JOSH GREEN, M.D. GOVERNOR OF HAWAI'I KE KIA'ÄINA O KA MOKU'ÄINA 'O HAWAI'I



DEPARTMENT OF HEALTH KA 'OIHANA OLAKINO

P.O. Box 3378 Honolulu, HI 96801-3378 doh.testimony@doh.hawaii.gov KENNETH S. FINK, MD, MGA, MPH DIRECTOR OF HEALTH KA LUNA HO'OKELE

WRITTEN TESTIMONY ONLY

Testimony COMMENTING on H.B. 1448, H.D. 1 RELATING TO ASTHMA

REPRESENTATIVE DELLA AU BELATTI, CHAIR HOUSE COMMITTEE ON HEALTH & HOMELESSNESS

Hearing Date: February 15, 2023

Room Number: Conference Room 329 & Videoconference

Fiscal Implications: The Department of Health (DOH) defers to the Department of Education
 (DOE) on potential fiscal implications of the proposed protocols for schools.

3 **Department Testimony:** The DOH offers comments on House Bill 1448, House Draft 1 (H.B.

4 1448, H.D. 1), which authorizes the DOE to stock bronchodilators for emergency use during

5 respiratory distress; authorizes protocols for a school nurse or other authorized employees and

6 agents to volunteer to administer bronchodilators as needed for actual or perceived asthma

7 episodes; and clarifies that bronchodilators are permitted for student self-administration. The

8 DOH concurs that schools are where children spend most of their days, making them an

- 9 important setting for asthma management interventions.
- According to 2020 data from the Hawaii Behavioral Risk Factor Surveillance System,
 one in thirteen children in Hawaii currently have asthma.¹ Any child, whether or not they have a
 known asthma diagnosis, could experience an asthma exacerbation at school and require urgent
 medical attention.² Allowing schools to stock bronchodilators and train school employees in

¹ Hawaii State Department of Health, Hawaii Health Data Warehouse. Behavioral Risk Factor Surveillance System. (2020). http://hhdw.org. Accessed on February 1, 2023.

² Volerman A, Lowe AA, Pappalardo AA, Anderson CMC, Blake KV, Bryant-Stephens T, Carr T, Carter H, Cicutto L, Gerald JK, Miller T, Moore NS, Phan H, Sadreameli SC, Tanner A, Winders TA, Gerald LB. Ensuring Access to Albuterol in Schools: From Policy to Implementation. An Official ATS/AANMA/ALA/NASN Policy Statement. Am J Respir Crit Care Med. 2021 Sep 1;204(5):508-522. doi: 10.1164/rccm.202106-1550ST. PMID: 34499024; PMCID: PMC8491259.

- 1 proper administration is the recommended policy to improve access to quick-relief life-saving
- 2 medication for any child.
- H.B. 1448, H.D. 1 aligns with the Hawaii Asthma Plan 2030 objectives to expand asthma
 self-management education in schools.³
- 5 Thank you for the opportunity to testify.
- 6 Offered Amendments: None

³ State of Hawaii Department of Health. (2022). *Hawai'i Asthma Plan 2030*. Asthma – Chronic Disease Prevention & Health Promotion Division | Hawai'i Asthma Plan 2030. https://hhsp.hawaii.gov/assets/pdf/HHSP_Asthma_Plan_ WEB.pdf. Accessed on January 31, 2023.



TESTIMONY OF THE DEPARTMENT OF THE ATTORNEY GENERAL KA 'OIHANA O KA LOIO KUHINA THIRTY-SECOND LEGISLATURE, 2023

ON THE FOLLOWING MEASURE: H.B. NO. 1448, H.D. 1, RELATING TO ASTHMA.

BEFORE THE: HOUSE COMMITTEE ON HEALTH AND HOMELESSNESS

DATE:	Wednesday, February 15, 2023	TIME:	9:30 a.m.	
LOCATION: State Capitol, Room 329				
TESTIFIER(S): Anne E. Lopez, Attorney Gene Anne T. Horiuchi, Deputy Attor	•	eneral	

Chair Belatti and Members of the Committee:

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

The bill authorizes the Department of Education (DOE) to stock bronchodilators for emergency use during respiratory distress and authorizes DOE employees to volunteer to administer bronchodilators.

The Department recommends the following amendments:

- (1) "School nurse" is not a defined term in chapter 302A, Hawaii Revised Statutes (HRS). The term "school health aides," however, is already used in section 302A-853, HRS, regarding the administration of medication. We suggest replacing "school nurse[s]" or "nurse" with "school health aide[s]" on page 3, line 6; page 4, lines 10, 16, 18, and 19; page 6, line 14; and page 12, lines 6-7.
- (2) "School" is not a defined term for chapter 302A, HRS. See section 302A-101, HRS. To clarify that the new section in chapter 302A applies to department schools, we suggest inserting "department" before "school" on page 3, lines 4 and 8.
- (3) The training requirements in new section 302A-1164(h), on page 11, line 19, through page 12, line 8, do not align with the training requirements currently set forth in section 302A-1164(g), and that may cause confusion. Subsection (g) states that any employee or

agent who volunteers to administer insulin or glucagon in an emergency situation shall receive instruction in the proper administration of insulin, glucagon, auto-injectable epinephrine, or blood glucose monitoring by a "qualified health care professional," which is defined as a "licensed physician, physician assistant, advanced practice registered nurse or registered nurse, or certified diabetes educator." New subsection (h) states that an employee or agent who volunteers to administer a bronchodilator in an emergency situation shall receive instruction in the proper administration of bronchodilators and use of spacers by a "qualified health care professional," but then states that training shall be provided by a "school nurse, certified emergency responder, other health care professional, or appropriate online training." (Page 12, lines 6-8.)

We suggest revising page 12, lines 6-8 to state:

emergency responder. [Training shall be provided by a school nurse, certified emergency responder, other health care
professional, or appropriate online training.] <u>A "qualified</u>
health care professional" means a licensed physician,
physician assistant, advanced practice registered nurse or
registered nurse.

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

JOSH GREEN, M.D. GOVERNOR



KEITH T. HAYASHI SUPERINTENDENT

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

> Date: 02/15/2023 Time: 09:30 AM Location: 329 VIA VIDEOCONFERENCE Committee: House Health & Homelessness

Department:	Education
Person Testifying:	Keith T. Hayashi, Superintendent of Education
Title of Bill:	HB 1448, HD1 RELATING TO ASTHMA.
Purpose of Bill:	Authorizes the department of education to stock bronchodilators for emergency use during respiratory distress and authorize department employees to volunteer to administer bronchodilators Effective 6/30/3000. (HD1)

Department's Position:

The Hawaii State Department of Education (Department) offers comments on HB1448, HD1 to allow the Department to stock bronchodilators and spacers to be administered by a school nurse or other authorized Department employees and agents volunteering to administer to any student or individual as needed for actual or perceived asthma episodes.

The Department currently has systems in place to support students with chronic health conditions, such as asthma. Upon notification of a student with a chronic health condition, a team is formed with the student's parent or legal guardian, a Hawaii State Department of Health Public Health Nurse, and all appropriate school staff to develop an Emergency Action Plan individualized to the student's needs during the school day. The Emergency Action Plan is reviewed annually and as needed.

To ensure the safety and well-being of all students, every Department school has a School Health Assistant trained in first aid, cardiopulmonary resuscitation, and medication administration. Sections 302A-851 and 302A-853, Hawaii Revised Statutes (HRS), support the safe and effective administration of medication to students by School Health Assistants and the Nurse Practice Act allows and covers medication administration by School Health Assistants. Per Section 302A-1164, HRS, the Department allows for the self-administration of medication by a student for asthma, anaphylaxis, diabetes, or other potentially life-threatening illness.

Should the measure move forward, the Department respectfully requests the following revisions:

Page 4, Line 19: "Ensure that <u>the department's protocols</u> enable a school nurse or other authorized"

Page 6, Lines 12-15: "Emergency use of bronchodilators; provided that a school maymaintain a supply of bronchodilators to be administered by a school nurse or other authorized employees and agents for actual or perceived asthma episodes pursuant tosection 302A—."

Page 12, line 10: "<u>employees and agents, including the prescribing physician, physician</u> <u>assistant, or advanced practice registered nurse</u>,"

Passage of this bill would have a financial impact on the Department and may adversely impact priorities as indicated in the Hawaii State Board of Education approved budget. To acquire bronchodilators, devices, and device components; obtain and install medication storage equipment; deliver the required training; and provide administrative support for schools to implement this activity statewide would require initial and long term costs. Appropriation of \$176,000.00 annually would be necessary to carry out the purposes of this act.

Thank you for the opportunity to provide testimony on HB 1448, HD1.

UNIVERSITY OF HAWAI'I SYSTEM



'ŌNAEHANA KULANUI O HAWAI'I

Legislative Testimony Hōʻike Manaʻo I Mua O Ka ʻAhaʻōlelo

Testimony Presented Before the House Committee on Health & Homelessness Wednesday, February 15, 2023 at 9:30 a.m. By Lee Buenconsejo-Lum, Acting Dean John A. Burns School of Medicine Clementina D. Ceria-Ulep, PhD, RN, Interim Dean and Professor Nancy Atmospera-Walch School of Nursing And Michael Bruno, Provost University of Hawai'i at Mānoa

HB 1448 HD1 - RELATING TO ASTHMA

Chair Belatti, Vice Chair Takenouchi, and Members of the Committee:

Thank you for the opportunity to provide testimony in SUPPORT of HB 1448 HD1 which authorizes the Department of Education (DOE) to stock bronchodilators for emergency use during respiratory distress. The bill further authorizes DOE employees to volunteer to administer bronchodilators. We also offer a minor clarifying amendment which is provided at the end of this testimony.

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

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

Through the Hawai'i Keiki: Healthy and Ready to Learn program which was established within the Department of Education (DOE), school nurses at the Advanced Practice Registered Nurse (APRN) or Registered Nurse level are present in 51 schools. There are 171 school health technicians who have clinical education and who can support

telehealth services and extend the nursing reach are also available. The APRN can assess and diagnose health conditions and prescribe medications. Nurses have education and training in administering medications, including inhaled bronchodilators. School health technicians may be educated in medication administration as well.

In light of the role APRNs have with the DOE through the Hawai'i Keiki program and based on their prescriptive authority, we suggest a clarifying amendment to extend immunity to APRNs as well as physician assistants who also play an important role in prescribing necessary medication. Amending language in red font is provided below.

Page 12, line 9:

(i) Any person, <u>school district</u>, or <u>school and its employees and agents</u>, including the <u>prescribing physician</u>, <u>physician assistant</u>, or <u>advanced practice registered nurse and</u> <u>pharmacy filling the prescription</u>, except for a qualified health care professional providing the training required in [subsection (g),] <u>subsections (g) and (h)</u>, who acts in accordance with the requirements of this section shall be immune from any 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."

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



COMMITTEE ON HEALTH & HOMELESSNESS Rep. Della Au Belatti, Chair Rep. Jenna Takenouchi, Vice Chair

Wednesday, February 15, 2023 – 9:30AM Conference Room 329

Testimony in Support of House Bill 1448, House Draft 1 Relating to Asthma

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

The American Lung Association strongly supports House Bill 1449, HD1, relating to asthma. The bill would authorize the department of education to stock bronchodilators for emergency use during respiratory distress and authorize department employees to volunteer to administer bronchodilators.

Asthma is a serious public health concern in Hawai'i. In 2018, 10.2% of Hawai'i children were estimated to have asthma compared to 7.5% of children in the U.S. as a whole.¹ In Hawai'i, disparities in asthma prevalence are seen in race/ethnicity and region, with Native Hawaiians being disproportionately affected by asthma and experiencing the greatest burden. Native Hawaiians have the highest asthma prevalence at 28.3% compared to Caucasians (17.1%), Chinese (16.4%), Filipino (20.5%), Japanese (17.7%), or other races/ethnicities (19.8%).² Areas with high asthma prevalence include Hawai'i and Maui counties and the Nānākuli/Wai'anae sub-county areas on O'ahu. Asthma disparities can be further exacerbated by geographic isolation, lack of transportation to and from doctor's appointments, lower socioeconomic status, and limited access to healthcare specialists and subspecialists.

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

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

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

¹ CDC, Risk Youth Behavioral Survey, Hawaii, 2019

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



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

HB 1448 also provides important liability protection for the prescriber, the school and the person who administers the medication in good faith. As mentioned before the medication used for treatment of asthma attacks is safe and effective. In addition, as part of a research project in the Sunnyside Unified School District in Tucson, Arizona that evaluated a stock asthma inhaler project there, researchers found that school nurses were afraid that giving the medication could potentially expose them to liability, so it is imperative that the liability protections as outlined in the bill remain.

HB 1448 represents a simple and low-cost solution to a problem that could save both lives and money. In total, <u>15 states</u> have passed legislation or have administrative guidelines in place allowing schools to stock asthma medications. However, there are key provisions that should be included in this legislation to ensure it will be as effective as possible. These include:

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

The Lung Association thanks the Hawai'i Legislature for their continued commitment to the health and wellbeing of the residents of our state and the desire to protect Hawai'i's students. The Lung Association strongly supports HB 1448, House Draft 1, as drafted and encourages swift action to move the bill out of committee.

For further reading on this issue, attached are two articles which appeared in peer reviewed journals speaking to the efficacy and importance of stock albuterol in schools.

With gratitude,

Pedro Haro Executive Director American Lung Association in Hawai'i pedro.haro@lung.org



Hawaii Medical Association

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

COMMITTEE ON HEALTH & HOMELESSNESS Rep. Della Au Belatti, Chair Rep. Jenna Takenouchi, Vice Chair

Date: February 15, 2023 From: Hawaii Medical Association Beth England MD, Co-Chair, HMA Public Policy Committee

Re: HB 1448, HD1 RELATING TO ASTHMA. Position: Support

The purpose of this measure is to authorize the Hawaii Department of Education to stock bronchodilators for emergency use during respiratory distress and authorize department employees to volunteer to administer bronchodilators.

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

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

References and Quick Links:

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

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

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

2023 Hawaii Medical Association Officers

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February 13, 2023

To: Representative Della Au Belatti, Chair Representative Jenna Takenouchi, Vice Chair House Committee on Health & Homelessness

Re: Testimony in Support of HB1448, Related to Asthma

Hrg: 15 Feb 2023, 9:30AM, House Conference room 329 via Videoconference

The Hawai'i Public Health Association (HPHA) is a group of over 450 community members, public health professionals, and organizations statewide dedicated to improving public health. Our mission is to promote public health in Hawai'i through leadership, collaboration, education and advocacy. Additionally, HPHA aims to call attention to issues around social justice and equity in areas that extend beyond the traditional context of health (e.g., education, digital equity, cultural sensitivity), which can have profound impacts on health equity and well-being. Therefore, as stewards of public health, HPHA is also advocating for equity in all policies.

We strongly support HB1448, which will authorize the Department of Education to stock short-acting bronchodilators (rescue inhalers) for emergency use during an acute asthma attack and authorize department employees to volunteer to administer bronchodilators. Asthma impacts millions of lives and has a tremendous impact on our nation's healthcare system and economy. In the U.S., over 25 million Americans, including 5.1 million children have asthma.¹ In Hawaii, 21,411 children have asthma², which can be made worse due to our environmental factors, such as cockroaches, vog, and allergies.

Because asthma attacks can occur anytime and often without warning, children with asthma should always have access to medication that can quickly reverse the blockages in their lungs. This life-saving medication, called a short-acting bronchodilator, is easy to administer, inexpensive, and very safe. When children do not have asthma medication, which can occur for a variety of reasons such as forgetting it or not being able to afford it, schools have few options. A delay during the administration of bronchodilators usually results in an asthma attack worsening and, in such cases, the school must call 911.

These adverse events are largely avoidable with a simple low-cost solution: stock medication or inhalers. According to the American Lung Association, one study demonstrated that 84% of students returned to the classroom after an asthma event when provided a stock inhaler. Schools can use a single inhaler containing a short-acting bronchodilator along with inexpensive disposable spacers that can be used for anyone who experiences the sudden onset of cough, shortness-of-breath, and chest tightness that signals an asthma attack.

Additionally, it is critical as outlined in the proposed legislation that school staff other than school nurses are trained in the signs and symptoms of asthma and when it is appropriate to administer the rescue medications. Unfortunately, in Hawaii there is not a school nurse present in every school. Because of the safety of bronchodilators and the life-threatening implications of an asthma attack, it is vital that we train other staff to assess, access and administer the required medication that would potentially save a student's life.



HB1448 also provides important liability protection for the prescriber, the school and the person who administers the medication in good faith. As previously mentioned, the medication used for treatment of asthma attacks is safe and effective.

We strongly support HB 1448 and respectfully ask that you pass this measure to ensure that our keiki with asthma have access to life saving rescue inhalers and staff who is prepared to provide the required medication.

Thank you for the opportunity to provide testimony on this important public health issue affecting youth in our communities.

Respectfully submitted,

Holly Kessler Executive Director

CDC. 2019 National Health Interview Survey.
 CDC. 2019 Behavioral Risk Factor Surveillance System.

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

Hawai'i Children's Action Network

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

To: House Committee on Health & Homelessness

Re: HB 1448 - Relating to Asthma

Hawai'i State Capitol, Via Videoconference & Conference Room 329 February 15, 2023, 9:30 AM

Dear Chair Belatti, Vice Chair Amato, and committee members,

On behalf of HCAN Speaks!, I am writing **in SUPPORT of HB 1448, relating to asthma**. This bill authorizes the department of education to stock bronchodilators for emergency use during respiratory distress and authorizes department employees to volunteer to administer bronchodilators.

HCAN Speaks! Board of Directors

Liza Ryan Gill President

Nick Kacprowski, J.D. Treasurer

> Mandy Fernandes Secretary

Teri Keliipuleole Jasmine Slovak Erica Yamauchi According to the Centers for Disease Control and Prevention, in a classroom of 30 children, on average about 3 are likely to have asthma.¹ In Hawai'i, there are disparities in asthma prevalence: Native Hawaiians are disproportionately affected by asthma and experience the greatest burden, with the highest prevalence of 28.3%.²

Asthma attacks can strike at any time, including at school, and often without warning. These episodes may result in hospitalization, and can even be fatal. Quick-relief bronchodilators are a safe and effective treatment for asthma. Ensuring access to rescue medication is part of guidelines-based response to asthma emergencies.³

Best practices recommend that schools be allowed to stock this lifesaving medication and have trained adults ready to administer it in an emergency. Seventeen states have laws or policies allowing schools to stock quick-relief medications for students with asthma. Hawai'i should join them.⁴

Please pass this bill. It could save the lives of keiki with asthma.

Thank you,

Nicole Woo Director of Research and Economic Policy

¹ <u>https://www.cdc.gov/healthyschools/asthma/index.htm</u>

² <u>https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8296946/</u>

³ https://www.nhlbi.nih.gov/files/docs/resources/lung/NACI_ManagingAsthma-508%20FINAL.pdf

⁴ <u>https://www.lung.org/lung-health-diseases/lung-disease-lookup/asthma/health-professionals-</u>

educators/asthma-in-schools/asthma-medication-in-schools

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



HIPHI Board

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Titiimaea Ta'ase, JD State of Hawai'i, Deputy Public Defender

HIPHI Initiatives

Coalition for a Tobacco-Free Hawaiʻi

Community Health Worker Initiative

COVID-19 Response

Hawai'i Drug & Alcohol Free Coalitions

Hawai'i Farm to School Hui

Hawai'i Oral Health Coalition

Hawai'i Public Health Training Hui

Healthy Eating + Active Living

Kūpuna Collective

To: Representative Della Au Belatti, Chair Representative Jenna, Takenouchi Vice Chair Members of the House Committee on Health &Homelessness

Re: Support for HB 1448 HD1, Relating to Asthma

Hrg: Wednesday, February 15, 2023 Rm 329

Hawai'i Public Health Instituteⁱ (HIPHI) is in **support of HB 1448 HD1**, which allows schools in Hawaii to provide more immediate access to medications for students with asthma or who are suffering from respiratory distress.

Our youth suffer from asthma.

Date: February 14, 2023

Hawai'i Public Health Institute (HIPHI) appreciates the opportunity to provide SUPPORT for **HB 1448 HD1**. This measure will help to keep our children who suffer from asthma safe in schools and may prove potentially lifesaving.

Asthma impacts millions of lives and tremendously affects our nation's healthcare system and economy. In the US, over 25 million Americans, including 5.1 million children, have asthma.ⁱⁱ In Hawaii, 21,411 children have asthmaⁱⁱⁱ, which can be made worse due to our environmental factors, such as cockroaches, vog, and allergies.

An asthma episode can be brought on at any moment and can often quickly escalate. Short-acting bronchodilators, often referred to as "inhalers," are inexpensive, extremely safe, and most importantly, easy to use. This medication will save a person's life by quickly opening up the lungs' passages and enabling oxygen to flow freely.

There are many reasons that children do not always have access to an "inhaler". Sometimes kids forget it, leave it in a classroom or locker, or simply can't afford the medication. Once the attack begins, it can quickly escalate, and if the inhaler is inaccessible or can't be found, the child can go into respiratory distress. An ambulance must be called, which leads to expensive transport costs and an emergency department visit costing thousands more. Such events also take children out of the classroom for days at a time and further impede their learning. By stocking schools with low-cost bronchodilators and inexpensive disposable spacers, students can quickly receive lifesaving medication. At the first sign of an asthmatic episode, a trained school representative will be able to help administer this rescue medication.

All students should have rapid access to this medication. The medication is proven safe and effective. More importantly, it is a way to ensure that we keep all of our keiki safe and healthy.

Thank you for considering HB 1448 HD1, a measure that puts the health of our keiki first.

Mahalo,

Pezzy Minyua

Peggy Mierzwa Advocacy & Policy Director Hawaiʻi Public Health Institute

ⁱ Hawai'i Public Health Institute is a hub for building healthy communities, providing issue-based advocacy, education, and technical assistance through partnerships with government, academia, foundations, business, and community-based organizations..

[&]quot; CDC. 2019 National Health Interview Survey.

[&]quot; CDC. 2019 Behavioral Risk Factor Surveillance System.



То:	The Honorable Representative Della Au Belatti, Chair The Honorable Representative Jenna Takenouchi, Vice-Chair House Committee on Health & Homelessness
From:	Paula Arcena, External Affairs Vice President Mike Nguyen, Public Policy Manager
Hearing:	Wednesday, February 15, 2023 9:30 AM
RE:	HB1448, HD1 Relating to Asthma -Support

AlohaCare appreciates the opportunity to provide testimony in **support** of **HB1448**, **HD1**. This measure will authorize the Department of Education to stock bronchodilators for emergency use during respiratory distress and authorize department employees to volunteer to administer bronchodilators.

Founded in 1994 by Hawai`i's community health centers, AlohaCare is a community-rooted, non-profit health plan serving over 80,000 Medicaid and dual-eligible health plan members on all islands. Approximately half of our membership are keiki. We are Hawai`i's only health plan exclusively dedicated to serving Medicaid beneficiaries. Our mission is to serve individuals and communities in the true spirit of aloha by ensuring and advocating for access to quality health care for all. We believe that health is about supporting whole-person care.

Asthma impacts millions of lives and has a tremendous impact on our nation's healthcare system and economy. In the U.S., over 25 million Americans, including 5.1 million children have asthma.ⁱ In Hawaii, 21,411 children have asthmaⁱⁱ, which can be made worse due to our environmental factors, such as cockroaches, vog, and allergies.

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

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

Mahalo for this opportunity to testify in **support of HB1448, HD1.**

ⁱ CDC. 2019 National Health Interview Survey.

ⁱⁱ CDC. 2019 Behavioral Risk Factor Surveillance System.

COMMITTEE ON HEALTH & HOMELESSNESS Rep. Della Au Belatti, Chair Rep. Jenna Takenouchi, Vice Chair

Thursday, February 15, 2023 – 9:30 am Conference Room 329

Testimony in Support of House Bill 1448HD1 Relating to Asthma

Dear Chairperson Belatti, Vice Chair Takenouchi and Members of the Committee:

Thank you for the opportunity to provide comments on House Bill 1448, HD1 relating to asthma. I strongly supports this bill as it will allow schools in Hawaii to provide more immediate access to medications for students with asthma or suffering from respiratory distress. Asthma can be a deadly disease if flare-ups are not treated immediately. This bill has the potential to save lives and keep kids safe in schools.

I, my husband and both our children as well as several other relatives have had asthma all our lives and know first-hand how important it is for patients who are suffering from acute and severe shortness of breath to get the prompt and effective relief they need so they can continue to function and carry on with life. In Hawaii, 21,411 children have asthma¹, which can be made worse due to exercise as well as our environmental factors, such as cockroaches, VOG, and allergies.

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

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

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

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

House Bill 1448, HD1 also provides important liability protection for the prescriber, the school and the person who administers the medication in good faith. As mentioned before the medication used for treatment of asthma attacks is safe and effective. **Please pass HB1448, HD1 out of committee and help it become law in our state.**

Sincerely,

Valerie Chang, Honolulu parent starion06@yahoo.com

Testimony in Support of House Bill 1448, House Draft 1 Relating to Asthma

Chairpersons Belattie and Members of the Committees:

Thank you for the opportunity to provide comments on Senate Bill 1443 relating to asthma. I am a national expert in stock inhaler legislation and have helped many states around the country pass legislation and implement stock inhaler programs. I strongly support this bill as it will allow schools in Hawaii to provide immediate access to medications for students experiencing respiratory distress; furthermore, the bill can save lives and keep kids safe in schools.

In the U.S., over 25 million Americans, including 5.1 million children have asthma.¹ In Hawaii, 7.7% of children have asthma, which is higher than the national average.² Because asthma attacks can occur anytime and often without warning, children with asthma should always have access to medication that can quickly reverse the blockages in their lungs. This life-saving medication, called a short-acting bronchodilator, is easy to administer, inexpensive, and very safe.

Unfortunately, when children do not have asthma medication, schools have few options. A parent may not be immediately accessible or close enough to respond promptly. Even if they can, there is a delay during which the asthma attack often gets worse. In such cases, the school must call 911.

These adverse events are largely avoidable with a simple low-cost solution: stock medication or inhalers. Schools can use a single inhaler containing a short-acting bronchodilator along with inexpensive disposable spacers that can be used for anyone who experiences the sudden onset of cough, shortness-of-breath, and chest tightness that signals an asthma attack. Data from a program my team implemented in the state of Arizona indicates that after stock inhaler implementation in schools, 9-1-1 calls were reduced by 20% and EMS transfers were reduced by 40%.³ Furthermore, 84% of students who used the stock inhaler were able to return to class rather than be sent home or to the hospital.4

It is critical as outlined in the proposed legislation that school staff other than Keiki nurses are trained in the signs and symptoms of asthma and when it is appropriate to administer the stock inhaler. Unfortunately, in most states around the country, (including Hawaii) there is not a nurse present in every school. However, because of the safety of the medication used and the life-threatening implications of an asthma attack, it is imperative that other staff are trained to assess, access, and administer the medication that would potentially save a student's life. I recently chaired a workshop which led to a joint policy statement from The American Thoracic Society, Allergy and Asthma Network, American Lung Association, and the National Association of School Nurses.⁵ This policy statement outlines critical components of stock inhaler legislation and states that it is critical to the safety of children that non-licensed school personnel be trained to administer stock inhalers at school because most schools in the U.S. do not have a licensed nurse on campus every day.

Senate Bill 1443 also provides important liability protection for the prescriber, the school and the person who administers the medication in good faith. As mentioned before, the medication used for treatment of asthma attacks is safe and effective and should be used for anyone experiencing respiratory distress.

Sincerely,

Sm Breald

Lynn B. Gerald, PhD, MSPH Vice Chancellor for Population Health Sciences University of Illinois Chicago

¹ CDC. 2019 National Health Interview Survey.

² CDC. 2020 Behavioral Risk Factor Surveillance System.

³ Gerald et al. 2016. Implementation and Evaluation of a Stock Albuterol Program for Students with Asthma.

⁴ Lowe et al. 2021. Managing Respiratory Emergencies at School: A County-Wide Stock Inhaler Program.

⁵ Vollerman et al. 2021. Ensuring Access to Albuterol in Schools: From Policy to Implementation. An Official ATS/AANMA/ALA/NASN Statement.

TO:	House Committee on Health & Homelessness Representative Della Au Belatti, Chair Representative Jenna Takenouchi, Vice Chair	
DATE:	Wednesday, February 15, 2023	
TIME:	9:30 AM	
PLACE:	Via Videoconference	
	Conference Room 329	

TESTIMONY IN SUPPORT OF HB 1448 HD1, RELATING TO ASTHMA

Dear Chair Belatti, Vice Chair Takenouchi, and Members of the Committee,

My name is Cynthia J. Goto, and I am writing to express my support for House Bill 1448 HD1, relating to asthma. This bill will allow schools in Hawaii to provide more immediate access to medications for students with asthma or suffering from respiratory distress.

Asthma is one of the most common chronic childhood diseases in Hawaii. In Hawaii, 21,411 children have asthma¹, and this bill has the potential to save lives and keep kids safe at school.

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

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

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

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

Please support House Bill 1448 HD1 to ensure that our children with asthma have access to safe and effective medication which could potentially save a student's life.

Thank you for the opportunity to testify.

Cynthia J. Goto

¹ CDC. 2019 National Health Interview Survey.

H.B.1448 February 15, 2023

Committee on Health & Homelessness

Rep. Au Belatti, Chair Rep. Takenouchi, Vice Chair

Testimony in Support of H.B.1448, Relating to Asthma

I am Julian Lipsher, a member of the American Lung Association of Hawaii's Local Leadership Board, testifying as a private citizen in support of H.B.1448.

This bill would enable Hawaii schools the ability to provide more immediate access to medications for students with asthma, in medically threatening situations that potentially can escalate to where 911 emergency calls and hospitalization would be necessary.

Hawaii's asthma rates tend to be higher than national averages in both adults and children. According to data from the Centers for Disease Control and Prevention, there are approximately 30,000 or one in ten children that have been diagnosed with asthma in Hawaii. Conditions, both indoor and outdoor such as dust, mold, pets, cockroaches, VOG, vigorous exercise and a variety of allergies can trigger and worsen an asthma condition.

In that asthma attacks can occur at anytime and without warning, children with asthma need medications that can quickly reverse blockages in the lungs. Life saving medications may not always be readily available on site or at that moment to administer for a variety of reasons. This bill would address that situation.

Medically adverse and costly issues can be prevented through allowing schools to stock a supply of medications or inhalers, training on administering the medications along with providing liability protection for all parties involved as provided for in H.B.1448.

This bill can both reduce the potential severity of asthma attacks for children with asthma and reduce the risk and cost of emergency and hospital situations. I urge the committee to consider the important health and economic advantages of the bill and advance this measure.

Thank you for the opportunity to provide testimony.

Julian Lipsher, M.P.H. jdlipsher@hawaii.rr.com

HB-1448-HD-1

Submitted on: 2/15/2023 3:36:11 AM Testimony for HLT on 2/15/2023 9:30:00 AM

Submitted By	Organization	Testifier Position	Testify
Ruth Love	Individual	Comments	Written Testimony Only

Comments:

Shouldn't parents of a child with asthma teach their older child inhaler use. Shouldn't the parents of a younger child provide an inhaler for use at school to the teacher?

Inhaler use, aed use and epipen use should be part of a first aid curriculum that all teachers should be required to take.

Thank you,

Mrs Ruth Love