

SB628

Unfavorable

Love Maryland PAC

Dear Chair Griffith, Vice Chair Klausmeier, and Distinguished Members of the Finance Committee,

The Love Maryland PAC submits testimony to request an unfavorable report on SB628- School Based Health Care Centers- Services, Infrastructure and Funding.

This bill is, quite simply, unnecessary from the start. Senator Lam writes in the bill that the stated objective is to have at least one school-based health care center in each county. According to the Maryland Department of Health, we already have at least one health center in each county, and in areas where students have the highest need for these types of services, there are more- including 17 in Baltimore City alone:

<https://health.maryland.gov/phpa/mch/MD-SBHC-Program/Pages/School-Based-Health-Centers.aspx>

Senator Lam has stated that he intends for this bill to be a way to address and allocate the \$9 million dollar funding provided for school based health centers in Kirwan. But, as you can see from the bill, this current proposal requires continuing additional allocation of precious school dollars to run and maintain the health centers he proposes adding. With all of the infrastructure issues with the schools in Maryland, including the fact that many lack access to clean drinking water, air conditioning and adequate physical infrastructure to keep our kids safe and healthy at school, adding in school health centers is the last way we should be spending school funding. To the extent that Kirwan mandates that the 9 million be spent on school health centers- there are plenty of SHC's already in existence that will easily consume that money and more.

The bill also specifically mentions adding infrastructure to provide vaccinations in school-based health centers. Again, while well intentioned, this is both unnecessary and a waste of Maryland's school resources. In order to be in public school, students must already be vaccinated. These are children that have already had all the vaccines needed to attend school. Additionally, storing and rotating vaccines so they don't expire is a delicate business. Please see the federal government website:

<https://oig.hhs.gov/oei/reports/oei-04-10-00430.asp> which shows that 76% of vaccines studied by the US Department of Health and Human Services in Vaccines for Children (VFC) providers were improperly stored to the point that “exposure to inappropriate temperatures can reduce vaccine potency and efficacy, increasing the risk that children are not provided with maximum protection against preventable diseases. Thirteen providers stored expired vaccines together with nonexpired vaccines, increasing the risk of mistakenly administering the expired vaccine. Finally, the selected providers generally did not meet vaccine management requirements or maintain required documentation.”

Should an injury occur from the improper storage or administering an expired vaccination, The National Vaccine Injury Compensation Program (NVICP) has clear requirements for compensation. Under the NVICP, in order for a child who is vaccine injured to be eligible for compensation, a PARENT must give consent to the vaccination, a PARENT must be handed the VIS post vaccination and a PARENT must file on behalf of the minor child. Nowhere in this bill is any of those legal mandates taken into account. Nowhere in this bill are these vital issues addressed for the protection of the minor child.

Our states’ most vulnerable children do not deserve sub-standard care. Do not let the siren song of theoretical unmet need distract this committee from providing children with the actual quality health care that they need to thrive. This bill is a trojan horse for doing just that.

Finally, we turn our attention to the third issue with the bill- the dangers of providing health care outside the scope of a three-legged stool which best serves children- pediatrician, parent, child. Parents are asked at the beginning of the school term for their child to provide a blanket one-time consent for use of the health center. The parent then is totally cut out of the health happenings of their child in this setting. These clinics, vital as they may be for things like non-invasive sports physicals and monitoring and dispensing of medication prescribed by a child’s pediatrician with actual consent from the parent, are simply not adequate or supervised enough to do more than that. These clinics make mistakes- ALL THE TIME. One recent example is the attached article where a Baltimore City minor was administered an incorrectly inserted birth control implant and could have suffered serious life-long complications:

<https://www.newsweek.com/maryland-school-gave-teenager-birth-control-implant-without-parents-permission-1462481> As the parent in the article so rightly states: “They call me for Tylenol, but they don’t call me about birth control,” she said. “You gave my

daughter this insertion so she might be suffering from that, but do they even look at that?"

In conclusion, the Love Maryland PAC supports meeting children's health care needs where they are at- administration of already prescribed medication, non-invasive sports physicals for student athletes, and basic 'school nurse' care. But beyond that, children need a three-legged stool of parent- pediatrician- child to ensure that their health care needs are adequately being met. Taking school funding away from more pressing school infrastructure issues in order to attempt to provide unsafely stored and expired vaccinations to a population that is already fully vaccinated is an expensive and unnecessary waste of time. The Love Maryland PAC looks forward to the opportunity to work with Senator Lam over this coming recess to improve the bill before next year's legislative session.

Please give SB628 and unfavorable report. Thank you.