DAVID Y. IGE GOVERNOR



CATHERINE PAYNE CHAIRPERSON

### STATE OF HAWAII

### STATE PUBLIC CHARTER SCHOOL COMMISSION ('AHA KULA HO'ĀMANA)

http://CharterCommission.Hawaii.Gov 1111 Bishop Street, Suite 516, Honolulu, Hawaii 96813 Tel: (808) 586-3775 Fax: (808) 586-3776

FOR:	SB1221 SD2 HD1 Relating to Health
DATE:	Thursday, April 2, 2015
TIME:	3:30 p.m.
COMMITTEE(S):	House Committee on Finance
ROOM:	Conference Room 308
FROM:	Tom Hutton, Executive Director State Public Charter School Commission

Chair Luke, Vice Chair Nishimoto, and members of the Committee:

The State Public Charter School Commission appreciates the opportunity to submit these written comments on Senate Bill 1221 SD2 HD1, "Relating to Health," which would establish various requirements for public schools, both Department of Education ("DOE") schools and public charter schools, related to serving students with diabetes.

The Commission is strongly committed to ensuring that all students have fair access to Hawaii's public charter schools. We would like to bring a few considerations to the Committee's attention as it considers this proposal:

- We note that the DOE has submitted testimony expressing concerns about the estimated costs of implementing the bill's requirements. The operational and financial challenges for small, independently governed and managed public charter schools to meet these requirements would be even greater. We appreciate the addition of appropriations to this measure to effectuate its purposes, and we would hope that these appropriations would include the funding necessary for its implementation by charter schools as well, such as the cost of mandated training of school employees.
- The requirement that trained personnel accompany the student at all times, including when on the bus, may prove operationally and financially challenging for public schools, especially public charter schools. Depending on the child's particular circumstances, this may also be unnecessary.

- The requirement that the school implement a diabetes medical management plan for a student as submitted by a parent, as is, could preclude exploration of other approaches that may meet the student's medical needs while also better reflecting the school's operational needs or, if applicable, allowing for better incorporation into the student's Section 504 plan.
- If proposed section 302A-E on school enrollment is to be adopted, we would
  recommend that for ease of reference its provisions be applied to public charter schools
  separately by adding a new section to the bill amending Section 302D-34, Hawaii
  Revised Statutes (the section of the charter school statute that addresses enrollment),
  to replicate there the same provisions now set forth in proposed section 302A-E. We
  then would recommend a conforming revision the new proposed section 302A-E to
  apply specifically to DOE schools, as opposed to all public schools.
- There are likely to be cost implications under proposed section 302A-H (b) to allowing lawsuits against schools—and the recovery of attorney's fees—for failure to comply with the many provisions of the proposed bill. We note that the bill already provides for an impartial administrative hearing before the DOE in the event of a dispute.

Thank you for your consideration of these comments.



The Honorable Sylvia Luke, Chair House Committee on Finance Hawaii State Capitol

### RE: Testimony In Support of SB1221 SD2 HD1!

Dear Representative Luke and Members of the House Committee on Health:

The care of a student with diabetes requires management 24 hours a day, 7 days a week – this includes careful monitoring of blood sugar levels through the day and administration of medication such as insulin. Blood sugar levels that are well managed will help individuals with diabetes avoid the dangerous short term complications of hyper or hypoglycemia and prevent long term complications such as blindness, kidney failure, amputation, and cardiovascular disease.

In 2009, it was made very clear that diabetes is considered a disability protected under the Americans with Disabilities Act. Further, additional federal protections specific to children with diabetes who attend school are as follows:

- Section 504 of the Rehabilitation Act of 1973; and
- Individuals with Disabilities Education Act.

Although many schools in Hawaii do very well in accommodating children with health needs, there are still many schools that do not. The absence of statute that clearly details the responsibilities of schools and the rights of students with diabetes has resulted in discrimination and has compromised the health and education of our keiki.

I write today to ask for your support in the passage of SB1221 SD2 HD1 to protect the health and safety of children with diabetes, while ensuring that they are able to equally participate academically and amend the bill to be implemented at the end of the 2015 Legislative Session.

This bill will uphold the American Diabetes Association's Safe at School principles that will:

- 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 strongly believe that SB1221 SD2 HD1 is medically safe and necessary to ensure students with diabetes receive the appropriate care and are provided access to supplies they need in order to stay healthy and learn.

Along with the American Diabetes Association, you will find that these other organizations support our Safe at School principles:

- American Academy of Pediatrics
- Hawaii American Academy of Pediatrics
- American Association of Clinical Endocrinologists
- American Association of Diabetes Educators
- American Dietetic Association
- American Nursing Association
- Juvenile Diabetes Research Foundation

I have worked with families, schools, and public health nurses as an advocate on issues that arise from miscommunication, discrimination, and process follow through – with your help, the unnecessary time away from school experienced from our keiki with diabetes due to the lack of policy can be avoided.

These children will face obstacles in life until we find a cure; fighting for their education should not be one of them.

I would greatly appreciate your consideration and urge you once again to support this important legislation and its implementation upon the close of the 2015 Legislative Session.

Lawrence Duenas, Associate Director American Diabetes Association – Hawaii

FIN-Jo

From:	Robyn Mizuno <rmizuno@diabetes.org></rmizuno@diabetes.org>
Sent:	Wednesday, April 01, 2015 10:24 AM
То:	FINTestimony
Subject:	Keiki with Diabetes Matter - Pass SB1221 SD2 HD1!

The Honorable Sylvia Luke, Chair House Committee on Education Hawaii State Capitol

Dear Representative Luke and Members of the House Committee on Finance:

Diabetes is one of the most common chronic-diseases in children and must be managed 24 hours a day, 7 days a week. Diabetes does not go away when a child goes to school, or attend school-related activities. With that, I write to ask for your full support of **SB1221 SD2 HD1** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2 HD1** will:

- 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 schoolrelated 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.

Children with diabetes are protected by Federal Laws such as:

- The Americans with Disabilities Act; and
- Section 504 of the Rehabilitation Act of 1973; and
- Individuals with Disabilities Education Act

I strongly believe **SB1221 SD2 HD1** 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.



(these are just a few of the keiki and their families who are affected by diabetes every day)

It can be difficult for any child to feel like they "fit in" with their peers. Imagine how difficult it must be on children who are diagnosed with this life-changing disease; why make their lives even more difficult? We should provide them with any medical assistance and considerations necessary to enhance their education so that they stay focused on learning. I would greatly appreciate your consideration and urge you to support this important legislation and invite your colleagues to do the same.

I would greatly appreciate your consideration and urge you to support this important legislation and its implementation upon the close of the 2015 Legislative Session.

If you have any questions, please feel free to call or email me. The ADA Hawaii Office is also available at (808) 947-5979, or via email at <u>ADAHawaii@diabetes.org</u>.

Mahalo nui loa,

Robyn Mizuno | Manager, Fundraising and Administration American Diabetes Association Pioneer Plaza 900 Fort Street Mall, Suite 940 Honolulu, Hawaii 96813 P: 808.947.5979, Ext. 7034 F: 808.546.7502 E: <u>rmizuno@diabetes.org</u> 1-800-DIABETES (342-2383)





Find us online at: <a href="http://www.diabetes.org/hawaii">www.diabetes.org/hawaii</a> <a href="http://www.diabetes.org/hawaii">www.stopdiabetes.org</a> <a href="http://www.facebook.com/AmDiabetesVols">www.stopdiabetes.com</a> <a href="http://www.facebook.com/AmDiabetesVols">www.stopdiabetes.com</a>





3375 Koapaka Street, D-108 • Honolulu, HI 96819 • (808) 831-0811

April 1, 2015

# The Honorable Sylvia Luke, Chair House Committee on Education Hawaii State Capitol

Re: HB 2260: Relating to Environmental Protection

Dear Representative Luke and Members of the House Committee on Finance:

We appreciate the opportunity to submit our testimony and express our support for SB1221 SD2 HD1. As you may know Times Supermarket in based on Oahu and operates 25 stores as well as Pharmacy locations in Maui, Kauai and Oahu. Companywide we pride ourselves on promoting best health practices for our employees as well as our consumers.

Diabetes is one of the most common chronic-diseases in children and must be managed 24 hours a day, 7 days a week. Diabetes does not go away when a child goes to school, or attend school-related activities. With that, I write to ask for your consideration in ending discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. We believe SB1221 SD2 HD1 will:

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.

Children with diabetes are protected by Federal Laws such as:

- The Americans with Disabilities Act; and
- Section 504 of the Rehabilitation Act of 1973; and
- · Individuals with Disabilities Education Act

We believe SB1221 SD2 HD1 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.

Your consideration and support for this important legislation and its implementation upon the close of the 2015 Legislative Session is greatly appreciated.

Please feel free to contact me should you have any questions regarding this matter at (209) 957-2555, ext 153 or Bob Stout, President of Times Supermarket at (808) 831-0811. The ADA Hawaii Office is also available at (808) 947-5979, or via email at <u>ADAHawaii@diabetes.org</u>. We thank you in advance for your consideration and we look forward to continuing the dialogue.

Respectfully,

Bob Gutierrez Director of Government Affairs, Times Supermarket

From:	Marion Kamei <mkamei@fhb.com></mkamei@fhb.com>
Sent:	Wednesday, April 01, 2015 9:54 AM
To:	FINTestimony
Subject:	Keiki with Diabetes Matter - Pass SB1221 SD2 HD1!

The Honorable Sylvia Luke, Chair House Committee on Education Hawaii State Capitol

Dear Representative Luke and Members of the House Committee on Finance:

Diabetes is one of the most common chronic-diseases in children and must be managed 24 hours a day, 7 days a week. Diabetes does not go away when a child goes to school, or attend school-related activities. With that, I write to ask for your full support of **SB1221 SD2 HD1** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2 HD1** will:

- 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.

Children with diabetes are protected by Federal Laws such as:

- The Americans with Disabilities Act; and
- Section 504 of the Rehabilitation Act of 1973; and
- Individuals with Disabilities Education Act

I strongly believe **SB1221 SD2 HD1** 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 consideration and urge you to support this important legislation and its implementation upon the close of the 2015 Legislative Session.

If you have any questions, please feel free to call or email me. The ADA Hawaii Office is also available at (808) 947-5979, or via email at ADAHawaii@diabetes.org.

Mahalo nui loa,

### Marion M. Kamei

First Hawaiian Bank. Senior Vice President & Team Leader Private Banking Division 1580 Kapiolani Blvd. Honolulu, HI 96814 Direct: (808) 943-4480 Fax: (808) 943-4548 mkamei@fhb.com NMLS: 543065

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From:	Selena Ching <sching@hanahauoli.org></sching@hanahauoli.org>
Sent:	Wednesday, April 01, 2015 10:24 AM
То:	FINTestimony
Subject:	Please help our kids with diabetes - Pass SB1221 SD2 HD1

The Honorable Sylvia Luke, Chair House Committee on Education Hawaii State Capitol

Dear Representative Luke and Members of the House Committee on Finance:

Please support the passage of **SB1221 SD2 HD1** to help our children who are struggling to live with diabetes. The bill would end discrimination in our schools and protect the health, safety, and education of children in Hawaii who live daily with an incredibly challenging and unrelenting disease. **SB1221 SD2 HD1** will:

- 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 strongly believe **SB1221 SD2 HD1** is medically safe and necessary to ensure students with diabetes receive the appropriate care and are provided access to supplies they need provided during those times when a health aide, nurse, or contract nurse is not available for daily routine diabetes care.

As a parent of a 7 year old who has been living with diabetes for 5-1/2 years, we have seen what our child needs to be successful in school. Access to diabetes supplies are a necessity 24- hours a day, particularly during school hours when the stress of school activities often distracts a child from proper management and care. We need to make it as convenient as possible for our children to care for themselves and keep themselves safe. Testing and self managing are safe activities but must be done consistently and often, n o matter where a child is. More often than not, you can't foresee when a child will fall into a compromising blood glucose situation. If a child has to make it to some other part of campus that is a sanctioned place to test or manage her health, it not only puts the child at risk, it is a loss of valuable learning time.

Living with type 1 diabetes sucks. It's relentless, it's exhausting and it's life altering. Our kids with this disease grow u p much faster than their peers. The discipline necessary to keep them safe is daunting. These kids deserve a break and the support of an educational system that encourages them to make good choices and allows them the access and ease to care for an extremely complicated disease that haunts them 24-hours a day, 7 days a week, 365 days a year. There is no break from this disease. We should at least give our kids a chance to live with it healthily, positively and safely.

I would greatly appreciate your consideration and urge you to support this important legislation and its implementation upon the close of the 2015 Legislative Session.

Thank you for your consideration. Aloha, Selena Ching 2526 Olopua St, 96822 (808)395-4998

### Dr. Jane K Kadohiro, DrPH, APRN, CDE, FAADE

Diabetes Education and Support Consulting Services 1629 Wilder Avenue 504 Honolulu, HI 96822 USA (808) 271 1282 kadohiro@hawaii.edu

April 1, 2015

The Honorable Representative Sylvia Luke, Chair The Honorable Senator Scott Y. Nishimoto, Vice Chair House Finance Committee Hawaii State Capitol Honolulu, Hawaii 96813

### RE: SB 1221 SD 2, HD 1 Please note additional reference on page 2 to SB 846 In Strong Support of SB 1221 SD 2 HD 1 with proposed amendments HEARING date 4/2/2015

Dear Chair Luke, Vice Chair Nishimoto, and members of the House Finance Committee:

Successful academic achievement and preparedness for a productive life is seriously impaired among students who have life-threatening health needs that are not addressed during the school day and during school related activities. Diabetes is life-threatening for most children so affected.

I am writing in strong support of SB 1221, SD 2 , HD 1 which will vastly improve the ability of children who have diabetes to receive their life saving insulin and perform critical self management tasks during the school day and during school related activities... all of which are necessary 24/7 for these students to live safely with diabetes, to learn, and to become productive members of society. By being medically safe at school, these children will maximize their learning and go on to live rich, full, productive lives.

Diabetes is- and for many years has been considered a disability under the federal law through the American's with Disabilities Act- and thus all students who have diabetes qualify- and <u>should be informed</u> that they qualify for accommodations to be made via the 504 process

The Department of Education has had many years of many opportunities to correct these serious concerns, and they have not. While a small amount of progress has been made over many years, there is still no DOE policy to address these serious issues, and the same calls of desperation continue year after year from parents of newly diagnosed children or when children transfer or advance to a new school.

Though the diabetes care aspects of SB 1221, SD 2 HD 1 in its current form that now includes earlier proposed amendments by the American Diabetes Association are absolutely crucial, there are two additional aspects of care that are also life saving aspects of standards of care and self management for all children/students who have diabetes. The following additional amendments to SB 1221, SD 2 HD 1 would address these additional critical needs of students with diabetes:

1\* permit students with diabetes to test their blood glucose during routine academic (including standardized) test taking, treat as needed, and resume test taking.

2\* make known to and assist parents or guardians of all students who have diabetes, the DOE policies regarding diabetes, the 504 process, the required forms, and other individualized plans and accommodations that the student may require. (Currently, many if not most parents are not made aware of the 504 process, nor of the role and access to Public Health/School Health Nurses when they notify their child's school that their child has diabetes. Because of this, many students go for months- and even years without being informed- and resulting in very important accommodations not being made. This is a huge issue!)

# 3\* (effective date). This bill needs to become law very quickly. Students with diabetes have endured these problems far far too long!

4. I am in full agreement with additional amendments proposed by DOH and the American Diabetes Association. I am presently working with DOH and with the American Diabetes Association on agreeable language to address liability issues, including coverage of health professionals who provide training to volunteers and others.

Finally, while another bill, SB 846 proposes a very long needed means to address some of the unresolved issues resulting from Act 51 with the establishment of a two year interagency task force to address the many health issues that affect students in our school system, the needs of students who have diabetes has been far to long overlooked. We cannot wait for another three to five years for a task force to convene, develop a plan and propose rules, engage in implementing the new rules, and further jeopardize the safety and learning potential of students who have diabetes. SB 1221 SD 2 HD 1 is needed NOW! It was needed a long, long time ago!

Below my signature I have included just a few examples of situations that I have encountered over many years in working with families and with the "system." I welcome any concerns or questions and can best be reached at 808 271 1282 or at kadohiro@hawaii.edu.

Mahalo nui loa for your interest in the health and learning of Hawaii's children!! I appreciate your serious attention to and support of SB 1221, SD 2, HD 1 together with these very important amendments- all a basic standard of care of a child with diabetes all day, everyday throughout his or her life.

Dr. Jane K Kadohiro Lifetime Volunteer and Past President, American Diabetes Association – Hawaii Past National Board Member, American Diabetes Association Chair, Advocacy Committee President and CEO, Diabetes Education and Support Consulting Services The Queen's Medical Center, Diabetes Center, retired. 2009-2013 Professor and Advanced Practice RN from University of Hawaii, retired. 1991-2009 Deputy Director of Health, State of Hawaii, 2002-2004 Public health Nurse, Hawaii State Department of Health, 1978-1991 Person with Type 1 Diabetes for 60 years

Unfortunately, this is often not the case with children who have diabetes in Hawaii's schools. In many situations, parents have been instructed by school officials to enroll their child at a school that has a nurse, and in numerous situations, parents have had to take time off work every day to go to their child's school to give their child insulin, test blood sugar, etc. A number of parents have actually had to quit their jobs to care for their child during the school day, and some have actually moved to the mainland U.S. where care is available within the school system. A teenager (who was an honors student and active in his school and community) was warned that he could not keep any food in his possession (which is needed to treat low blood sugar), and if he was ever caught with an insulin syringe at school, he would be taken immediately to the police station! This youth, as with most teens who have diabetes, is well able to self manage his diabetes without a disruption in his learning- and with minimal supervision.

For over 20 years, I have been involved in numerous meetings with various school officials and others to address the critical health dangers faced (and experienced) when the issues addressed in HB 861 (and the proposed amendments noted below) are not available to students- and in fact in numerous cases have been denied. Representing my official work and volunteer work, though attempted many times, I have never been given an appointment with any of the Superintendents in these 20 years. After many unsuccessful attempts to schedule a meeting over many years, when finally seen by the Chair of the Board of Education and two other members, we were told that our concern is not their responsibility. We were informed at a meeting this past year- and the DOE the House Committee on Health in 2013- that that our concerns are clearly addressed in DOE policy This is NOT so!

### **FIN-Jo**

From:
Sent:
To:
Subject:

Tabitha Carreira-Halliwell <tcarreir@my.hpu.edu> Wednesday, April 01, 2015 10:57 AM FINTestimony Keiki with Diabetes Matter - Pass SB1221 SD2 HD1!

The Honorable Sylvia Luke, Chair

House Committee on Education

Hawaii State Capitol

Dear Representative Luke and Members of the House Committee on Finance:

Diabetes is one of the most common chronic-diseases in children and must be managed 24 hours a day, 7 days a week. Diabetes does not go away when a child goes to school, or attend school-related activities. With that, I write to ask for your full support of **SB1221 SD2 HD1** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2 HD1** will:

• 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.

Children with diabetes are protected by Federal Laws such as:

- The Americans with Disabilities Act; and
- Section 504 of the Rehabilitation Act of 1973; and
- Individuals with Disabilities Education Act

As an adult type 1 diabetic diagnosed at age 9, I strongly believe **SB1221 SD2 HD1** 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 consideration and urge you to support this important legislation and its implementation upon the close of the 2015 Legislative Session.

If you have any questions, please feel free to call or email me. The ADA Hawaii Office is also available at (808) 947-5979, or via email at ADAHawaii@diabetes.org.

808-799-9854 tcarreir@my.hpu.edu FIN-Jo

From:	Ellie Ventula-Honda < EVentulaHonda@diabetes.org>
Sent:	Wednesday, April 01, 2015 10:54 AM
To:	FINTestimony
Subject:	Keiki with Diabetes Matter - Pass SB1221 SD2 HD1

The Honorable Sylvia Luke, Chair House Committee on Education Hawaii State Capitol

Dear Representative Luke and Members of the House Committee on Finance:

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- Individuals with Disabilities Education Act

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I would greatly appreciate your consideration and urge you to support this important legislation and its implementation upon the close of the 2015 Legislative Session.

If you have any questions, please feel free to call or email me. The ADA Hawaii Office is also available at (808) 947-5979, or via email at <u>ADAHawaii@diabetes.org</u>.

Mahalo nui loa,

Ellie Ventula-Honda

(808) 497-9052 Edhonda2011@yahoo.com

From: Sent: To: Subject: Jill Holley <jill@kidneyhi.org> Wednesday, April 01, 2015 11:50 AM FINTestimony Keiki with Diabetes Matter - Pass SB1221 SD2 HD1!

The Honorable Sylvia Luke, Chair House Committee on Education Hawaii State Capitol

Dear Representative Luke and Members of the House Committee on Finance:

Our children deserve more! Please reach into your heart and approve the appropriate legislation. Children grow up in a more modern society but that does not mean they are cared for properly. We need help to help the children. Diabetes is serious business and is an indicator for Kidney Disease. Children need our assistance and these recommended SB1221/ SD2/ HD1 are critical.

Diabetes is one of the most common chronic-diseases in children and must be managed 24 hours a day, 7 days a week. Diabetes does not go away when a child goes to school, or attend school-related activities. With that, I write to ask for your full support of **SB1221 SD2 HD1** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2 HD1** will:

- 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
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I would greatly appreciate your consideration and urge you to support this important legislation and its implementation upon the close of the 2015 Legislative Session.

If you have any questions, please feel free to call or email me. The ADA Hawaii Office is also available at (808) 947-5979, or via email at <u>ADAHawaii@diabetes.org</u>.

Mahalo nui loa,

JILL HOLLEY | Maui Director National Kidney Foundation of a Hawaii T: 808.986.1900 | F: 808.986.1901 | C: 530.545.3000 353 Ano Street | Kahului, HI 96732 j i I I @ki dneyhi . org | www. ki dneyhi . org



### of Hawaii

The National Kidney Foundation of Hawaii is a proud partner with Aloha United Way #72700, the Combined Federal Campaign #61532 and Foodland's Give Aloha # 78078

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From:	Dr. Laurie Tom <laurietom@pueo.net></laurietom@pueo.net>
Sent:	Wednesday, April 01, 2015 2:52 PM
То:	FINTestimony
Subject:	Keiki with Diabetes Matter! Please keep them Safe at School and pass SB1221 SD2
	HD1 !

The Honorable Sylvia Luke, Chair House Committee on Finance Hawaii State Capitol

Aloha Chair Luke and Members of the House Committee on Finance:

Diabetes is one of the most common chronic-diseases in children and must be managed 24 hours a day, 7 days a week. Diabetes does not go away when a child goes to school, or attend school-related activities. With that, I write again today to ask for your full support of **SB1221 SD2 HD1** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2 HD1** will:

- 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
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Children with diabetes are protected by Federal Laws such as:

- The Americans with Disabilities Act; and
- Section 504 of the Rehabilitation Act of 1973; and
- Individuals with Disabilities Education Act

I am an endocrinologist specializing in diabetes, and I strongly believe **SB1221 SD2 HD1** 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 consideration and urge you to support this important legislation and its implementation upon the close of the 2015 Legislative Session.

If you have any questions, please feel free to call at 528-4010 or email me. The ADA Hawaii Office is also available at (808) 947-5979, or via email at <u>ADAHawaii@diabetes.org</u>.

Mahalo nui loa,

Laurie K.S. Tom, M.D. Past President, ADA Hawaii



# finance8-Melanie

From:	
Sent:	
To:	
Subject:	

Kaufman, Andrew <KaufmanA@ctahr.hawaii.edu> Wednesday, April 01, 2015 3:19 PM FINTestimony Keiki with Diabetes Matter - Pass SB1221 SD2 HD1!

The Honorable Sylvia Luke, Chair House Committee on Education Hawaii State Capitol

Aloha Representative Luke and Members of the House Committee on Finance:

I am writing on behalf of my 5 year old son Nicholas who has Type 1 Diabetes. Like most parents we are getting ready for our son to begin kindergarten in the Fall, yet the stress that my wife and I are experiencing is something most parents don't ever have to worry about: if there child will be medically safe at school! We know firsthand about the discrimination that happens when your child has diabetes; and even know of many families that have left our Aloha State because the school system was not willing and or prepared to assist with their child's care. There are over 1000 Keiki in Hawaii that have diabetes, and this bill is a step to keep them safe at school so they can learn just as their friends do! Diabetes is one of the most common chronic-diseases in children and must be managed 24 hours a day, 7 days a week. Diabetes does not go away when a child goes to school, or attend school-related activities. With that, I write to ask for your full support of **SB1221 SD2 HD1** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2 HD1** will:

- 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.

Children with diabetes are protected by Federal Laws such as:

- The Americans with Disabilities Act; and
- Section 504 of the Rehabilitation Act of 1973; and
- Individuals with Disabilities Education Act

I strongly believe **SB1221 SD2 HD1** 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 consideration and urge you to support this important legislation and its implementation upon the close of the 2015 Legislative Session.

If you have any questions, please feel free to call or email me. The ADA Hawaii Office is also available at (808) 947-5979, or via email at <u>ADAHawaii@diabetes.org</u>.

Mahalo nui loa, Andy Kaufman 349-2277 kaufmana@hawaii.edu

Andy Kaufman, ASLA, MLA, Ph.D. Associate. Prof../Landscape Specialist Dept.Tropical Plant and Soil Sciences College of Tropical Ag & Human Resources University of Hawaii at Manoa 3190 Maile Way, Room #102 Honolulu, HI 96822-2279, USA (808) 956-7958 kaufmana@hawaii.edu http://www.ctahr.hawaii.edu/kaufmana/

Only Design Can Rebuild A World That Will Be Healthy For Both People And Nature; The Function Of Design IsTo Work Out The Relationships, And Resolve The Contradictions, Between Ecology And Culture... -Garrett Eckbo

### Have A Great Day!

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From: Sent: To: Subject: Lucy Carter < lucy.carter56@gmail.com> Wednesday, April 01, 2015 3:07 PM FINTestimony TO PASS sb1221-sd2hd1

nEED YOUR URGENT awareness for these two bills to be place in the honor of our Island and community with the affect of Diabetics.

We again, urge you. Thank you

--

, L U C Y :-)

# finance8-Melanie

From: Sent: To: Subject: Ellie Ventula-Honda <EVentulaHonda@diabetes.org> Wednesday, April 01, 2015 3:44 PM FINTestimony Keiki with Diabetes Matter - Pass SB1221 SD2 HD1



The Honorable Sylvia Luke, Chair House Committee on Finance Hawaii State Capitol

Dear Representative Luke and Members of the House Committee on Finance:

Diabetes is one of the most common chronic-diseases in children and must be managed 24 hours a day, 7 days a week. Diabetes does not go away when a child goes to school, or attend school-related activities. With that, I write to ask for your full support of **SB1221 SD2 HD1** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2 HD1** will:

- 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.

Children with diabetes are protected by Federal Laws such as:

- The Americans with Disabilities Act; and
- Section 504 of the Rehabilitation Act of 1973; and
- Individuals with Disabilities Education Act

I strongly believe **SB1221 SD2 HD1** 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 consideration and urge you to support this important legislation and its implementation upon the close of the 2015 Legislative Session.

If you have any questions, please feel free to call or email me. The ADA Hawaii Office is also available at (808) 947-5979, or via email at <u>ADAHawaii@diabetes.org</u>.

Mahalo nui Ioa, Ellie Ventula-Honda (808) 497-9052 Edhonda2011@yahoo.com

# finance8-Melanie

From: Sent: To: Subject: EFOX (Eddie Fox) <efox@novonordisk.com> Wednesday, April 01, 2015 3:58 PM FINTestimony Keiki with Diabetes Matter - Pass SB1221 SD2 HD1!



The Honorable Sylvia Luke, Chair House Committee on Finance Hawaii State Capitol

Dear Representative Luke and Members of the House Committee on Finance:

Diabetes is one of the most common chronic-diseases in children and must be managed 24 hours a day, 7 days a week. Diabetes does not go away when a child goes to school, or attend school-related activities. With that, I write to ask for your full support of **SB1221 SD2 HD1** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2 HD1** will:

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  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.

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- The Americans with Disabilities Act; and
- Section 504 of the Rehabilitation Act of 1973; and
- Individuals with Disabilities Education Act

I strongly believe **SB1221 SD2 HD1** 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 consideration and urge you to support this important legislation and its implementation upon the close of the 2015 Legislative Session.

If you have any questions, please feel free to call or email me. The ADA Hawaii Office is also available at (808) 947-5979, or via email at ADAHawaii@diabetes.org.

Mahalo nui loa,

Eddie Fox District Business Manager - Hawaii Novo Nordisk Inc. 91-1025 Kaikoele Street Ewa Beach, HI 96706 USA 808-927-0253 (direct) efox@novonordisk.com

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From: Sent: To: Subject: Michael H Ching <michael.ching@ey.com> Wednesday, April 01, 2015 3:49 PM FINTestimony Keiki with Diabetes Matter - Pass SB1221 SD2 HD1! LATE

The Honorable Sylvia Luke, Chair House Committee on Finance Hawaii State Capitol

Dear Representative Luke and Members of the House Committee on Finance:

Diabetes is one of the most common chronic-diseases in children and must be managed 24 hours a day, 7 days a week. Diabetes does not go away when a child goes to school, or attend school-related activities. With that, I write to ask for your full support of **SB1221 SD2 HD1** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2 HD1** will:

- allow department employees to be trained and to volunteer to be able to test blood glucose levels of students with diabetes
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  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.

Children with diabetes are protected by Federal Laws such as:

- The Americans with Disabilities Act; and
- Section 504 of the Rehabilitation Act of 1973; and
- Individuals with Disabilities Education Act

I strongly believe **SB1221 SD2 HD1** 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 consideration and urge you to support this important legislation and its implementation upon the close of the 2015 Legislative Session.

If you have any questions, please feel free to call or email me. The ADA Hawaii Office is also available at (808) 947-5979, or via email at <u>ADAHawaii@diabetes.org</u>.

Mahalo nui loa,

Mike Ching (808) 927-1552 chingmi@hawaii.rr.com

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DAVID Y. IGE GOVERNOR OF HAWAI



VIRGINIA PRESSLER, M.D. DIRECTOR OF HEALTH

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



# Testimony COMMENTING on SB 1221, SD2, HD1 Relating to Health

REPRESENTATIVE SYLVIA LUKE, CHAIR<br/>HOUSE COMMITTEE ON FINANCEHearing Date:April 2, 2015Room Number: 308

# 1 **Fiscal Implications:** None.

Department Testimony: The Department of Health (DOH) appreciates the intent of SB1221 2 3 SD2 and defers to the Department of Education (DOE) regarding implementation of this bill. 4 The bill requests that DOE consult with the DOH and the American Diabetes Association (ADA) 5 to develop and adopt rules pursuant to chapter 91 for the training of school employees and qualified volunteers to provide care to students with diabetes. Currently, all students requesting 6 7 diabetes care management in the school setting are referred to a PHN for a nursing consultation. 8 The consultation includes an assessment of the student's needs, development of a plan that may 9 include an emergency action plan (EAP), assessment of volunteers and training based on the specific needs of a student. PHNs use standard forms based on ADA best practices in 10 11 collaboration between DOH, DOE and ADA. Currently, the DOH provides all the training to school personnel on diabetes care. This past school year, PHNB provided 100 training sessions 12 on diabetes to 576 DOE employees. 13 Offered Amendments: The DOH recommends clarification on the terms, "nurse," "licensed 14 health care professional" and "qualified healthcare professional." Without a definition, "nurse" 15 may be considered a "licensed health care professional" and "qualified health care professional," 16 in relation to the providing training to "trained diabetes care personnel." Page 10, line 6 refers to 17 "licensed health care professional" and line 10 refers to "qualified healthcare professional." The 18 DOH recommends replacing the definition of "nurse" to read "Nurse shall have the same 19

20 definition as in section 457-2 and shall include any other licensed or registered nurse providing

- 1 care to students with diabetes under this part, such as public health nurses." DOH also
- 2 recommends defining the terms "qualified healthcare professional" and "licensed health care
- 3 professional."
- 4 Thank you for the opportunity to testify.

From: Sent: To: Subject: Leyla Kaufman <leyla@hawaii.edu> Wednesday, April 01, 2015 4:27 PM FINTestimony Keiki with Diabetes Matter - Pass SB1221 SD2 HD1!

The Honorable Sylvia Luke, Chair

House Committee on Finance

Hawaii State Capitol

Dear Representative Luke and Members of the House Committee on Finance:

I am the mother of a five-year-old boy that was diagnosed with type 1 diabetes at age 2 1/2. The diagnosis hit our family very hard. We have gone through a lot of emotional and physical stress to make sure our son grows as a healthy and happy child. His education is very important to us, so that he can fulfill his dreams and ambitions, as any other child. Maintaining him safe as school is of great importance to any parent, but it is even more important for parents with a child with diabetes. I hope that parents of children with diabetes don't have to go through the struggle of setting up diabetes care for their keiki from scratch, but that there is something already set up for this families.

Diabetes is one of the most common chronic-diseases in children and must be managed 24 hours a day, 7 days a week. Diabetes does not go away when a child goes to school, or attend school-related activities. With that, I write to ask for your full support of **SB1221 SD2 HD1** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii w ho have diabetes. **SB1221 SD2 HD1** will:

• 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.

Children with diabetes are protected by Federal Laws such as:

- The Americans with Disabilities Act; and
- Section 504 of the Rehabilitation Act of 1973; and
- Individuals with Disabilities Education Act

I strongly believe **SB1221 SD2 HD1** 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 consideration and urge you to support this important legislation and its implementation upon the close of the 2015 Legislative Session.

If you have any questions, please feel free to call or email me. The ADA Hawaii Office is also available at (808) 947-5979, or via email at ADAHawaii@diabetes.org.

Mahalo nui loa,

Leyla Kaufman

808-351-7367

leyla@hawaii.edu

From: Sent: To: Subject: Christina DeRamos <chrissyr009@yahoo.com> Wednesday, April 01, 2015 4:09 PM FINTestimony Keiki with Diabetes Matter - Pass SB1221 SD2 HD1! LATE

The Honorable Sylvia Luke, Chair House Committee on Finance Hawaii State Capitol

Dear Representative Luke and Members of the House Committee on Finance:

Diabetes is one of the most common chronic-diseases in children and must be managed 24 hours a day, 7 days a week. Diabetes does not go away when a child goes to school, or attend school-related activities. With that, I write to ask for your full support of **SB1221 SD2 HD1** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2 HD1** will:

 $\cdot$  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

 $\cdot$  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.

Children with diabetes are protected by Federal Laws such as:

- The Americans with Disabilities Act; and
- Section 504 of the Rehabilitation Act of 1973; and
- · Individuals with Disabilities Education Act

I have two children, both under the age of five, and both of whom have type 1 diabetes. There is no way of expressing in words how difficult every day is for them, as well as for my husband and I. I have had to stop working so that I can provide care for both of them. I have until this coming October to return to my position or I lose my job completely. Financially, it's taken its toll on our family, but we hope this difficult time will soon pass.

Medically, it's also taken its toll on our family. Our children have seen more than their fair share of the emergency room, but through it all, they exude amazing resilience, bravery and happiness. They even have nick names for IV's "robot arms" and blood pressure cuffs "arm huggers". They remind me to always see the positive in things, and I am thankful for this.

Diabetes does not go on vacation – it is 24 hours a day, 7 days a week! Diabetes does not stay home when children who have it go to school. Hawaii schools need to be better equipped, educated, and informed to be able to accommodate students in the system with chronic diseases

such as diabetes. The passage of legislation that will safeguard the needs of children with diabetes will make life much easier for my family - my two boys, and the many more out there who have had to fight the system for many years.

I strongly believe **SB1221 SD2 HD1** 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 consideration and urge you to support this important legislation and its implementation upon the close of the 2015 Legislative Session.

If you have any questions, please feel free to call or email me. The ADA Hawaii Office is also available at (808) 947-5979, or via email at ADAHawaii@diabetes.org.

Mahalo nui loa,

Christina DeRamos (808) 371-9007 chrissyr009@yahoo.com American Academy of Pediatrics

DEDICATED TO THE HEALTH OF ALL CHILDREN™ <sup>™</sup>



April 01, 2015

**AAP - Hawaii Chapter** 5414 Kirkwood Place Honolulu, HI 96821

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R. Michael Hamilton, MD, MS, FAAP Department of Pediatrics, Hawaii Permanente Medical Group 2828 Paa Street Mapunapuna Clinic, 2<sup>nd</sup> Floor Honolulu, HI 96819 Phone : 808/432-5604 Fax : 808/432-5601 Email: Michael.R.Hamilton@kp.org

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Chapter Web site

#### AAP Headquarters

141 Northwest Point Blvd Elk Grove Village, IL 60007-1098 Phone: 847/434-4000 Fax: 847/434-8000 E-mail: kidsdocs@aap.org www.aap.org Written Testimony from Michael Hamilton, President

### RE: SB 1221 SD2 HD1

Dear Representative Luke and House Finance Committee Members,

Thank you for this opportunity to testify in strong support of SB1221 SD2 HD1 to ensure the care, safety, and education of students with diabetes in Hawaii.

The Hawaii Chapter of the American Academy of Pediatrics is a voluntary organization of over 200 pediatricians in Hawaii. Our mission is to attain optimal physical, mental and social health and well being for infants, children, adolescents and young adults in Hawaii.

SB1221 SD2 HD1 will ensure that students with diabetes are safe at school and able to succeed at school academically.

- Students with diabetes qualify for a "504 Plan" that prohibits discrimination against people with disabilities. The 504 Plan sets out the actions the school will take to ensure that students with diabetes are safe, treated fairly and have the same access to education as other children. However, too often, parents of newly diagnosed students are not made aware of this plan and must take on the burden of their child's diabetes care during the school day or risk having their child excluded from educational activities. This unfair treatment has a huge impact on the families, as the parents must often take time from work and other responsibilities, to care for their child during the school hours.
- The AAP Hawaii Chapter is 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.
- SB 1221 aligns with the American Academy of Pediatrics Policy Statement: Guidelines for the Administration of Medication in School (2009) which recommends "trained and supervised unlicensed assistive personnel (UAP) who have the required knowledge, skills, and composure to deliver specific school health services under the guidance of a licensed RN."
- SB1221 SD2 HD1 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.

We strongly believe SB1221 SD2 HD1 is necessary to ensure students with diabetes receive the fair, appropriate care and are provided access to supplies they need at times when a health aide, nurse, or contract nurse is not available for daily routine diabetes care. Thank you for your consideration.

Sincerely,





From: Sent: To: Subject: Faith Rex <FRex@smshawaii.com> Wednesday, April 01, 2015 5:23 PM FINTestimony Please support SB1221 SD2 HD1 because all our Keiki need the appropriate care at school

The Honorable Sylvia Luke, Chair

House Committee on Finance

Hawaii State Capitol

Dear Representative Luke and Members of the House Committee on Finance:

Diabetes is one of the most common chronic-diseases in children and must be managed 24 hours a day, 7 days a week. Diabetes does not go away when a child goes to school, or attend school-related activities. With that, I write to ask for your full support of **SB1221 SD2 HD1** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2 HD1** will:

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- Individuals with Disabilities Education Act

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I would greatly appreciate your consideration and urge you to support this important legislation and its implementation upon the close of the 2015 Legislative Session.

If you have any questions, please feel free to call or email me. The ADA Hawaii Office is also available at (808) 947-5979, or via email at <u>ADAHawaii@diabetes.org</u>.

A hui hou, Faith Faith Sereno Rex

President, SMS Consulting LLC

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Valerie Sonoda Manager, Health Systems Development HMSA

Government and Community Relations Director Hawaii Laborers Union Local 368

Wesley J. Kim, MD Medical Director Diagnostic Laboratories Services, Inc.

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**Our Mission** is to prevent and cure diabetes and to improve the lives of all people affected by diabetes.



April 1, 2015

The Honorable Sylvia Luke, Chair House Committee on Finance Hawaii State Capitol, Room 308 Honolulu, Hawaii 96813

Dear: Chair Luke and Members of the House Committee on Finance.

On behalf of the Community Leadership Board of the American Diabetes Association (ADA), and the over 600,000 individuals who have prediabetes or diabetes in Hawaii, I am writing to ask for your full support of SB 1221 SD2 HD1 to ensure the care, safety, and education of approximately 1,000 students with prediabetes and diabetes in Hawaii.

Favorable support of SB 1221 SD2 HD1 will:

- 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 that the student uses as outlined in the students diabetes medical management plan and 504 accommodations, as diabetes is considered a disability under the federal law through the Americans with Disabilities Act, Section 504 of the Rehabilitation Act of 1973, and in the Individuals with Disabilities Education Act.
- · allow students with diabetes to possess, at all times, necessary supplies and equipment to perform diabetes monitoring and treatment activities in the classroom or any school-related activity and allow students to retake exams in the event they experience a high or low blood sugar and were not able to complete testing.

I encourage you to stand alongside the ADA and urge you to fully support SB 1221 SD2 HD1 to ensure that students with diabetes are not placed at risk.

- Although Federal Laws are to be upheld in Hawaii schools receiving federal funding, we have identified gaps in diabetes care provided by Hawaii schools, and we are concerned about the unfair treatment and inconsistent information shared with many families and the inadequate care of the children due to untrained staff. Diabetes must be managed 24 hours daily and we need to end discrimination and miscommunication in our schools to protect the health, education, and safety of our keiki who have diabetes.
- These gaps place many students with diabetes in an unsafe medical environment and prevent them from fully participating in the academic experience and reaching their potential. Some families have taken lengths to home school their child to avoid a medical crisis or have moved to another state to ensure that their children are kept medically safe at school.
- SB 1221 SD2 HD1 will provide assurance that schools will inform and assist parents or guardians of all students who have diabetes and consistently share DOE policies regarding diabetes management and the 504 process.
- SB 1221 SD2 HD1, follows the approach that nearly 30 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, 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 SB 1221 SD2 HD1, is necessary to ensure students with diabetes receive full diabetes management care. I would greatly appreciate your deep consideration and urge you to support this important legislation and its implementation upon the close of the 2015 Legislative Session.

Please feel free to contact me to discuss your concerns or questions. I am available at llam@diabetes.org or 808.947.5979.

Sincerely, Fulle Em

Leslie Lam, Executive Director American Diabetes Association



Pioneer Plaza, 900 Fort Street Mall, Suite 940, Honolulu, Hawaii 96813 | Tel: 808-947-5979 Fax: 808-546-7502 | Neighbor Islands at 1-888-DIABETES (342-2383) For general diabetes information and support call 1-800-DIABETES, visit us at diabetes.org/hawaii, or on Facebook at facebook.com/adahawaii





1200 Ala Kapuna Street + Honolulu, Hawaii 96819 Tel: (808) 833-2711 + Fax: (808) 839-7106 + Web: www.hsta.org

> Wil Okabe President Joan Kamila Lewis Vice President Colleen Pasco Secretary-Treasurer

Wilbert Holck Executive Director

DATE: APRIL 2, 2015

RE: SB 1221, SD2, HD1 – PROVIDE CARE FOR STUDENTS WITH DIABETES

TESTIMONY BEFORE THE HOUSE

COMMITTEE ON FINANCE

### PERSON TESTIFYING: JOAN LEWIS, VICE PRESIDENT HAWAII STATE TEACHERS ASSOCIATION

The Honorable Chair Sylvia Luke, Vice Chair Scott Nishimoto and Members of the Committee:

On behalf of Hawai'i's 13,500 public and public charter school teachers, the Hawai'i State Teachers' Association **supports the intent of SB1221, SD2, HD1** with comments. All our students deserve a learning environment that both maximizes their opportunity for success and ensures their safety. For students dependent on medications particularly in matters that may be life or death in nature, it is clear that prior planning and training are necessary for safety's sake.

Our schools currently comply with 504 protocols for students who have life conditions, either temporary or permanent that may hamper their learning. For each of these students, a 504 plan is created and school staff members are then directed to utilize the plan for the student for whom it is written. Based on the great impact the timely administration of medication can have for these particular students a more definitive plan would be in order. This is particularly important for those teachers who work directly with the students needing accommodations more specific than a 504 plan would indicate (i.e. a room set aside for privacy).

This bill speaks not only to volunteers who can be trained to deliver and assist with medication as necessary for students but also to achieving a higher standard of medically trained personal at the schools for our younger students who need assistance in proper protocols of testing and outcome assessments. This is certainly a step in the right direction.

For all staff however, general training, as part of our annual school safety trainings, in dealing with medical crises that may arise from these and other medical issues may be warranted. What are the immediate first steps? How do we, as teachers address both the needs of the child in distress at the same time we must continue supervising our other students? What is the school plan and protocol for emergent conditions? These are a few of the questions that could be addressed through training.

It is clear, particularly with the growing level of children being diagnosed with Diabetes, that legislation such as this is necessary and the concepts that lead to safe schools for all students supported. HSTA <u>SUPPORTS THE INTENT, WITH COMMENTS of SB1221, SD2, HD1</u>.

LATE

From: Sent: To: Subject: Frank Genadio <genadiof001@hawaii.rr.com> Wednesday, April 01, 2015 9:48 PM FINTestimony Keiki with Diabetes Matter - Pass SB1221 SD2 HD1

The Honorable Sylvia Luke, Chair House Committee on Finance Hawaii State Capitol

Dear Representative Luke and Members of the House Committee on Finance:

Diabetes is one of the most common chronic-diseases in children and must be managed 24 hours a day, seven days a week. Diabetes does not go away when a child goes to school, or attend school-related activities. With that, I write to ask for your full support of **SB1221 SD2 HD1** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2 HD1** will:

- 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.

Children with diabetes are protected by Federal Laws such as:

- The Americans with Disabilities Act; and
- Section 504 of the Rehabilitation Act of 1973; and
- Individuals with Disabilities Education Act

I strongly believe that the provisions described in **SB1221 SD2 HD1** are 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. As a co-chair of the Hawaii Coordinating Body of the American Association of Diabetes Educators (AADE), I would like to add that AADE strongly supports this comprehensive bill, as indicated in a position statement backing the three federal laws listed above as well as some state laws that provide protections to students with diabetes. Under these laws, diabetes is considered to be a disability, and it is illegal for schools and child care providers to discriminate against children with diabetes. Any school that receives federal funding or any facility open to the public must reasonably accommodate the special needs of children with diabetes.

I would greatly appreciate your consideration and urge you to support this important legislation and its implementation upon the close of the 2015 Legislative Session. If you have any questions, please feel free to call or email me. The American Diabetes Association Hawaii Office also is available at (808) 947-5979, or via email at: <u>ADAHawaii@diabetes.org</u>.

Mahalo and Aloha,

Viola E. Genadio, APRN, CDE, BCADM Hawaii Coordinating Body of AADE (808) 672-9170 genadiof001@hawaii.rr.com

### Written Only

KATHRYN S. MATAYOSHI SUPERINTENDENT



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



Date: 04/02/2015 Time: 03:30 PM Location: 308 Committee: House Finance

**Department:** Education

Person Testifying: Kathryn S. Matayoshi, Superintendent of Education

Title of Bill: SB 1221, SD2, HD1 RELATING TO HEALTH.

Purpose of Bill: Requires the Department of Education to consult with the Department of Health and the American Diabetes Association to develop and adopt rules for the training of school employees and qualified volunteers to provide care to students with diabetes. Appropriates funds. (SB1221 HD1)

### **Department's Position:**

The Department of Education (Department) appreciates the intent of SB 1221 SD2 HD1. However, we respectfully suggest that this measure is not necessary as related existing services are currently in place. Further, the Department has substantive concerns and asks that this measure be held in committee.

At this time, the Department very conservatively and cautiously estimates a basic budget of \$1,417,760 for one school year 2015-16 to address adequate resources and staff, programming, training of employees and volunteers, investigations, data accountability, notices, and reporting requirements. However, the department continues to analyze this measure as there are many additional student-related scenarios and variables that may considerably increase the budgetary needs to implement this measure, including but not limited to students with diabetes actively participating in sports, community service activities, extended neighbor island, out of state or out of country school travel, proms, after school plus (A+)program.

SB 1221 SD2 HD1 will impose a substantial workload increase on school operations. Further, a range of concerns will continue to have a potential cost impact as related to possible collective bargaining issues, need to renegotiate vendor contracts, and

DAVID Y. IGE GOVERNOR negative legal ramifications by mandating various provisions, including but not limited to:

•The minimum number of three school personnel requiring training for at least one student and the specified distribution of a written notice if fewer than three school employees are available. Page 6, Section 2, §302A-B (b), lines 8-15, "Each school that has at least one student with diabetes enrolled shall provide the training required under subsection (a) to a minimum of three school employees. If at any time fewer than three school employees are available to be trained at the school, the principal or other school administrator shall distribute a written notice to all staff stating that it is seeking employees to serve as diabetes care personnel."

•The specified times a school shall hold the training before each school year starts and following a student's enrollment or diagnosis. Page 7, Section 2, §302A-B (d), lines 9-18, "The nurse or a health care professional with expertise in diabetes care shall coordinate the training outlined under subsection (a). If there is any student with diabetes enrolled at the school before the start of the school year, the school shall hold the training before each school year starts. If a student with diabetes enrolls in the school or is diagnosed with diabetes after the school year has started and the school has not held the diabetes care training before the start of the school year, the training shall be held no more than thirty days following the student's enrollment or diagnosis."

•The responsibility placed on the Department and schools to provide training for all school employees, including bus drivers. Page 7, Section 2, §302A-B (e), lines 19-21, page 7, Section 2, §302A-B (e), lines 1-3, "Each school shall provide training for all school employees responsible for the supervision of any student with diabetes, including bus drivers who transport students with diabetes, regarding the recognition of hypoglycemia and hyperglycemia and the appropriate action to take in an emergency situation." (Note: Bus drivers are not DOE employees.)

•The nurse or trained diabetes care personnel required to be present at each school during and after regular school hours. Page 9, Section 2, §302A-D (c), lines 12-17, "A nurse or trained diabetes care personnel shall be at each school that has enrolled a student with diabetes during regular school hours, after-school care programs, field trips, extended off-site excursions, extracurricular activities, and on buses when the bus driver has not completed the necessary training required under section 302A-B."

Should it be necessary for the Finance Committee to address the financial implications of this measure, we would ask for your favorable support as the Department would not have the means to implement this measure within our budget, and that SB 1221 SD2 HD1 not replace or adversely impact priorities indicated in our Executive Budget.

The Department has worked together with the DOH and the American Diabetes Association in improving systems and communication between all parties regarding the care and support of students with diabetes. Additionally, the Department has an established protocol for supporting students, as detailed in the attached Model Flow Chart for Diabetes Care developed in partnership with the Department of Health and American Diabetes Association, which addresses many of the provisions included in SB 1221 SD2 HD1.

Lastly, a 504 Plan may be created to provide accommodations to meet a student's needs. It also provides the non-discrimination protections of Section 504 to address administrative complaints. Hawaii Administrative Rule Chapter 61 ensures the Department's implementation of Section 504. Depending on the level of care needed a request for Skilled Nursing services may also be made.

Thank you for the opportunity to provide testimony on SB 1221 SD2 HD1.



### DIABETES CARE MODEL FLOW CHART FOR STUDENTS WITH DIABETES IN HAWAII PUBLIC SCHOOLS



The Model Flow Chart for Diabetes Care is intended for parents/legal guardians to understand the processes, forms, and stakeholders involved in providing supports for students with diabetes. The goals of the supports are to enable the student with diabetes to successfully and safely self-manage diabetes during school and school related activities in order to maximize their learning, and to achieve a successful transition into college, career, and citizenship.



Attachment to DOE testimony for SB 1221, SD2, HD1 on 4/2/2015

#### ROLES AND RESPONSIBILITIES

#### PARENT/LEGAL GUARDIAN:

- Express concern by completing Form 101; discuss concerns with Student Services Coordinator (SSC) or the School Health Aide (SHA).
- Request and complete all forms and return to Public Health Nurse (PHN).
- Collaborate with the PHN to develop an Individualized School Diabetes Plan (ISDP) and an Emergency Action Plan (EAP).
- Request 504 Plan.
- Provide and maintain all supplies/equipment needed for diabetes care in the school.
- Provide snacks, an emergency kit, etc. to assist with treating a hypoglycemia.
- Communicate with school, public health nurse with any updates or changes that need to be made to the ISDP and/or 504.

#### PUBLIC HEALTH NURSE

- Complete Nursing Assessment and Recommendations.
- Communicate with parents, school, and primary care physician to develop an ISDP, EAP, and 504 Plan.
- Assist in the training for volunteer school personnel in diabetes care.
- Monitor student's diabetes status in schools and discuss concerns with parent or legal guardian and physician.
- Support and advocate for student and parents

#### SCHOOL

- Provide all forms applicable and requested to Parent/Legal Guardian.
- Provide accommodations to support the student with diabetes as indicated by the ISDP, EAP, and 504 Plan.
- Communicate special events (birthdays, field trips, etc.), with parents/legal guardians to ensure that adjustments may be made for the student if necessary. These events should also be noted in the ISDP.
- Have appropriate volunteer school personnel trained in diabetes care, and/or provide contract nursing services as needed.

#### STUDENT

- Establish goals to Self-Management and steps to be able achieve such goals.
- Inform appropriate person(s) regarding needs, feelings, concerns, etc.

#### GLOSSARY

504 Team: A group of persons knowledgeable about the student, the meaning of the evaluation data, and the placement options including teachers, counselors, the principal or designee, the parent of the student, and may also include others such as the health aide, custodian, cafeteria manager, who might be involved in the evaluation or 504 plan.

IEP: Individualized Education Program: A written statement for each child with a disability that is developed, reviewed, and revised in a meeting in accordance with federal regulations.

IEP Team: A group of persons that include parents, teachers, and Dept. of Education representatives who work to complete an individualized education program (IEP) for a student with a disability found eligible under IDEA/Chapter 60.

IDEA: Individuals with Disabilities Education Act: Federal law that governs how states and public agencies provide early intervention, special education, and related services to children with disabilities.

ISDP: Individual Student Diabetes Plan: Plan developed and signed by the student's personal health care team and parent/guardian with the specific needs of an individual student in mind. It should detail all the elements of care and assistance for that student.

Section 504 Plan: Provides the provision of accommodations and related services based on the needs of the individual student in the general education setting. The 504 Plan affords equal educational opportunity and ensures that the qualified student with a disability receives an education comparable to that of his/her non-disabled peers.

SHA: Student Health Aide: School level staff member who provides emergency first aide care to ill and injured students, maintains the health room, and is responsible for health room documentation and student health records.

SFT: Student-Focused Team: Group composed of various school personnel, parents, and other service providers that meet to determine the need for evaluation and eligibility of Section 504 and/or IDEA.

SSC: Student Services Coordinator: The school level staff member who does the intake of all Form 101 (Request for Evaluation) and coordinates Student-Focused Team meetings.