
Health Care & Wellness Committee

HB 1282

Brief Description: Creating a school-based influenza vaccination pilot program.

Sponsors: Representatives White, Rodne, Cody and Kenney.

<p>Brief Summary of Bill</p> <ul style="list-style-type: none">• Establishes a school-based influenza vaccination pilot program.

Hearing Date: 2/3/09

Staff: Jim Morishima (786-7191)

Background:

Influenza, also known as "the flu," is caused by the influenza virus. The flu is a respiratory illness that causes mild to severe symptoms, or even death. The flu can be spread from contact with infected persons or through touching surfaces infected with the virus. According to the United States Centers for Disease Control (CDC), 5 to 20 percent of the population of the United States gets the flu every year. Over 200,000 people per year are hospitalized from flu complications (e.g., pneumonia, ear infections, sinus infections) and about 36,000 die from the flu. Older people and children are at particular risk for flu complications.

According to the CDC, the best way to prevent the flu is to be vaccinated each year. There are basically two types of vaccine: a vaccine containing killed virus that is administered via injection and a vaccine with live, weakened virus (also called live attenuated influenza) that is administered via nasal spray.

Summary of Bill:

The Department of Health (DOH) and the Office of the Superintendent of Public Instruction (OSPI) must jointly establish a school-based influenza vaccination pilot program. The pilot program must utilize both killed vaccine (injection) and live attenuated vaccine (nasal spray) in

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one urban school district and one rural school district. The DOH and the OSPI may seek, receive, and spend money received through an appropriation, grant, donation, or reimbursement from any public or private source to fund the program.

To plan the program, the DOH must convene a working group. The working group must consist of representatives from:

- the Washington chapter of the American Academy of Pediatrics;
- the Washington Academy of Family Physicians;
- each school district in which the program operates;
- the OSPI; and
- the state Medicaid medical director.

The DOH and the OSPI must submit a report to the Governor and the appropriate committees of the Legislature that contains the results of the program as well as recommendations to continue, expand, or terminate the program.

The pilot program expires on July 1, 2011.

Appropriation: None.

Fiscal Note: Requested 2/2/09.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.