JOSH GREEN, M.D. GOVERNOR



KEITH T. HAYASHI SUPERINTENDENT

STATE OF HAWAI'I DEPARTMENT OF EDUCATION KA 'OIHANA HO'ONA'AUAO P.O. BOX 2360 HONOLULU, HAWAI'I 96804

> Date: 01/28/2025 Time: 02:00 PM Location: 309 VIA VIDEOCONFERENCE Committee: House Education

**Department:** Education

Person Testifying: Keith T. Hayashi, Superintendent of Education

Bill Title: HB 0903 RELATING TO STUDENT HEALTH.

**Purpose of Bill:** Authorizes a school to maintain a stock supply of bronchodilators to be administered under certain conditions. Authorizes certain employees of a school and department personnel to administer certain medication in emergency situations, under certain conditions. Amends prescription drug labeling requirements to include certain information related to a school, if applicable.

# **Department's Position:**

The Hawaii State Department of Education (Department) respectfully provides comments on HB 903.

The Department supports the intent of HB 903, which authorizes schools to obtain and maintain stock bronchodilators and permits school employees or agents who have completed appropriate training to administer the stock bronchodilators to a student potentially experiencing asthma exacerbations or asthma attacks.

The Department recognizes the substantial impact of asthma on student health and well-being, including its contribution to increased school absences and potential academic challenges. The Department is aligned with the measure's goal to mitigate these disparities by enhancing access to emergency medication, particularly for students experiencing asthma attacks during school hours.

Should the measure move forward, the Department respectfully requests the following revision under 302A-B(d) to better align with the intent to improve access to medication in schools:

Page 7, Line 2: add new item "(4) The administration of stock bronchodilator by authorized employees or agents pursuant to this section shall not require or imply any diagnosis, or be interpreted as the practice of medicine, nursing, or other licensed professional activity"

This revision provides clarification that the administration of stock medication by authorized personnel is not considered practicing medicine, nursing, or making a diagnosis, ensuring that laypersons can

legally administer bronchodilators without implying professional medical or nursing duties.

The Department remains committed to working collaboratively with the Department of Health and other stakeholders to protect student health while supporting equity in student achievement.

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



# **ON THE FOLLOWING MEASURE:** H.B. NO. 903, RELATING TO STUDENT HEALTH.

# **BEFORE THE:**

HOUSE COMMITTEE ON EDUCATION

**DATE:** Tuesday, January 28, 2025 **TIME:** 2:00 p.m.

LOCATION: State Capitol, Room 309

**TESTIFIER(S):** Anne E. Lopez, Attorney General, or Anne T. Horiuchi, Deputy Attorney General or Randall M. Wat, Deputy Attorney General

Chair Woodson and Members of the Committee:

The Department of the Attorney General (Department) provides the following comments.

This bill: (1) authorizes schools to maintain a stock of bronchodilators to be administered under certain conditions; (2) authorizes certain employees of a school and Department of Education (DOE) personnel to administer certain medication in emergency situations under certain conditions; and (3) amends prescription drug labeling requirements to include certain information related to a school, if applicable. The bill also provides immunity to those acting in accordance with the requirements of the new law, except in cases of gross negligence.

# Clarifying the Scope of "School"

The bill provides that the proposed section 302A-A(a) would apply to a "school, as defined in section 302A-901" (page 1, lines 4-5), and the proposed section 302A-B would apply to "[e]mployees and agents of a school, as defined in section 302A-901" (page 3, lines 14-15). The definition of "school" in section 302A-901, Hawaii Revised Statutes (HRS), includes "any day care center, child care facility, headstart program, preschool, kindergarten, elementary, or secondary school, public or private, including any special school for children in the State." Therefore, the use of terms such as "department school" (page 3, line 16) and "public school" (page 4, line 1) in the

Testimony of the Department of the Attorney General Thirty-Third Legislature, 2025 Page 2 of 2

proposed section 302A-B could cause confusion about the bill's intended scope. To maintain consistency, we recommend the following amendments:

- Page 3, line 16: remove "department" before "school health assistants".
- Page 4, line 1: remove "public" between "Employees and agents of a" and "school".

# The Department of Education's Lack of Jurisdiction

The DOE does not have jurisdiction over many of the entities included in the definition of "school" under section 302A-901, HRS, including, for example, preschools and day care centers. Consequently, the DOE would have difficulty developing and implementing the protocol required under section 302A-A(b) (page 1, lines 10 to 17) for these entities. To ensure effective implementation, the Department suggests that the development and implementation of the protocol be assigned to another agency more suited for this responsibility. Thank you for the opportunity to provide comments on this bill.

LATE \*Testimony submitted late may not be considered by the Committee for decision making purposes.







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

# Testimony in SUPPORT of HB0903 RELATING TO STUDENT HEALTH.

REPRESENTATIVE JUSTIN WOODSON, CHAIR HOUSE COMMITTEE ON EDUCATION

Hearing Date: January 28, 2025 @ 2 pm

Room Number: 309

1 Fiscal Implications: None

- 2 **Department Position:** The Department of Health supports this measure offering comments.
- 3 Department Testimony: The Communicable Disease and Public Health Nursing Division
- 4 (CDPHND) provides the following testimony on behalf of the Department.
- 5 This bill will allow for students that do not have access to a bronchodilator during the school
- 6 day through an emergency action plan or approval to self-carry medication to be able to receive
- 7 the medication when an emergency arises. The other updates in the measure will aid in the
- 8 ability for students to safely and timely receive prescribed and approved medications,
- 9 improving their overall health and ability to remain in school. The Department will work
- 10 collaboratively with the Hawaii Department of Education and community partners to
- 11 implement this bill once enacted.
- 12 Offered Amendments: None
- 13 Thank you for the opportunity to testify on this measure.

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Testimony Presented Before the House Committee on Education Tuesday January 28, 2025 at 2:00 PM Conference Room 309 and videoconference By Laura Reichhardt, APRN, AGPCNP-BC Director, Hawai'i State Center for Nursing University of Hawai'i at Mānoa

## **TESTIMONY IN STRONG SUPPORT on H.B. 903**

Chair Woodson, Vice Chair La Chica, and members of the committee:

Thank you for hearing this measure. This measure aims to authorize schools to maintain a supply of bronchodilators to be administered under certain conditions, authorizes employees to administer the bronchodilator for emergency situations, and creates a process that enables prescriptions for a bronchodilator to be written to schools. In addition, this measure clarifies the statutes related to medication administration in schools. The Hawai'i State Center for Nursing (HSCN) is in strong support of this measure.

HSCN has a longstanding initiative to address barriers to Advanced Practice Registered Nurse (APRN) care as a mechanism to improve access to high quality health care services. In 2022, HSCN started an interprofessional effort to review the Hawai'i Revised Statutes for laws that inform healthcare access that are outside of healthcare professionals' scope of practice laws (primarily in Title 25). The committee found that nearly half of the HRS had language that limited all qualified providers from engaging in certain healthcare activities as described in those statutes. This measure is a good example of including all eligible healthcare providers that may contribute to the process. The outcome is that local healthcare provided, whether it be the associated Hawai'i Keiki school APRN, or other provider can engage in the prescribing of this medication to the school.

Further, it improves the clarity of the process both for emergency administration of medication by volunteer and self-administration of medication by a student. This will increase access to appropriate health interventions for emergencies and management of known health conditions for children while at school. This is a strong health policy intervention that improves access to appropriate and safe health care in the community.

Hawai'i State Center for Nursing commends the legislature for introducing this measure and for your commitment to the health and safety of children in our state. Thank you for the opportunity to testify in support of this measure.

The mission of the Hawai'i State Center is to engage in nursing workforce research, promote best practices and disseminate knowledge, cultivate a diverse and well–prepared workforce, support healthy work environments, champion lifelong learning, and strategically plan for sound nursing workforce policy.



# Testimony to the House Committee on Education Tuesday, January 28, 2025; 2:00 p.m. State Capitol, Conference Room 309 Via Videoconference

# RE: HOUSE BILL NO. 0903, RELATING TO STUDENT HEALTH.

Chair Woodson, Vice Chair La Chica, and Members of the Committee:

The Hawaii Primary Care Association (HPCA) is a 501(c)(3) organization established to advocate for, expand access to, and sustain high quality care through the statewide network of Community Health Centers throughout the State of Hawaii. The HPCA <u>SUPPORTS THE INTENT</u> of House Bill No. 0903, RELATING TO STUDENT HEALTH.

By way of background, the HPCA represents Hawaii's Federally Qualified Health Centers (FQHCs). FQHCs provide desperately needed medical services at the frontlines to over 150,000 patients each year who live in rural and underserved communities. Long considered champions for creating a more sustainable, integrated, and wellness-oriented system of health, FQHCs provide a more efficient, more effective and more comprehensive system of healthcare.

The measure, as received by your Committee, would, among other things:

- (1) Allow a school to maintain a stock supply of bronchodilators, to be administered by a school health assistant or other authorized employee or agent who volunteers to administer to any student as needed for actual or perceived asthma episodes; and
- (2) Clarify the authority of school employees and volunteers to administer and store epinephrine, glucagon, seizure rescue medication, inhalers, and stock bronchodilators to a student in emergency situations.

This measure would take effect upon its approval.

Testimony on House Bill No. 0903 Tuesday, January 28, 2025; 2:00 p.m. Page 2

The HPCA has long supported and will continue to support efforts to improve the safety of our schools and in fact have partnered with the Hawaii State Departments of Health and Education to provide training and direct medical services through COVID-19 related programs and school-based clinics. FQHCs have dispensed vaccinations to students, provided physical, dental, and mental health services, and at some campuses established "brick and mortar" facilities to provide essential health care to students and employees. The HPCA has also partnered with other health care organizations such as the Epilepsy Foundation and the Diabetes Foundation to assist with the training for employees and volunteers to dispense and utilize essential diagnostic and emergency treatment devices and medications. We have also offered to work with all of the parties to develop strategies at the ground level to expedite the provision of often life-saving assistance to students or others who are in desperate need. To this end, the HPCA stands committed to continuing our offer to partner with all affected parties.

The issue of providing health care at schools is an enormous task that requires commitment from all of the parties to achieve these goals. There needs to be coordination between the Departments of Health, Education, and the Attorney General (at a minimum) to address all funding, personnel, and legal aspects. There needs to be a willingness between the State, the Hawaii State Teachers Association, and the United Public Workers to address essential training that falls within the purview of collective bargaining. There needs to sufficient outreach to nonprofit health care and social service organizations to ensure their participation and commitment. And lastly, there needs to engagement not just with students, but with their families and communities to adequately determine their specific necessities.

While we commend the introducer for this proposal, we realize that from a practical standpoint legislation alone will not fix the problem. Only true leadership that brings all of the parties to the table, along with mutual commitment to compromise would work. In our opinion, they only way this can be achieved would be for the Governor to utilize the power of the Office to bring all of these leaders to the table and facilitate meaningful concessions for the good of our keiki and communities.

Thank you for the opportunity to testify. Should you have any questions, please do not hesitate to contact Public Affairs and Policy Director Erik K. Abe at 536-8442, or eabe@hawaiipca.net.



#### Testimony Presented Before the House Committee on Education Tuesday January 28, 2024 at 2:00 PM Conference Room 309 and videoconference By HSRHA

## **TESTIMONY IN STRONG SUPPORT on H.B. 903**

Chair Woodson, Vice Chair La Chica, and members of the committee:

Thank you for hearing this measure. This measure allows schools to keep a stock of bronchodilators for use under specific conditions, permits designated school employees and department personnel to administer medication during emergencies, subject to certain criteria, and updates prescription drug labeling requirements to include school-related information when applicable. Hawai'i State Rural Health Association commends the legislature for introducing this measure and is in strong support of it's passage.

Emergency access to breathing treatments, such as bronchodilators, significantly improves rural health outcomes by providing immediate relief to individuals experiencing respiratory distress. In rural areas, where emergency response times may be prolonged and the nearest healthcare center could be distant, access to life-saving treatments on-site can prevent complications, reduce hospitalizations, and even save lives. This accessibility empowers schools to respond effectively to emergencies, bridging critical gaps in healthcare infrastructure. By addressing respiratory issues promptly, rural communities can mitigate the risks associated with delayed care, improving overall health equity and resilience in underserved areas.

This measure is a proactive response that will improve the lives of our rural school children. We thank you for this insight and impetus, and recommend the passage of this measure.

Mahalo,

Summer Mochida-Meek Executive Director Hawaiʻi State Rural Health Association



Hawai'i Children's Action Network Speaks! is a nonpartisan 501c4 nonprofit committed to advocating for children and their families. Our core issues are safety, health, and education.

То:	Representative Justin Woodson, Chair Representative Trish La Chica, Vice Chair House Committee on Education
From:	Chevelle Davis, Director of Early Childhood & Health Policy Hawai'i Children's Action Network Speaks!
Subject:	Measure H.B. No. 329 – Relating to the School Facilities Authority
Hearing:	Tuesday, January 28, 2025, at 2:00 PM, Conference Room 309

#### **POSITION: Support**

Aloha e Chair Woodson, Vice Chair La Chica, and Members of the Committee,

Mahalo for the opportunity to provide testimony **supporting H.B. No. 903**, which allows schools in Hawai'i to stock life-saving medication for students with asthma or respiratory distress.

Asthma is a significant concern for children in Hawai'i, made worse by unique factors like cockroaches, VOG, and allergens. Without immediate treatment, asthma attacks can escalate, endangering lives and leading to costly emergency care.

Stocking medication or bronchodilators in schools offers a simple, affordable solution. This medication is safe, easy to administer, and critical for reversing airway blockages during an attack. Without it, children without their medication – whether due to forgetfulness or affordability – leave schools reliant on emergency services, risking delays that could have severe consequences.

Equipping schools with stock inhalers and training staff to recognize and respond to asthma symptoms ensures timely care, especially as not all schools have nurses. Similar policies in 15 other states have proven effective.

Passing H.B. No. 903 is vital to protecting our keiki's health and safety in schools.

Me ka ha'aha'a, Chevelle Davis, MPH Director of Early Childhood & Health Policy

# Hawai'i Association of Professional Nurses (HAPN)

To: The Honorable Representative Justin H. Woodson, Chair of the House Committee on Education



From: Hawaii Association of Professional Nurses (HAPN)

Subject: HB903 - Relating to Student Health

Hearing: January 28, 2025, 2:00 p.m.

Aloha Representative Woodson, Chair; Representative La Chica, Vice Chair; and Committee Members,

On behalf of the Hawaii Association of Professional Nurses, we appreciate this opportunity to voice our strong support for HB903, which authorizes schools to maintain a stock supply of bronchodilators and allows trained personnel to administer certain medications in emergency situations under specific conditions. Additionally, this bill updates prescription drug labeling requirements to include relevant information for schools when applicable.

Asthma is a prevalent chronic condition affecting Hawaii's keiki, and quick access to bronchodilators can be life-saving during an asthma episode. HB903 is a critical step toward improving health and safety in schools through its multifaceted approach:

1. **Stock Supply of Bronchodilators**: Authorizing schools to maintain a stock supply of bronchodilators ensures immediate access to these life-saving medications in emergencies. This is especially crucial for students who may not have their prescribed inhalers readily available.

2. Authorized Administration of Emergency Medication: By allowing trained school employees, health assistants, and authorized personnel to administer bronchodilators and other emergency medications under specific conditions, HB903 ensures timely and effective intervention during respiratory and other medical emergencies.

3. Enhanced Safety Protocols: The bill requires comprehensive protocols developed in collaboration with the Department of Education and the Department of Health. These protocols include proper storage, training requirements, emergency response measures, and follow-up care to ensure the safety and well-being of students.

4. Updates to Prescription Drug Labeling Requirements: Amending prescription drug labeling to include school-specific information ensures compliance with legal standards and clarity when medications are prescribed for institutional use.

HB903 empowers schools to respond effectively to asthma and other medical emergencies, fostering a safer and healthier learning environment for all students. It also reinforces the partnership between healthcare providers, schools, and families, ensuring that safety measures are transparent and well-communicated.

HAPN's mission, to be the voice of APRNs in Hawaii, has been the guiding force that propelled us to spearhead the advancement of patients' access to healthcare as well as supporting the recognition of the scope of practice for APRNs in Hawaii. We have worked to improve the physical and mental health of our communities. As our ability to provide close care with our patients progressed, we also opened our own clinics to provide the care our patients deserve.

Thank you for the opportunity to provide testimony in strong support of HB903. We commend your commitment to the health and safety of Hawaii's keiki and look forward to supporting this bill's progress.

Respectfully,

Dr. Jeremy Creekmore, APRN HAPN President



#### Hawaii Medical Association

1360 South Beretania Street, Suite 200 • Honolulu, Hawaii 96814 Phone: 808.536.7702 • Fax: 808.528.2376 • hawaiimedicalassociation.org

## HOUSE COMMITTEE ON EDUCATION Representative Justin H Woodson, Chair Representative Trish La Chica, Vice Chair

Date: January 28, 2025 From: Hawaii Medical Association (HMA) Jerald Garcia MD - Chair, HMA Public Policy Committee

**Re: HB 903 – Relating to Student Health.** Bronchodilators; Department of Education; Emergency Administration of Medication; Labeling Requirements; Prescriptions **Position: Support** 

This measure would authorize a school to maintain a stock supply of bronchodilators to be administered under certain conditions; authorize certain employees of a school and department personnel to administer certain medication in emergency situations, under certain conditions; amends prescription drug labeling requirements to include certain information related to a school, if applicable.

Asthma is a serious chronic lung disease that affects approximately 104,000 adults and 30,000 children in Hawaii. During an asthma episode or attack, the patient needs immediate access to a rescue bronchodilator inhaler. These bronchodilator medications are safe, highly effective, and inexpensive. HMA supports onsite access of rescue inhalers at schools as well as administration by designated authorized school staff, under certain conditions.

Thank you for allowing the Hawaii Medical Association to testify in support of this measure.

2025 Hawaii Medical Association Officers

Elizabeth Ann Ignacio, MD, President • Nadine Tenn-Salle, MD, President Elect • Angela Pratt, MD, Immediate Past President Jerris Hedges, MD, Treasurer • Thomas Kosasa, MD, Secretary • Marc Alexander, Executive Director

> 2025 Hawaii Medical Association Public Policy Coordination Team Jerald Garcia, MD, Chair Linda Rosehill, JD, Government Relations • Marc Alexander, Executive Director

References and Quick Links:

CDC Healthy Schools – Asthma. Center for Disease Control and Prevention accessed 2/1/2023.

Asthma Trends and Burden. American Lung Association accessed 2/1/2023.

Feldman WB, Avorn J, Kesselheim AS. Switching to Over-the-Counter Availability of Rescue Inhalers for Asthma. JAMA. 2022;327(11):1021–1022. doi:10.1001/jama.2022.1160

2025 Hawaii Medical Association Officers Elizabeth Ann Ignacio, MD, President • Nadine Tenn-Salle, MD, President Elect • Angela Pratt, MD, Immediate Past President Jerris Hedges, MD, Treasurer • Thomas Kosasa, MD, Secretary • Marc Alexander, Executive Director

> 2025 Hawaii Medical Association Public Policy Coordination Team Jerald Garcia MD, Chair Linda Rosehill, JD, Government Relations • Marc Alexander, Executive Director

# **UNIVERSITY OF HAWAI'I SYSTEM**



'ÕNAEHANA KULANUI O HAWAI'I

Legislative Testimony Hōʻike Manaʻo I Mua O Ka ʻAhaʻōlelo

## Testimony Presented Before the House Committee on Education Tuesday, January 28, 2025 at 2:00pm By T. Samuel Shomaker, Dean Lee Buenconsejo-Lum, Associate Dean For Academic Affairs John A. Burns School of Medicine and Clementina D. Ceria-Ulep, PhD, RN, Dean and Professor UH School of Nursing and Dental Hygiene And Michael Bruno, Provost University of Hawai'i at Mānoa

HB 903 – RELATING TO STUDENT HEALTH

Chair Woodson, Vice Chair La Chica and Members of the Committee:

Thank you for the opportunity to provide testimony in SUPPORT of HB 903 which authorizes the Department of Education (DOE) to stock bronchodilators for emergency use during respiratory distress. The bill further authorizes DOE employees to volunteer to administer bronchodilators.

Provided the proper training and procedures are in place, this measure would allow for improved care and, ultimately, improved learning for asthmatic children. Asthma is more common in certain populations, including Native Hawaiians and Filipinos. Asthma prevalence is also higher in certain communities - many of these communities are also challenged with lower educational attainment (for a large variety of social determinants).

Having albuterol accessible in the schools, as part of a comprehensive asthma management plan done in conjunction with their health care provider, will help keep children affected by asthma in school. Ideally, the communication protocols should include communication back to the primary care provider that a child needed a rescue inhaler. The parental notification regarding the emergency use of a bronchodilator may include a statement encouraging the parent to notify the child's primary care provider, to ensure timely evaluation and any adjustment to the child's asthma action plan and/or therapy.

The UH Mānoa School of Nursing and Dental Hygenie (UH Mānoa SONDH) is a longtime contributor to school health initiatives with partnership of the DOE. Starting in 2014, The UH Mānoa SONDH launched with DOE the Hawai'i Keiki - Healthy and Ready to Learn (HK) program. This program placed advanced practice registered nurses into the schools and complexes with the greatest health disparities. In the 10 years since its inception, HK now services all 258 DOE public schools and has 58 DOE public school-based clinics and 9 charter school-based clinics. In Academic Year 2023-2024, HK nurses and staff completed over 75,000 visits in public schools and 6,700 visits in charter schools. HK nurses and staff see and care for the children enrolled in the public and charter education systems. This bill addresses an important need that will greatly improve the health and wellbeing of children across the islands. HK has worked collaboratively with the DOE and American Lung Association - Hawai'i to ensure that the design is safe and appropriate for a school health setting. In addition to the nursing we provide in our school-based clinics, HK engages in health education and training to students and DOE and charter school staff. HK welcomes the opportunity to apply our skills as nurses to provide proper training and oversight so that those volunteering feel comfortable with the task and potentially can save a student's life.

Today, children with a known health condition and completed administrative processing are able to have medications at school to support chronic health conditions. This includes children with asthma who use a bronchodilator (sometimes referred to as a rescue inhaler or albuterol inhaler) to open their airways when they are feeling unwell. However, children with no known respiratory conditions or children without their medication at school may experience shortness of breath or trouble breathing. In these cases, the best immediate treatment is a bronchodilator. However, this drug today requires a per person prescription, and access to the medication immediately. The measure proposed today offers a life-saving solution, particularly for those schools without a school-based health clinic on campus. If a school has access to a stock inhaler, the inhaler may be used to immediately address a child's ability to breathe while other actions are put into play: call the school nurse, call the parents or guardians, call emergency services, etc.

The bronchodilator drug is easy to use. Parents, and even children with little teaching are able to administer this drug effectively. This drug is fast acting. Often, this drug can stop shortness of breath adequately to prevent escalation - including needing to go to the emergency room - which keeps a child safe, healthy and ready to learn. To underscore that the administration of the medication is appropriate for a volunteer to administer, we respectfully recommend the following amendment:

At Page 7, Line 2: add a new item "(4) The administration of stock bronchodilator by authorized employees or agents pursuant to this section shall not require or imply any diagnosis, or be interpreted as the practice of medicine, nursing or other licensed professional activity".

Thank you for the opportunity to provide testimony on this bill.

### HB-903 Submitted on: 1/27/2025 1:59:35 PM Testimony for EDN on 1/28/2025 2:00:00 PM

Submitted By	Organization	<b>Testifier Position</b>	Testify
Maya Maxym	Hawaii Chapter of the American Academy of Pediatrics	Support	Written Testimony Only

Comments:

Aloha Chair Woodson, Vice Chair La Chica, and Committee Members,

On behalf of the Hawai'i Chapter of the American Academy of Pediatrics, representing more than 200 pediatricians who practice throughout Hawai'i, I am writing to express our strong support for HB903, which would enable schools to have a stock supply of bronchodilators available for asthma emergencies. Every pediatrician has seen children and teenagers struggling to breathe because their lungs are so tight they can hardly move air in or out, and every pediatrician has seen children who benefit from immediate bronchodilator therapy (medications such as albuterol, which open up critical airways in an asthma attack). Unfortunately, we have also seen children suffer severe consequences, including death, from delayed access to these lifesaving medications. Asthma affects between a significant proportion of Hawaii keiki and is one of the most common causes of hospital admission. Prompt administration of bronchodilators, which are extremely safe medications is common sense to combat the risk of severe outcomes from such a common disease. We urge you to support this bill and would be happy to answer any questions.

## Sincerely,

Maya Maxym, MD, PhD, FAAP on behalf of the Hawai'i Chapter of the American Academy of Pediatrics.

Testimony Presented Before the House Committee on Education HEARING: Tuesday January 28, 2:00 P.M.

PLACE: Room 309 State Capital and via videoconference



Hawai'i – American Nurses Association (Hawai'i-ANA)

## HB903 - Relating to Student Health

Chair Justin H. Woodson, , Vice Chair Trish La Chica, and members of the House Committee on Education thank you for providing this opportunity for Hawai'i nurses' voices to be heard.

Hawai'i-American Nurses Association (Hawai'i- ANA) is in strong support of this bill measure aims to authorize schools to maintain a supply of bronchodilators to be administered under certain conditions, authorizes employees to administer the bronchodilator for emergency situations, and creates a process that enables prescriptions for a bronchodilator to be written to schools. In addition, this measure clarifies the statutes related to medication administration in schools.

Hawai'i-ANA commends the legislature for introducing this measure and for your commitment to the health and safety of children in our state. Thank you for the opportunity to testify in support of this measure.

Contact information for Hawai'i - American Nurses Association:

President: Dr. Denise Cohen,PhD, APRN, FNP-BC, <u>president@hawaii-ana.org</u> Executive Director: Elizabeth M. Kahakua, BSN <u>executivedirector@hawaii-ana.org</u>

phone (808) 779-3001 500 Lunalilo Home Road, #27-E, Honolulu HI 96825

Lung Association. Hawaii



**COMMITTEE ON EDUCATION Rep. Justin H. Woodson, Chair Rep. Trish La Chica, Vice Chair** 

#### Tuesday, January 28, 2025, 2:00PM – Conference Room 309

#### Testimony in Support of House Bill 1448 Relating to Asthma with Suggested Amendment

The American Lung Association is the leading organization working to save lives by improving lung health and preventing lung disease, through research, education, and advocacy. The work of the American Lung Association in Hawaii and across the nation is focused on four strategic imperatives: to defeat lung cancer; to improve the air we breathe; to reduce the burden of lung disease on individuals and their families; and to eliminate tobacco use and tobacco-related diseases.

The American Lung Association strongly supports House Bill 903, relating to student health. The bill would authorize the department of education to stock bronchodilators for emergency use during respiratory distress and authorize department employees to volunteer to administer bronchodilators.

Furthermore, the Lung Association supports the DOE's suggested amendment to 302A-B(d) to explicitly state that the administration of stock bronchodilators by authorized school personnel does not constitute the practice of medicine, nursing, or any other licensed professional activity. This clarification will ensure that school employees can legally administer these life-saving medications without fear of professional liability or misinterpretation of their roles.

Asthma is a serious public health concern in Hawai'i. In 2022, 9.4% of Hawai'i children were estimated to have asthma compared to less than 7% of children in the U.S. as a whole.<sup>1</sup> In Hawai'i, disparities in asthma prevalence are seen in race/ethnicity and region, with Native Hawaiians being disproportionately affected by asthma and experiencing the greatest burden. Native Hawaiians have the highest asthma prevalence at 28.3% compared to Caucasians (17.1%), Chinese (16.4%), Filipino (20.5%), Japanese (17.7%), or other races/ethnicities (19.8%).<sup>2</sup> Areas with high asthma prevalence include Hawai'i and Maui counties and the Nānākuli/Wai'anae sub-county areas on O'ahu. Asthma disparities can be further exacerbated by geographic isolation, lack of transportation to and from doctor's appointments, lower socioeconomic status, and limited access to healthcare specialists and subspecialists.

Absenteeism due to poorly controlled asthma may negatively affect educational outcomes and limit students with asthma's ability to fully participate in school activities, and when children miss school, a parent or guardian often misses work to care for them. Addressing asthma effectively requires a coordinated effort among school staff, home/family members, and the primary care physician to improve health outcomes for children with asthma.

Because asthma attacks can occur anytime and often without warning, children with asthma should always have access to medication that can quickly reverse the blockages in their lungs. This life-saving medication, called a short-acting bronchodilator, is easy to administer, inexpensive, and very safe.

<sup>&</sup>lt;sup>1</sup> Behavioral Risk Factor Surveillance Survey, 2011-2022. Analysis by the American Lung Association Epidemiology and Statistics Unit using SPSS software.

<sup>&</sup>lt;sup>2</sup> Uchima O, Taira DA, Ahn HJ, Choi SY, Okihiro M, Sentell T. Disparities in Potentially Preventable Emergency Department Visits for Children with Asthma among Asian Americans, Pacific Islanders, and Whites in Hawai'i. International Journal of Environmental Research and Public Health. 2021



While there is a system in place to help children who have diagnosed asthma by allowing children to bring their own asthma inhalers and either keep them at school or carry with them, unfortunately we cannot expect that all children with asthma will have their inhalers on them. When children do not have asthma medication, which can occur for a variety of reasons such as forgetting it or not being able to afford it, schools have few options. A parent may not be immediately accessible or close enough to respond promptly. Even if they can, there is a delay during which the asthma attack often gets worse. In such cases, the school must call 911. Doing so is likely to lead to an ambulance transport costing \$500 or more and an emergency department visit costing thousands more. Such events also take children out of the classroom for days at a time and further impede their learning.

Studies have demonstrated the effectiveness of school-based stock inhaler programs in mitigating respiratory emergencies. Research published in the Annals of the American Thoracic Society indicates that these programs can lead to a 20% reduction in 9-1-1 calls and a 40% decrease in Emergency Medical Services (EMS) transports for respiratory distress.<sup>3</sup>

Furthermore, research conducted in Arizona, Illinois, and Missouri (Journal of Allergy, Asthma, and Immunology, 2021) has shown that approximately 80% of children experiencing an asthma attack can return to class after receiving albuterol from a school-based stock inhaler. This research also highlights that 84% of students were able to resume their academic activities following the administration of the stock inhaler.<sup>4</sup>

Therefore, the availability of a stock inhaler enables a swift response to asthma emergencies, allowing children to remain in their learning environment. In the absence of a stock inhaler, schools would be required to contact a parent to bring the child's medication or to call 9-1-1. This delay in treatment can significantly exacerbate respiratory distress.

Currently, Keiki Nurses are able to carry stock albuterol and administer to children. However, there are not enough keiki nurses to be available in every school. Even if they were in every school, it's impossible for them to keep watch on every sports practice, marching band practice, or PE class where children may more likely experience respiratory distress. Because of the safety of the medication used and the lifethreatening implications of an asthma attack, we believe it is imperative that we train other staff to assess, access and administer the required medication that would potentially save a student's life.

HB 903 also provides important liability protection for the prescriber, the school and the person who administers the medication in good faith. As mentioned before the medication used for treatment of asthma attacks is safe and effective. In addition, as part of a research project in the Sunnyside Unified School District in Tucson, Arizona that evaluated a stock asthma inhaler project there, researchers found that school nurses were afraid that giving the medication could potentially expose them to liability, so it is imperative that the liability protections as outlined in the bill remain.

<sup>&</sup>lt;sup>3</sup> Lynn B. Gerald, Aimee Snyder, Jody Disney, Joe K Gerald, Allison Thomas, Graciela Wilcox, & Mark Brown. (2016). "Implementation and Evaluation of a Stock Albuterol Program for Students with Asthma." Annals of the American Thoracic Society. 13(2): 295. https://pubmed.ncbi.nlm.nih.gov/26848605/

<sup>&</sup>lt;sup>4</sup> Gerald, Joe K., Nancy Stroupe\*, Leslie A. McClure, Lani Wheeler, & Lynn B. Gerald. (2012). "Availability of Asthma Quick Relief Medication in Five Alabama School Systems." Journal of Pediatric Asthma, Allergy, and Immunology. 25(1):11-16.



HB 903 represents a simple and low-cost solution to a problem that could save both lives and money. In total, <u>24 states</u> have passed legislation or have administrative guidelines in place allowing schools to stock asthma medications. However, there are key provisions that should be included in this legislation to ensure it will be as effective as possible. These include:

- Making sure the legislation applies to all public and nonpublic schools.
- Applying the legislation to both students who have been diagnosed with asthma and students suffering from respiratory distress that may not have been diagnosed yet.
- Ensuring that school staff other than school health officials are required to be properly trained in the proper use and administration of the stock asthma medication.
- Making certain that all school staff, officials or health care providers involved in administration or prescribing of stock asthma medication receive liability protection except in cases of willful or gross negligence.

The Lung Association strongly supports HB 903 with the suggested amendment and encourages swift action to move the bill out of committee.

With gratitude,

Pedro Haro Executive Director American Lung Association in Hawai'i pedro.haro@lung.org LATE \*Testimony submitted late may not be considered by the Committee for decision making purposes.



То:	The Honorable Justin H. Woodson, Chair The Honorable Trish La Chica, Vice-Chair	LAT
From:	House Committee on Education Paula Arcena, External Affairs Vice President Mike Nguyen, Public Policy Manager Sarielyn Curtis, External Affairs Specialist	
Hearing:	Tuesday, January 28, 2025, 2:00 p.m., Conference Roo	om 309
RE:	HB903 Relating to Student Health	

AlohaCare appreciates the opportunity to provide testimony in **support** of **HB903**. This measure authorizes a school to maintain a stock supply of bronchodilators to be administered under certain conditions and authorizes employees of a school and department personnel to administer certain medication in emergency situations, under certain conditions. It amends prescription drug labeling requirements to include certain information related to a school, if applicable.

Founded in 1994 by Hawai'i's community health centers, AlohaCare is a community-rooted, non-profit health plan serving over 70,000 Medicaid and dualeligible health plan members on all islands. Approximately 37 percent of our members are keiki. We are Hawai'i's only health plan exclusively dedicated to serving Medicaid and Medicaid-Medicare dually-eligible beneficiaries. Our mission is to serve individuals and communities in the true spirit of aloha by ensuring and advocating for access to quality, whole-person care for all.

Asthma impacts millions of lives and has a tremendous impact on our nation's healthcare system and economy. In the U.S., over 26 million Americans have asmtha, including 4.5 million children.<sup>i</sup> In Hawai'i, 21,411 children have asthma<sup>ii</sup>, which can be made worse due to our environmental factors, such as cockroaches, vog, and allergies.

Because asthma attacks can occur anytime and often without warning, children with asthma should always have access to medication that can quickly reverse the blockages in their lungs. This life-saving medication, called a short-acting bronchodilator, is easy to administer, inexpensive, and very safe.

It is critical that school staff are trained in the signs and symptoms of asmtha and know when it is appropriate to adminster rescue medications. Currently school nurses are the only school personnel trained to care for our keiki with asmtha, but unfortunately not all schools have a keiki school nurse present. Because of the safety



of the medication used and the life-threatening implications of an asthma attack, it is imperative that we train other staff to assess, access, and administer the required medication that would potentially save a student's life.

Mahalo for this opportunity to testify in **support** of **HB903**.

<sup>&</sup>lt;sup>i</sup> CDC. 2022 National Health Interview Survey.

<sup>&</sup>lt;sup>ii</sup> CDC. 2019 Behavioral Risk Factor Surveillance System.

### HB-903 Submitted on: 1/25/2025 7:20:45 AM Testimony for EDN on 1/28/2025 2:00:00 PM

Submitted By	Organization	<b>Testifier Position</b>	Testify
Tina Wildberger	Individual	Support	Written Testimony Only

Comments:

Aloha Chair, Vice-Chair and Committee Members,

Thank you for your important work on this measure. Having medication for asthma sufferers at schools will ensure students can stay in class. It can abate emergency trips to the hospital.

Albuterol, a bronchodilator, is a safe medication. Schools already stock meds for diabetes and anaphylaxis, both of which have greater consequences if administered incorrectly. Adding Albuterol to the list of available treatments for students at schools makes sense.

According to data from the Hawaii State Department of Health, around 10% of children in Hawaii currently have asthma, with the highest prevalence among Native Hawaiian children, where the rate is significantly higher compared to other ethnicities in the state. That's 30,000 students across the state.

Please pass this measure now that DoE is on-board. It's a small investment in addressing students' health concerns and keeps them in class.

TO:	House Committee on Education Representative Justin H. Woodson, Chair Representative Trish La Chica, Vice Chair
DATE: TIME: PLACE:	Tuesday, January 28, 2025 2:00 PM Via Videoconference Conference Room 309

## **TESTIMONY IN SUPPORT OF HB 903, RELATING TO STUDENT HEALTH**

Dear Chair Woodson, Vice Chair La Chica, and Members of the Committee,

My name is Dr. Cynthia J. Goto, and I am writing to express my support for House Bill 903, relating to student health. This bill will allow schools in Hawaii to provide more immediate access to medications for students with asthma or suffering from respiratory distress.

Asthma is one of the most common chronic childhood diseases in Hawaii. In Hawaii, 21,411 children have asthma<sup>1</sup>, and this bill has the potential to save lives and keep kids safe at school.

According to the Centers for Disease Control and Prevention (CDC), on average, in a classroom of 30 children, about 3 are likely to have asthma. Low-income populations, Native Hawaiians, and children living near traffic intersections experience more emergency department visits, hospitalizations, and deaths due to asthma than the general population.

Because asthma attacks can occur anytime and often without warning, children with asthma should always have access to medication that can quickly reverse the blockages in their lungs. This life-saving medication, called a short-acting bronchodilator, is easy to administer, inexpensive, and very safe.

Unfortunately, when children do not have asthma medication, which can occur for a variety of reasons such as forgetting it or not being able to afford it, schools have few options. A parent may not be immediately accessible or close enough to respond promptly. Even if they can, there is a delay during which the asthma attack often gets worse. In such cases, the school must call 911. Doing so is likely to lead to an ambulance transport cost and an emergency department visit costing thousands more. Such events also take children out of the classroom for days at a time and further impede their learning.

These adverse events are largely avoidable with a simple low-cost solution: stock medication or inhalers. Schools can use a single inhaler containing a short-acting bronchodilator along with inexpensive disposable spacers that can be used for anyone who experiences the sudden onset of cough, shortness-of-breath, and chest tightness that signals an asthma attack.

Please support House Bill 903 to ensure that our children with asthma have access to safe and effective medication which could potentially save a student's life.

Thank you for the opportunity to testify.

Cynthia J. Goto, M.D.

<sup>1</sup> CDC. 2019 National Health Interview Survey.

# <u>HB-903</u> Submitted on: 1/26/2025 2:22:36 PM Testimony for EDN on 1/28/2025 2:00:00 PM

Submitted By	Organization	<b>Testifier</b> Position	Testify
Tracie Ann M Tjapkes	Individual	Comments	Written Testimony Only

Comments:

Request expansion to any board certified / licensed health care professional .

## <u>HB-903</u> Submitted on: 1/26/2025 11:40:31 PM Testimony for EDN on 1/28/2025 2:00:00 PM

Submitted By	Organization	<b>Testifier Position</b>	Testify
Erica Yamauchi	Individual	Support	Written Testimony Only

Comments:

Aloha, Chair, Vice Chair and members of the Committee:

I support this bill as a parent of two children in our public schools.

Because asthma attacks can occur anytime and often without warning, keiki with asthma should always have access to medication that can quickly reverse the blockages in their lungs. This life-saving medication, called a short-acting bronchodilator, is easy to administer, inexpensive, and very safe.

Mahalo nui for your consideration.

Erica Yamauchi, Kaimukī

## <u>HB-903</u>

Submitted on: 1/27/2025 8:19:07 AM Testimony for EDN on 1/28/2025 2:00:00 PM

Submitted By	Organization	<b>Testifier Position</b>	Testify
Felicitas B. Livaudais MD	Individual	Support	Written Testimony Only

Comments:

Testimony in Support of House Bill 903 Relating to Student Health

Chair Woodson and Members of the Committee:

Thank you for the opportunity to provide comments on House Bill 903, which makes it possible fo schools in Hawai'i to provide more immediate access to medication for students with asthma or suffering from respiratory distress. Asthma can be a deadly disease if flare-ups are not treated immediately. Stocking albuterol in schools has the potential to save lives and keep kids safe in schools.

Asthma impacts millions of lives and has a tremendous impact on our nation's healthcare system and economy. In the U.S., over 25 million Americans, including 5.1 million children have asthma.1 In Hawai'i, 9.4% of children have asthma, which is higher than the national average.2 That's nearly 30,000 children, which can be made worse by our unique local environmental factors, such as cockroaches, VOG, and the various allergy triggers.

Because asthma attacks can occur anytime and often without warning, children with asthma should always have access to medication that can quickly reverse the blockages in their lungs. This life-saving medication, called a short-acting bronchodilator, is easy to administer, inexpensive, and very safe.

Unfortunately, when children do not have asthma medication, which can occur for a variety of reasons such as forgetting it or not being able to afford it, schools have few options. A parent may not be immediately accessible or close enough to respond promptly. Even if they can, there is a delay during which the asthma attack often gets worse. In such cases, the school must call

911. Doing so is likely to lead to an ambulance transport cost and an emergency department visit costing thousands more. Such events also take children out of the classroom for days at a time and further impede their learning.

These adverse events are largely avoidable with a simple low-cost solution: stock medication or inhalers. Schools can use a single inhaler containing a short-acting bronchodilator along with inexpensive disposable spacers that can be used for anyone who experiences the sudden onset of cough, shortness-of-breath, and chest tightness that signals an asthma attack.

It is critical that school staff other than Keiki nurses are trained in the signs and symptoms of asthma and when it is appropriate to administer the rescue medications. Unfortunately, in Hawai'i there is not a keiki school nurse present in every school. However, because of the safety of the medication used and the life-threatening implications of an asthma attack, it is imperative that we train other staff to assess, access, and administer the required medication that would potentially save a student's life.

This bill is a strong first step for our schools to adopt policies already adopted in 15 other states across the nation. I urge you to please pass House Bill 903.

Sincerely,

Dr. Felicitas B. Livaudais MD

Maui Pediatrician

## <u>HB-903</u> Submitted on: 1/27/2025 8:53:20 AM Testimony for EDN on 1/28/2025 2:00:00 PM

Submitted By	Organization	<b>Testifier Position</b>	Testify
Lisa Kehl	Individual	Support	Written Testimony Only

Comments:

Stocking albuterol in schools has the potential to save lives and keep kids safe in schools. This life-saving medication, called a short-acting bronchodilator, is easy to administer, inexpensive, and very safe.

This bill is a strong first step for our schools to adopt policies already adopted in 15 other states across the nation. I urge you to please pass House Bill 903.

### HB-903 Submitted on: 1/27/2025 9:51:39 AM Testimony for EDN on 1/28/2025 2:00:00 PM

Submitted By	Organization	<b>Testifier Position</b>	Testify
Philip Verhoef	Individual	Support	Written Testimony Only

Comments:

Chair Woodson and Members of the Committee:

Thank you for the opportunity to provide comments on House Bill 903, which makes it possible fo schools in Hawai'i to provide more immediate access to medication for students with asthma or suffering from respiratory distress. Asthma can be a deadly disease if flare-ups are not treated immediately. Stocking albuterol in schools has the potential to save lives and keep kids safe in schools.

As a pediatric ICU physician, I have cared for patients who did not have timely access to albuterol in the midst of an asthma attack. The results can be, in a word, devastating. Albuterol is a life-saving medication and is easy to administer, inexpensive, and has a proven safety record.

Unfortunately, when children do not have asthma medication, which can occur for a variety of reasons such as forgetting it or not being able to afford it, schools have few options. A parent may not be immediately accessible or close enough to respond promptly. Even if they can, there is a delay during which the asthma attack often gets worse. In such cases, the school must call 911. Doing so is likely to lead to an ambulance transport cost and an emergency department visit costing thousands more. Such events also take children out of the classroom for days at a time and further impede their learning.

It is critical that school staff other than Keiki nurses are trained in the signs and symptoms of asthma and when it is appropriate to administer the rescue medications. Unfortunately, in Hawai'i there is not a keiki school nurse present in every school. However, because of the safety of the medication used and the life-threatening implications of an asthma attack, it is imperative that we train other staff to assess, access, and administer the required medication that would potentially save a student's life.

This bill is a strong first step for our schools to adopt policies already adopted in 15 other states across the nation. I urge you to please pass House Bill 903.

Sincerely,

Philip Verhoef

# Testimony in Support of HB 903 Relating to School Health January 28, 2025

Committee on Education Chair Woodson Vice Chair La Chica Members

My name is Julian Lipsher, a member of the American Lung Association of Hawaii's Local Leadership Board testifying in support of HB903, Relating to School Health.

The bill authorizes a school to maintain a stock of bronchodilators to be administered under certain conditions. Authorizes certain employees of a school and department personnel to administer certain medication in emergency situations, under certain conditions. Amends prescription drug labeling requirements to include information to a school, if applicable.

Centers for Disease Control and Prevention (CDC) reports that just over 10% of Hawaii children were estimated to have asthma compared to 7.5% of children in the US. Asthma can be better managed through early identification with primary care health professionals, support to parents and families and proper accessible medications.

In Hawaii, cases of asthma are more often found in low income populations, particularly those without primary care involvement and disproportionally among Native Hawaiian and Pacific islanders.

CDC recommends that schools provide asthma education for students with asthma and for school staff, parents and families. The bill aligns with the state's 2030 Asthma Plan.

Thank you for the opportunity to testify.

Lynn B. Gerald, PhD, MSPH Assistant Vice Chancellor for Population Health Research Professor of Medicine University of Illinois Chicago (520)429-0991 (cell)

#### House Testimony for House Bill 903 Relating to Student Health Tuesday January 28, 2023

Thank-you for the opportunity to present this written testimony. I am Dr. Lynn Gerald, Assistant Vice Chancellor for Population Health, and Research Professor of Medicine at the University of Illinois Chicago. I am a national expert in stock albuterol policy guidelines and implementation of stock albuterol programs. My 30-year career has focused on working with schools to help them improve the health of children with asthma and I have maintained continuous funding from the National Institutes of Health to study school-based asthma programs such as stock inhaler programs.

I was the senior author and Chair of the national stock albuterol policy guidelines (*American Journal of Respiratory and Critical Care Medicine, 2021*) and the primary advocate for the stock inhaler law which was passed in Arizona in 2017. I have also advised groups from many other states who have either passed or are working on passing or updating their legislation including Illinois, Texas, Utah, California, Maryland, Florida, and many others. The reason I have been actively involved in this area is that the <u>passage of stock inhaler laws and implementation of such programs has been the most impactful intervention for children with asthma that I have seen in my 30 years of working with schools.</u>

I am here to provide my strong support for this bill that would provide stock albuterol in schools for children who experience respiratory distress. More than 1 in 10 children in the US have asthma. Each year, more than half of them will experience a sudden attack that makes it difficult for them to breathe. These attacks will lead to 750,000 emergency department visits and 200,000 hospitalizations. Unfortunately, about 200 children will die following such an attack.

Because attacks can occur without warning and can occur anytime, anywhere, children with asthma should always have access to medication that can quickly reverse the blockages in their lungs. This life-saving medication, called a short-acting bronchodilator, is easy to administer, inexpensive, and very safe. Despite the need for this medication, my research indicates that 80% of children with asthma do not have it at school (*Journal of Pediatric Allergy, Asthma, and Immunology, 2012 & Annals of the American Thoracic Society 2012*). This problem affects all children: rich or poor, private-schooled, public-schooled, urban or rural. There are many reasons why they might not have medication: they forgot it; they couldn't afford it; they unexpectedly ran out; it might have expired.

When children do not have medication, schools have few options. A parent may not be immediately accessible or close enough to respond promptly. Even if they can, there is a delay during which the attack often worsens. In such cases, the school must call 911. Doing so is likely to lead to an ambulance transport and emergency department visit or hospitalization. Such events take children out of the classroom for days at a time and further impede their learning. These adverse events are, in many cases, avoidable with a simple low cost solution: stock inhalers. Schools can purchase a single inhaler containing a short-acting bronchodilator that can be used for anyone who experiences the sudden onset of cough, shortness-of-breath, and chest tightness that signals an asthma attack.

My research indicates that stock inhaler programs can reduce 9-1-1 calls for respiratory distress by 20% and EMS transports by 40% (*Annals of the American Thoracic Society 2016*). Furthermore, my research in Arizona, Illinois and Missouri has indicated that about 80% of children are able to return to class after administration of stock albuterol (*Journal of Allergy, Asthma, and Immunology, 2021*). This research also indicated that 84% of students were able to return to class after administration of the stock inhaler. Therefore, this medication allows children to return to their learning environment. If the stock inhaler was not available, schools would have to

call a parent to bring medication or call 9-1-1. This delay in treatment can cause respiratory distress to worsen.

As Chair of the national guidelines statement on ensuring access to albuterol in schools (*American Journal of Respiratory and Critical Care Medicine, 2021*), I urge you to follow these guidelines in crafting your legislation. These guidelines were created and approved by the <u>American Thoracic Society (a 15,000 member pulmonary physician organization), the National Association of School Nurses, the American Lung Association, and the <u>Allergy and Asthma Network</u>. They were also endorsed by the <u>Pediatric Pharmacy Association</u>. One of the important components of legislation is that <u>it is critical that school staff other than Keiki nurses are trained in the signs and symptoms of asthma and when it is appropriate to administer the rescue medications</u>. Unfortunately, in Hawai'i (as in many states) there is not a keiki school nurse present in every school. However, because of the safety of the medication used and the life-threatening implications of an asthma attack, it is imperative that we train other staff to assess, access, and administer the required medication that would potentially save a student's life.</u>

I urge you to support the proposed stock inhaler legislation that allows any trained school staff to administer albuterol as this would be in-line with national guidelines and would provide a safe, inexpensive solution for an important health challenge faced by children and the schools that educate them.

- Volerman, Anna, Ashley A. Lowe, Andrea A. Pappalardo, Charmayne M.C, Anderson, Kathryn V. Blake, Tyra Bryant-Stephens, Thomas Carr, Heather Carter, Lisa Cicutto, Joe K. Gerald, Jamila Jefferson, Tina Miller, Nuala S. Moore, Hanna Phan, S. Christy Sadreameli, Andrea Tanner, Tonya A. Winders, & Lynn B. Gerald on behalf of the American Thoracic Society Behavioral Science and Health Services Research, Pediatrics and Nursing Assemblies with Co-Sponsorship from the Allergy and Asthma Network, the American Lung Association and the National Association of School Nurses and Endorsement by the Pediatric Pharmacy Association. Ensuring Access to Albuterol in Schools - From Policy to Implementation: An Official American Thoracic Society Policy Statement. *American Journal of Respiratory and Critical Care Medicine*. (2021) 204(5): 508-522. https://doi.org/10.1164/rccm.202106-1550ST
- Gerald, Joe K., Nancy Stroupe\*, Leslie A. McClure, Lani Wheeler, & Lynn B. Gerald. (2012). "Availability of Asthma Quick Relief Medication in Five Alabama School Systems." *Journal of Pediatric Asthma, Allergy, and Immunology*. 25(1):11-16. <u>https://pubmed.ncbi.nlm.nih.gov/22454787/</u>
- Lynn B. Gerald, Aimee Snyder, Jody Disney, Joe K Gerald, Allison Thomas, Graciela Wilcox, & Mark Brown. (2016). "Implementation and Evaluation of a Stock Albuterol Program for Students with Asthma." *Annals of the American Thoracic Society*. 13(2): 295. <u>https://pubmed.ncbi.nlm.nih.gov/26848605/</u>
- Lowe, Ashley A, Joe K. Gerald, Conrad J. Clemens, Debra A. Stern, & Lynn B. Gerald. Managing Respiratory Emergencies at School: A County-Wide Stock Inhaler Program. *Journal of Allergy and Clinical Immunology* (2021) Feb 10:S0091-6749(21)00175-5. PMID: 33581200 <u>https://doi.org/10.1016/j.jaci.2021.01.028</u>