

December 17, 2013

## State Board Policies on Epinephrine Auto-injectors as Required in Act 68 of 2013

[Act 68 of 2013, an Act Relating to Health and Schools](http://www.leg.state.vt.us/DOCS/2014/ACTS/ACT068.PDF), requires the State Board, in consultation with the Department of Health, to “adopt policies for managing students with life-threatening allergies and other individuals with life-threatening allergies who may be present at a school.” The complete language can be found starting on Page 10 of Act 68 here: <http://www.leg.state.vt.us/DOCS/2014/ACTS/ACT068.PDF>.

**Summary:** Among other student and school health-related legislation, this Act allows a health care professional to prescribe an epinephrine auto-injector in a school’s name for storage and use at the school, authorizes schools to maintain a stock supply of epinephrine auto-injectors, and enables a school administrator to designate school nurses and other trained school personnel who may administer epinephrine at school to any student or other person, regardless of whether the student or person has a prescription for epinephrine<sup>i</sup>.

The act requires the State Board of Education, in consultation with the Department of Health, to adopt policies for managing students and other persons present at schools who have life-threatening allergies. The policies must establish protocols to prevent exposure to allergens in schools, and establish procedures for responding to life-threatening allergic reactions in schools.

In 2006, related legislation was passed that led to the creation of resources related to life-threatening allergic reactions to be available to schools. Those resources can be found at: [http://education.vermont.gov/new/html/pgm\\_health\\_services.html](http://education.vermont.gov/new/html/pgm_health_services.html), and will be updated with this new information.

In addition to the existing provisions for students with known allergies, the Act states these policies must: “(4) require education and training for school nurses and designated personnel, including training related to storing and administering an epinephrine auto-injector and recognizing and responding to a life-threatening allergic reaction; and (5) require each school to make publicly available protocols and

procedures developed in accordance with the policies adopted by the State Board under this section.”

The cost implications for schools are largely in staff time. School nurses will use the same training materials recommended in the documents currently available through the Vermont Department of Health, Vermont Agency of Education, and the Center for Disease Control. Training for the staff will take time from school nurses and for teachers. It is recommended by the Vermont Department of Health that schools create an Allergy Management Team and should additionally provide a staff training response drill, both of which require staff time.

Schools have the option of maintaining a supply of epinephrine auto-injectors. The legislation states that a “school may maintain a stock supply of epinephrine auto-injectors...A school may enter into arrangements with epinephrine auto-injector manufacturers or suppliers to acquire epinephrine auto-injectors for free or at reduced or fair market prices.”

**State Board Policy Statement:**

It is the policy of the Vermont State Board of Education that life-threatening allergies be managed in accordance with procedures and protocols created jointly with the Vermont Department of Health, with consideration of the practices in the previously developed *Managing Life-threatening Allergic Conditions in Schools* manual published by the Agency of Education.

In addition, it is the policy of the State Board that, in accordance with Act 68 of 2013, schools must implement a process for schools and the parents or guardians of students with a life-threatening allergy to jointly develop a written individualized allergy management plan of action that:

1. incorporates instructions from a student’s physician regarding the student’s life-threatening allergy and prescribed treatment;
2. includes the requirements of section 1387 of this title, if a student is authorized to possess and self-administer emergency medication at school;
3. becomes part of the student’s health records maintained by the school;
4. is updated each school year;
5. requires education and training for school nurses and designated personnel, including training related to storing and administering an epinephrine auto-injector and recognizing and responding to a life-threatening allergic reaction; and
6. makes publicly available protocols and procedures developed in accordance with the policies adopted by the State Board, on the school’s health services website and/or in the student handbook.

The following policies and protocols are available for administrators, school nurses and other school personnel who may be responsible for handling a life-threatening allergic reaction. The Standards of Practice: School Health Services manual will be updated to reflect changes. Schools will use these materials to determine their protocol and publish them in school-based handbooks as appropriate.

1. **Legal & Technical Resources Related to Life-Threatening Chronic Allergies and Illnesses in Schools.** As required in Act 158 of 2006, this table of resources is available on the Agency of Education Website at: <http://education.vermont.gov/school-health-services>
2. **Managing Life-threatening Allergic Conditions in Schools.** This manual provides school personnel with detailed information about life-threatening allergies and best practices for schools, students and families. A model policy template is also included. This manual is available on the Agency of Education Website at: <http://education.vermont.gov/school-health-services>
3. **Collection of Epinephrine-specific Resources from the Vermont Department of Health.** These policies and protocols are available on the Agency of Education Website at: <http://education.vermont.gov/school-health-services>

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<sup>i</sup> if the nurse or designated personnel believe in good faith that the student or individual is experiencing anaphylaxis, regardless of whether the student or individual has a prescription for an epinephrine auto-injector. (See Act 68 of 2013, (b)(1)(d)(3), *Page 10*)