
Honolulu, HI 96813

RE: SB 846 - Relating to Education

Dear Chairs Kidani and Green and Members of the Committees,

The Special Education Advisory Council (SEAC), Hawaii's State Advisory Panel under the Individuals with Disabilities Education Act (IDEA), **supports** SB 846 that allows for the emergency administration of auto-injectable epinephrine by school staff who volunteer to do so and requires instruction of volunteers by a qualified health care professional.

Students who have experienced anaphylaxis in the past are likely to experience it again. Symptoms of anaphylaxis usually occur within five minutes to two hours after exposure to the allergen. Many students are able to self-administer injectable epinephrine after exposure to an allergen known to trigger a severe allergic reaction.

SB 846 provides needed protection for a student who is unable to administer the auto-injectable epinephrine independently, as in the case of a preschool student or a student with a physical or cognitive disability. Early administration of epinephrine will help to prevent more life-threatening symptoms and medical complications.

Thank you for the opportunity to provide testimony on this potentially life-saving legislation. If you have questions or concerns, I would be happy to address them.

Respectfully,

Ivalee Sinclair, Chair



COMMUNITY CHILDREN'S COUNCIL OF HAWAII  
1177 Alakea Street • B-100 • Honolulu • HI • 96813  
TEL: (808) 586-5363 • TOLL FREE: 1-800-437-8641 • FAX: (808) 586-5366

February 3, 2015

Senator Michelle Kidani  
Chair Senate Committee on Education – Hawaii State Capitol  
Senator Josh Green  
Chair Senate Committee on Health – Hawaii State Capitol

RE: SB846 - RELATING TO EDUCATION

Dear Chairs Kidani and Green, Vice-Chairs Harimoto and Wakai, and Members of the Committees,

The 17 Community Children's Councils (CCCs) of Hawaii **strongly supports SB846** which authorizes the Department of Education (DOE) employees and agents to volunteer to administer auto-injectable epinephrine to a student with anaphylaxis in an emergency situation. It allows DOE to make arrangements to receive auto-injectable epinephrine supplies from manufacturers or suppliers and requires DOE to report on the status of implementation.

The U.S. Centers for Disease Control reported that food allergies result in more than 300,000 ambulatory-care visits a year among children under the age of 18 and teenagers and young adults with food allergies are at the highest risk of fatal food-induced anaphylaxis. Once an anaphylactic reaction starts, epinephrine is the first line of defense to treat the reaction. Worldwide, sensitization rates to one or more common allergens among school children are currently approaching 40%-50%. (World Health Organization, 2011-2012) It is possible to have anaphylaxis without any skin symptoms (no rash, hives) and the failure to promptly (i.e., within minutes) treat anaphylaxis with epinephrine is a risk factor for fatalities. Symptoms of anaphylaxis may recur after initially subsiding and experts recommend an observation period of about four hours to monitor that the reaction has been resolved.

The CCCs are community-based bodies comprised of parents, professionals in both public and private agencies and other interested persons who are concerned with specialized services provided to Hawaii's students. Membership is diverse, voluntary and advisory in nature. The CCCs are in rural and urban communities organized around the Complexes in the Department of Education.

We respectfully request your consideration of **SB846**. Should you have any questions or need additional information, please contact the Community Children's Council Office (CCCO) at 586-5363. Thank you for considering our testimony,

Tom Smith, Co-Chair

Jessica Wong-Sumida, Co-Chair

(Original signatures are on file with the CCCO)

**Comments of  
Gary M. Slovin / Mihoko E. Ito  
on behalf of  
Walgreens**

DATE: February 3, 2015

TO: Senator Michelle Kidani  
Chair, Committee on Education

Senator Josh Green  
Chair, Committee on Health

*Submitted Via Capitol Website*

RE: **S.B. 846 – Relating to Education**  
**Hearing: Wednesday, February 4, 2015, 1:15 p.m.**  
**Conference Room: 229**

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Dear Chair Kidani, Chair Green, and Members of the Committees,

We submit these comments on behalf of Walgreen Co. (“Walgreens”). Walgreens operates more than 8,200 locations in all 50 states, the District of Columbia and Puerto Rico. In Hawai`i, Walgreens now has 17 stores on the islands of Oahu, Maui and Hawai`i.

Walgreens **supports** S.B.846, which authorizes DOE employees and agents to volunteer to administer auto-injectable epinephrine to a student with anaphylaxis in an emergency situation, and allows DOE to make arrangements to receive auto-injectable epinephrine supplies from manufacturers or suppliers.

Anaphylaxis is a life threatening allergic reaction that can occur when people are exposed to an allergen. The availability of an epinephrine auto-injector can be life-saving to a person experiencing this type of allergic reaction. Walgreens supports this measure because it expands access to a critical drug that can save children’s lives and meet an important public health need.

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

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

999 Bishop Street, Suite 1400  
Honolulu, HI 96813  
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**Richard Okazaki**  
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February 3, 2015

Senate Committee on Education and Senate Committee on Health  
Michelle N. Kidani, Chair and Josh Green, Chair  
Breene Harimoto, Vice Chair Glenn Wakai, Vice Chair  
Hawaii State Senate  
Hawaii State Capitol, Room 229  
Honolulu, Hawaii 96813

Dear Chairs Michelle N. Kidani and Josh Green:

On behalf of the Community Leadership Board of the American Diabetes Association (ADA), and the over 500,000 individuals who have prediabetes or diabetes in Hawaii, I am writing to ask for your full support of **SB846 with amendments** to ensure the care, safety, and education of students with diabetes in Hawaii.

**Please provide favorable support of the American Diabetes Association's (ADA) amendment to SB846 with language to:**

- allow department employees to be trained and to volunteer to be able to test blood glucose levels of students with diabetes and administer insulin or assist a student in the administration of insulin via the insulin delivery system that the student uses as outlined in the students diabetes medical management plan; and
- permit students who are able to test and self-manage their diabetes in the classroom or any school-related activity; and
- allow students with diabetes to possess, at all times, necessary supplies and equipment to perform diabetes monitoring and treatment activities under the student's diabetes medical management plan.

I encourage you to stand alongside the ADA and urge you to fully support SB846 and the suggested amendments, to ensure that students with diabetes are safe at school and able to succeed at school academically.

- We have identified gaps in diabetes care provided by Hawaii schools, and we are concerned about the unfair treatment many children with diabetes face at school due to inadequate care and untrained staff.
- These gaps place many students with diabetes in an unsafe medical environment and prevent them from participating fully in the classroom or school-sponsored activities.
- SB846, as amended, follows the approach that most states have taken in addressing such challenges by, allowing non-medical school personnel to volunteer to be trained to provide routine diabetes care to students, and by allowing students who are able to do so to self-manage their diabetes in the classroom or at school-sponsored events.

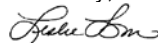
SB846, as amended, allows school staff members who volunteer to be trained to provide diabetes care when a health aide, nurse, or contract nurse is not available. The bill includes language to authorize trained school staff to provide diabetes care and includes liability protections. The ADA has FREE training materials designed specifically for schools; therefore there will not be a cost to the school.

I strongly believe SB846, as amended, is medically safe and necessary to ensure students with diabetes receive the appropriate care and are provided access to supplies they need during those times when a health aide, nurse, or contract nurse is not available for daily routine diabetes care.

I would greatly appreciate your deep consideration and urge you to support this important amendment and invite your colleagues to do the same.

Please feel free to contact me to discuss your concerns or questions. I am available at [llam@diabetes.org](mailto:llam@diabetes.org) or 808.947.5979.

Sincerely,



Leslie Lam, Executive Director  
American Diabetes Association

