DAVID 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 Relating to Health
DATE:	Wednesday, March 18, 2015
TIME:	8:45 a.m.
COMMITTEE(S):	House Committee on Health
ROOM:	Conference Room 329
FROM:	Tom Hutton, Executive Director State Public Charter School Commission

Chair Au Belatti, Vice Chair Creagan, and members of the Committee:

The State Public Charter School Commission ("Commission") appreciates the opportunity to submit these written comments on Senate Bill 1221 SD2, "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:

- The requirement that trained personnel accompany the student at all times, including when on the bus, may prove operationally challenging for public schools, especially public charter schools. Depending on the child's particular circumstances, this may also be unnecessary.
- Each public school—especially each public charter school—may find it challenging on its own to provide annual training by a nurse or a health care professional, as the bill currently requires. We appreciate the addition of appropriations to the Senate Draft 2 of this measure to effectuate its purposes, and we would hope that these appropriations would include the funding necessary to provide any mandated training of public schools employees.

- 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 revising 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 all of the provisions of the proposed bill. We note that the bill already provides for an impartial administrative hearing before the Department of Education.

Thank you for your consideration of these comments.



TESTIMONY OF THE DEPARTMENT OF THE ATTORNEY GENERAL TWENTY-EIGHTH LEGISLATURE, 2015

a.m.

ON THE FOLLOWING MEASURE: S.B. NO. 1221, S.D. 2, RELATING TO HEALTH.

BEFORE THE: HOUSE COMMITTEE ON HEALTH

DATE:	Wednesday, March 18, 2015	TIME:	8:45
LOCATION:	State Capitol, Room 329		
TESTIFIER(S):	Douglas S. Chin, Attorney General, or, Melissa J. Kolonie, Deputy Attorney Ge	neral	

Chair Bellati and Members of the Committee:

The Department of the Attorney General offers the following comments.

This bill appears to contain an error. Based on the context of the provision on page 10,

lines 8-12, we believe that the reference to "intentional conduct" on lines 8-9 should read "intentional misconduct."

Subsection (f) of section 302A-D, on page 10, lines 8-12, purports to establish a liability exception for those who act in good faith other than in cases of gross negligence and intentional conduct. It reads:

Except in cases of gross negligence or intentional conduct, schools, nurses, trained diabetes care personnel, and any other person acting in good faith and in accordance with the provisions established under this part shall not be subject to civil liability or to discipline for unprofessional conduct.

If the phrase "intentional conduct" is retained, the provision has the effect of not exempting any conduct.

If it is the intention of the Legislature to establish a liability exception for those who act in good faith other than in cases of gross negligence and intentional misconduct, we recommend amending the bill accordingly.

Thank you for the opportunity to provide comments.

KATHRYN S. MATAYOSHI SUPERINTENDENT



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

> Date: 03/18/2015 Time: 08:45 AM Location: 329 Committee: House Health

Department:	Education
Person Testifying:	Kathryn S. Matayoshi, Superintendent of Education
Title of Bill:	SB 1221, SD2 RELATING TO HEALTH.
Purpose of Bill:	Requires the department of education to provide care to students with diabetes pursuant to a student's diabetes medical management plan. Makes an appropriation to DOE and DOH. Effective 7/1/2050. (SD2)

Department's Position:

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

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 provides for many of the provisions included in SB 1221 SD2.

Furthermore, a 504 Plan may be created to provide accommodations to meet the 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.

However, should the measure pass in its current form, there are financial considerations the Department must take into account. Thus, the Department is assessing the estimated budgetary needs to address adequate resources and staff. A cost-impact analysis is also being considered related to the programming, training of employees and volunteers, investigations, data accountability, notices, and reporting requirements.

SB 1221 SD2 will impose a substantial workload increase on school operations. As such, the Department respectfully submits a request for an appropriation to carry out the provisions of the bill. The range of the concerns have a potential cost impact related to possible collective bargaining issues, need to renegotiate vendor contracts, and 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 4-11, "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 5-14, '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 15-20, "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 9-14, "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 not replace or adversely impact priorities indicated in our Executive Budget.

Further, 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.

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

PDF

Attachment to DOE testimony for SB1221 SB2 03182015.pdf

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 SB1221 SD2 03182015

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American Academy of Pediatrics



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Hawaii Chapter

March 17, 2015

AAP - Hawaii Chapter 5414 Kirkwood Place Honolulu, HI 96821

Hawaii Chapter Board

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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

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

Thank you for this opportunity to testify in strong support of SB1221 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 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 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 SD2 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 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 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,

R. Michael Hamilton, MD, FAAP President



The Honorable Della Au Belatti, Chair House Committee on Health Hawaii State Capitol

RE: Testimony In Support of SB1221 SD2

Dear Representative Belatti 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 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 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



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

TESTIMONY BEFORE THE SENATE COMMITTEE ON EDUCATION

DATE: WEDNESDAY, MARCH 18, 2015

RE: S.B. 1221, SD2 - RELATING TO HEALTH

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

The Honorable Chair Kidani, Vice Chair Harimoto 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 <u>supports the intent of SB1221, SD2</u> 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</u>.

From:	Robyn Mizuno <rmizuno@diabetes.org></rmizuno@diabetes.org>
Sent:	Monday, March 16, 2015 5:15 PM
To:	HLTtestimony
Subject:	Keiki with Diabetes Matter - Pass SB1221 SD2!

The Honorable Della Au Belatti, Chair House Committee on Health Hawaii State Capitol

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

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** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2** 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** 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 children to feel like they "fit in" with their peers. Imagine how difficult it must be on children who are diagnosed with the 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)



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From:	Ellie Ventula-Honda < EVentulaHonda@diabetes.org>
Sent:	Monday, March 16, 2015 6:02 PM
To:	HLTtestimony
Subject:	Keiki with Diabetes Matter - Pass SB1221 SD2

The Honorable Della Au Belatti, Chair House Committee on Health Hawaii State Capitol

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

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** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2** will:

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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,

yours truly,

Ellie Ventula-Honda Manager, Programs American Diabetes Association Pioneer Plaza 900 Fort Street Mall, Suite 940 Honolulu, Hawaii 96813 Email: eventulahonda@diabetes.org Office Phone: 808.947.5979 ext: 7044 Cellular 808.497.9052 Fax: 808.546.7502



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For Volunteer Information Exchange: facebook.com/AmDiabetesVols

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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

March 17, 2015

The Honorable Della Au Bellati, Chair The Honorable Richard Creagan, Vice Chair House Committee on Health Hawaii State Capitol Honolulu, Hawaii 96813

Dear Representative Belatti, Vice Chair Creagan, and Members of the House Committee on Health:

RE: SB 1221 SD 2 Please note additional reference on page 2 to SB 846 In Strong Support of SB 1221 SD 2 with proposed amendments

Dear Chair Bellati, Vice Chair Kreagan,, and members of the Senate Committee on Health,

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 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</u> <u>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 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 would address these additional critical needs of students with diabetes:

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

* 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. This is a huge issue!)

Finally, while 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 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, together with these very important amendmentsall 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

Examples of situations and attempts made to resolve the issues over 20 to 30 years:

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 to 30 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 SB 1221, SD 2 (and the proposed amendments noted above) 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 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 testified before the House Committee on Health in 2013- that that our concerns are clearly addressed in DOE policy. This is simply NOT SO, yet the same arguments have been included in DOE testimony this year. Our concerns... and the concerns of these children and their families continue to be serious and unresolved!

creagan3 - Karina

From:
Sent:
To:
Subject:

DRIG (Dori Gabriel) <drig@novonordisk.com> Tuesday, March 17, 2015 4:08 PM HLTtestimony SB1221 SD2

The Honorable Della Au Belatti, Chair House Committee on Health Hawaii State Capitol

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

I am a fellow Maryknoll Alum who is passionate about diabetes, especially when it affects Hawaii's Keiki. I urge your support!

Diabetes is one of the most common chronic-diseases in children and must be managed 24 hours a day, 7 days a week. Diabetes d oes 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** to end discrimination and miscommunication in our schools and protect the health, safety, and education of child ren in Hawaii who have diabetes. **SB1221 SD2** will:

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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 strongly believe **SB1221 SD2** 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 legislati on 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,

Dori Gabriel (808) 285-1521 drig@novonordisk.com

Dori Gabriel Novo Nordisk Inc. 100 College Road West Princeton, New Jersey 08540 USA +1 609-987-5800 (phone) 808-285-1521 (mobile) DRIG@novonordisk.com This e-mail (including any attachments) is intended for the addressee(s) stated above only and may contain confidential information protected by law. You are hereby notified that any unauthorized reading, disclosure, copying or distribution of this e-mail or use of information contained herein is strictly prohibited and may violate rights to proprietary information. If you are not an intended recipient, please return this e-mail to the sender and delete it immediately hereafter. Thank you.

From:	Faith Rex < FRex@smshawaii.com >
Sent:	Monday, March 16, 2015 5:39 PM
To:	HLTtestimony
Subject:	Please support SB1221 SD2! Our Keiki need your help!

The Honorable Della Au Belatti, Chair

House Committee on Health

Hawaii State Capitol

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

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** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2** 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** 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>.

A hui hou, Faith

Faith Sereno Rex President, SMS Consulting LLC

SMS® Consulting, LLC Intelligence Based Strategies. Superior Outcomes See what's new... www.smshawaii.com 1042 Fort Street Mall, Suite 200 Honolulu, HI 96813 Direct Ph: (808) 440-0702 Fax: (808) 537-2686 E-mail: frex@smshawaii.com This message contains information that I

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From:	Frank Genadio < genadiof001@hawaii.rr.com>
Sent:	Tuesday, March 17, 2015 11:36 PM
To:	HLTtestimony
Subject:	Keiki with Diabetes Matter - Pass SB1221 SD2

The Honorable Della Au Belatti, Chair House Committee on Health Hawaii State Capitol

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

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** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2** 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 detailed in **SB1221 SD2** 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 pr oviders 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

creagan3 - Karina

From:	LCOK (Laura Coker) < lcok@novonordisk.com>
Sent:	Tuesday, March 17, 2015 8:44 PM
То:	HLTtestimony
Subject:	Keiki with Diabetes Matter - Pass SB1221 SD2!

The Honorable Della Au Belatti, Chair House Committee on Health Hawaii State Capitol

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

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** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2** 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** 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,

Laura Coker 808-284-0604 Icok@novonordisk.com

Laura Coker Executive Diabetes Care Specialist Sales

Novo Nordisk Inc. 800 Scudders Mill Road Plainsboro, NJ 08536 USA 808-284-0604 (direct) 808-284-0604 (mobile) LCOK@novonordisk.com

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TESTIMONY OF ROBERT TOYOFUKU ON BEHALF OF THE HAWAII ASSOCIATION FOR JUSTICE (HAJ) IN OPPOSITION IN PART TO S.B. NO. 1221, SD 2

Wednesday, March 18, 2015 8:45 am

To: Chairperson Della Au Belatti and Members of the House Committee on Health:

My name is Bob Toyofuku and I am presenting this testimony on behalf of the Hawaii Association for Justice (HAJ) in opposition in part to S.B. No. 1221, SD 2.

HAJ is not opposed to the concept of developing a program for diabetes management to provide diabetes training and education in the public schools.

HAJ, however, does **oppose** the immunity provision in subsection (f) on page 10, lines 8-12 of this bill. HAJ's opinion is that this is not good public policy to provide immunity from taking responsibility in every instance where there seems to be resistance to provide for some action or service by an individual, organization or entity.

HAJ requests that the committee insert the type of provision that is part of Hawaii Revised Statutes, Section 302A-1164 regarding "Self-administration of medication of student and emergency administration permitted". That section reads basically as follows: (h) Any person, except for a qualified health care professional providing the training required in subsection (g), who acts in accordance with the requirements of this section shall be immune from civil or criminal liability arising from these acts, except where the person's conduct would constitute gross negligence, willful and wanton misconduct, or intentional misconduct."

Thereby section (f) would read:

(f) Except for a qualified health care professional providing the training required in subsection (e), schools, nurses, trained diabetes care personnel, and any

other person acting in good faith and in accordance with the provisions established under this part shall not be subject to civil liability or to discipline for unprofessional conduct, except where the person's conduct would constitute gross negligence, willful and wanton misconduct, or intentional misconduct."

There are two basic underlying reasons of tort law in the American legal system. One is to compensate a person for his or her injuries as a result of another and the other is to serve as a deterrent to prevent negligent or irresponsible behavior. When a person or an entity realizes that they may be held liable, there is a strong incentive to prevent the occurrence of harm. One reason for imposing liability is the deliberate purpose of providing that incentive. Said another way, tort law encourages responsible behavior.

Thank you for the opportunity to testify and listening to our concerns and comments.



75TH ANNIVERSARY ESTABLISHED 1940

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Viola Genadio, RN, APRN, CDE, BC-ADM

Diabetes Education and Support Consulting Services

National Education Recognition Program Committee National Women and Diabetes Subcommittee Executive Committee

nv. Inc.

terventional Services

March 17, 2015

The Honorable Della Au Belatti, Chair House Committee on Health Hawaii State Capitol, Room 329 Honolulu, Hawaii 96813

Dear: Chair Bellati and Vice Chair Creagan,

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 SB1221 SD2 to ensure the care, safety, and education of approximately 1,000 students with prediabetes and diabetes in Hawaii.

Favorable support of SB1221 SD2 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 American's with Disabilities 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 SB1221 SD2 to ensure that students with diabetes are safe at school and able to succeed at school academically.

- We have identified gaps in diabetes care provided by Hawaii schools, and we are concerned about the unfair treatment and inconsistent information shared with many families and the inadequate care of the children due to untrained staff.
- 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.
- Furthermore SB1221 SD2 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 and the 504 process.
- SB1221 SD2, 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 SB1221 SD2, is medically safe and necessary to ensure students with diabetes receive the appropriate care. I would greatly appreciate your deep consideration and urge you to support this very important lifesaving passage.

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

Sincerely.

whe Om 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

STOP DIABETES

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

From:	mailinglist@capitol.hawaii.gov
Sent:	Friday, March 13, 2015 7:29 PM
То:	HLTtestimony
Cc:	joyamarshall0416@gmail.com
Subject:	*Submitted testimony for SB1221 on Mar 18, 2015 08:45AM*

<u>SB1221</u>

Submitted on: 3/13/2015 Testimony for HLT on Mar 18, 2015 08:45AM in Conference Room 329

Submitted By	Organization	Testifier Position	Present at Hearing
Joy Marshall	Individual	Support	No

Comments:

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

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From:	Will H <wili_wili@yahoo.com></wili_wili@yahoo.com>
Sent:	Tuesday, March 17, 2015 9:52 AM
То:	HLTtestimony
Subject:	Keiki with Diabetes Matter - Pass SB1221 SD2!

The Honorable Della Au Belatti, Chair House Committee on Health Hawaii State Capitol

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

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 to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. SB1221 SD2 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 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,

William Haines 808 265 7561 wili wili@yahoo.com

From:	Tabitha Carreira-Halliwell <tcarreir@my.hpu.edu></tcarreir@my.hpu.edu>
Sent:	Tuesday, March 17, 2015 12:30 PM
To:	HLTtestimony
Subject:	Keiki with Diabetes Matter - Pass SB1221 SD2!

The Honorable Della Au Belatti, Chair

House Committee on Health

Hawaii State Capitol

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

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** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2** 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 who was diagnosed with diabetes at age 9, I strongly believe **SB1221 SD2** is medically safe and necessary to ensure students with diabetes receive the appropriate care and a re 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,

Tabitha Carreira Ph: <u>808-799-9854</u> Email: <u>tcarreir@my.hpu.edu</u>

From:	Selena Ching <sching@hanahauoli.org></sching@hanahauoli.org>
Sent:	Tuesday, March 17, 2015 12:19 PM
To:	HLTtestimony
Subject:	Please help our kids with diabetes - Pass SB1221 SD2!

The Honorable Della Au Belatti, Chair House Committee on Health Hawaii State Capitol

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

Please support the passage of **SB1221** SD2 to end discrimination in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **HB10 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 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 nurs e 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, no 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 up 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

creagan3 - Karina

From: Sent: To: Subject: Alexandra <alexandra.shibata@gmail.com> Tuesday, March 17, 2015 5:03 PM HLTtestimony Keiki with Diabetes Matter - Pass SB1221 SD2!

The Honorable Della Au Belatti, Chair House Committee on Health Hawaii State Capitol

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

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. My dear friend's son has type 1 diabetes and has to constantly manage his sugar levels. I would like to know that when he goes to first grade, there will be someone trained to help him monitor his diabetes and administer insulin when he needs it.

With that, I write to ask for your full support of **SB1221 SD2** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2** 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

 \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 strongly believe **SB1221 SD2** 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, Alexandra Shibata (808) 454-2979 <u>alexandra.shibata@gmail.com</u>

From:	Kaufman, Andrew <kaufmana@ctahr.hawaii.edu></kaufmana@ctahr.hawaii.edu>
Sent:	Monday, March 16, 2015 10:51 PM
To:	HLTtestimony
Subject:	Keiki with Diabetes Matter - Pass SB1221 SD2

The Honorable Della Au Belatti, Chair

House Committee on Health

Hawaii State Capitol

Aloha Representative Belatti and Members of the House Committee on Health:

I am writing to you on behalf of my 5 year old son Nicholas who has Type 1 Diabetes. Not many people relaize that 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 w hen a child goes to school, or attend school-related activities. With that, I write to ask for your full support of **SB1221 SD2** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2** 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** 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

<mark>349-2277</mark>

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/

From:	Brian "Hawaiian" <bamoriki@aol.com></bamoriki@aol.com>
Sent:	Monday, March 16, 2015 9:56 PM
To:	HLTtestimony
Subject:	Keiki with Diabetes Matter - Pass SB1221 SD2!

S The Honorable Della Au Belatti, Chair House Committee on Health Hawaii State Capitol

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

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** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2** 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** 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.

Being a Type 2 diabetic and having a family history of the disease, this is deeply personal to me...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,

Brian A. Moriki 808-239-8545 bamoriki@aol.com

From:	Christina Racoma <chrissyr009@yahoo.com></chrissyr009@yahoo.com>
Sent:	Monday, March 16, 2015 6:04 PM
To:	HLTtestimony
Subject:	MY 2 Keiki with Diabetes Matter - Pass SB1221 SD2!

The Honorable Della Au Belatti, Chair House Committee on Health Hawaii State Capitol

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

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 to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. SB1221 SD2 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, the mother of two children with Type 1 Diabetes, would greatly appreciate your support in the passage of SB1221 SD2. It will provide my children an opportunity to attend their school, Mililani Uka Elementary, with a safe environment that helps manage their diabetes. When a child receives a diagnosis of diabetes, so does the entire family. Many people don't think much a bout diabetes, but it is life changing with life ending consequences if not managed well. Unfortunately, my both of son, ages 4 and almost 2 years old, have already seen their fair share of the emergency room. But their bravery and resilience showed me just how strong these keiki really are, and how such a horrible disease can turn something so negative into such a positive. With tears still on their cheeks, they manage to smile and laugh and pretend they are robots with their "robot arms" (IV's to hydrate high sugars). Their aloha spirit shows me that even keiki have to weather the storm to see the rainbow afterwords. I see it as a metaphor for this exact bill process. For many years, keiki have been discriminated against in our public school system, but they've weathered the storm long enough. It's time for all of you to help bring out the rainbow and be the reason for our keiki to smile. On behalf of my two diabetic children and all the diabetic keiki of Hawaii, I humbly urge you to support the passage of SB1221 SD2.

I strongly believe SB1221 SD2 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 at (808) 371-9007. The ADA Hawaii Office is also available at (808) 947-5979, or via email at <u>ADAHawaii@diabetes.org</u>.

Mahalo nui loa,

Christina N. DeRamos

(808) 371-9007 chrissyr009@yahoo.com

From:	Dr. Laurie Tom <laurietom@pueo.net></laurietom@pueo.net>
Sent:	Tuesday, March 17, 2015 10:06 AM
То:	HLTtestimony
Cc:	LDuenas@diabetes.org;
Subject:	Keiki with Diabetes need to be kept safe in schools! Please pass SB1221 SD2!

The Honorable Della Au Belatti, Chair House Committee on Health Hawaii State Capitol

Aloha Chair Belatti and Members of the House Committee on Health:

Thank you for allowing me to submit testimony again on behalf our our keiki in Hawaii with diabetes. My name is Laurie Tom, and I am an endocrinologist and diabetes specialist in private practice at Queen's POB I. I have also been a volunteer for the American Diabetes Association (ADA) for over twenty years.

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** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2** 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

ADA volunteer advocates across the country have been working tirelessly over the years to fight for and protect the rights of people with diabetes. Legislation similar to this has already been passed in numerous states across the country. When you talk to people in the community, they are surprised that these seemingly common sense rights are not yet guarenteed for our keiki in Hawaii.

I strongly believe **SB1221 SD2** 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 me at 808-528-4010 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 Tom, M.D. Past President, ADA Hawaii Pioneer Plaza, 900 Fort Street Mall, Suite 940, Honolulu, Hawaii 96813 Office: 808.947.5979 Fax: 546-7502



From:Hano Nguyen <hanogrc@gmail.com>Sent:Tuesday, March 17, 2015 10:54 AMTo:HLTtestimonySubject:Keiki with Diabetes Matter - Pass SB1221 SD2

The Honorable Della Au Belatti, Chair

House Committee on Health

Hawaii State Capitol

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

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, Hao Nguyen, am writing to ask for your full support of **SB1221 SD2** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes.

SB1221 SD2 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;

- 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** 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,

Hao Nguyen, Ph.D

808-851-7010

hano@hawaii.edu

TESTIMONY IN SUPPORT OF SB1221 SD2

The Honorable Della Au Belatti, Chair House Committee on Health Hawaii State Capitol

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

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 to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. SB1221 SD2 will:

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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 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.

Mahalonat Tris Okawa

694-4157 Iris.okawa@boh.com

From: Sent: To: Subject: Leyla V Kaufman <leyla@hawaii.edu> Tuesday, March 17, 2015 12:44 PM HLTtestimony Keiki with diabetes matter- Pass SB 1221 SD2!

The Honorable Della Au Belatti, Chair House Committee on Health Hawaii State Capitol

Dear Representative Belatti and Members of the House Committee on Health

The Honorable Michelle N. Kidani, Chair

Senate Committee on Education

Hawaii State Capitol

Dear Senator Kidani and Members of the Senate Committee on Education:

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** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2** will:

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 \cdot 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:

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I strongly believe **SB1221 SD2** 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:	Paz,Lokelani Jamie-FICOH <jamie.paz@ficoh.com></jamie.paz@ficoh.com>
Sent:	Tuesday, March 17, 2015 7:39 AM
To:	HLTtestimony
Subject:	Keiki with Diabetes Matter - Pass SB1221 SD2!
Importance:	Hiah

The Honorable Della Au Belatti, Chair House Committee on Health Hawaii State Capitol

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

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** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2** will:

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- Individuals with Disabilities Education Act

I strongly believe **SB1221 SD2** 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. Without this bill, my child will continue to feel unsafe throughout the day feeling like there is no one there who takes her disease seriously. No one knows how dangerous this disease can be until they actually experience daily li ving with a child who is type 1 diabetic and knows what side effects can occur should it not be monitored correctly.

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 email me.

Mahalo nui loa,

Jamie Lokelani Paz Pazohana05@yahoo.com

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From:	Mark G Wright <markwrig@hawaii.edu></markwrig@hawaii.edu>
Sent:	Tuesday, March 17, 2015 7:30 AM
To:	HLTtestimony
Subject:	Keiki with Diabetes Matter - Pass SB1221 SD2

The Honorable Della Au Belatti, Chair House Committee on Health Hawaii State Capitol

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

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** to end discrimination and miscommunication in our schools and protect the health, safety, and education of children in Hawaii who have diabetes. **SB1221 SD2** will:

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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,

Mark Wright 808-271-2037 markgwright@me.com