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HEZEKIAH BEARDSLEY CONNECTICUT CHAPTER

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Good afternoon, Chairman Gerratana, Chairman Ritter, and members of the Public Health Committee.

I am Dr. Sandra Carbonari. I am a pediatrician in Waterbury, and I am the President Elect of the CT Chapter of the American Academy of Pediatrics, which represents nearly 1000 pediatricians throughout the state.

I am here today to oppose **Raised Bill No. 1178, An Act Concerning the Care and Treatment of Students with Diabetes While at School, and quickly to mention HB 6610 An Act Concerning Vaccines.**

As you may know, diabetes is a serious, lifelong, and potentially life threatening disease which can effect children of any age. Although there is treatment for this disease, good control can be difficult to maintain and, at times, involves complex decision-making. As with all medical problems, pediatricians encourage our child and adolescent patients to be as involved as possible in their care. We wholeheartedly agree with the aim of this bill to allow students to have the same responsibility in school as at home. They should be able to carry their supplies, check their blood glucose levels, and use their insulin pumps in school.

However, we strongly feel that these students should have the supervision and back up of a medically trained professional. This bill allows a "school-designated care aide" to be in a role that potentially involves complex decision-making in a critical situation. In Section 3 they are given the responsibility for performing any of the duties necessary to implement a student's diabetes care plan. This includes calculating the number of carbohydrates a child has ingested, interpreting data from the glucometer, and deciding on dosages of insulin not contemplated in the student's diabetes care plan. This also includes the actual administering of a subcutaneous injection. This is outside of the scope of practice for medical assistants in our state, who have a great deal more training than what is proposed in this bill.

In Section 4 this bill addresses the training of the proposed school designated care aide. Each local or regional school system must develop and implement the required training program for any person "who wishes to serve as a school-designated care aide". It is unclear in part d of this section as to who should provide the training. In the same sentence it refers to a health care provider, defined as an MD or advanced practice nurse, as the provider of training and then states that it could be done by the school nurse. Additionally, there is no mention of a method to determine if any such person is qualified upon completion of the training program.

Care of children with diabetes is not always simple or straightforward. Errors can result in serious consequences for the child. For these reasons we do not agree with the plan to allow nonmedical school-designated care aides the responsibility for making medical judgments about the care of these children.

In addition I would like to comment on **HB 6610, an Act Concerning Vaccines**. While the Academy and our colleagues at the CT State Medical Society agree with the intent of the bill, and the concept that providers have a choice in determining what vaccine is given, we have serious concerns about the implementation of this bill as written. If this bill is not modified, our current state Vaccine Fund currently capped at \$9.044 million would be depleted very early on in the year, and administrative chaos in getting vaccines reimbursed would ensue.

Section 2 must be changed to ensure that in our state program choice is given when possible, but it cannot be for every category of recommended vaccine as contemplated by this bill. In order to ensure the continued success of the state's immunization program we must continue to allow the Department of Public Health to administer the program and in consultation with the Vaccine Purchasing Advisory Committee retain the authority to determine the categories of vaccine that are funded by the state's vaccine fund. Our state, proudly, has the distinction of having among the highest immunization rates in the country.

We look forward to work with the proponents of the bill, and the Department of Public Health to continue that distinction, and not create unworkable system.