

Janet McLaughlin, DCF Deputy Commissioner, Child Development Division

Comments on H.574 for House Human Services

April 10, 2026

---

The Child Development Division and the Vermont Department of Health reviewed this bill together for the first time on Wednesday afternoon.

We are certainly are supportive of the goal of ensuring that young children who need it have access to epinephrine. We understand that this is about saving lives. We also appreciate that younger children have had less time to be exposed to different things and may be more likely to have an unexpected reaction to an allergen.

We request additional time to review the medical, regulatory, and practical implications of the bill.

We understand that this language is similar to requirements for Vermont's K-12 schools, and we believe that it may need modification for the Vermont child care context.

Some of the elements that CDD and VDH discussed were:

- Staffing: Child care centers typically do not have nurses onsite which raised additional questions about how to store and administer the medication for children who do not have a prescription.
- Age of children: With children as young as six weeks, we would need a clear guidance related to administration and dosage.
- Regulations: Child care licensing regulations currently lay out specifics for medication administration and required trainings; these would need to be adjusted with this proposal.
- Access to medication: Whether through prescriptions or stock supply, this question requires administrative guidance and/pr capacity.
- Payment for medication: The question who would pay for the medication, with what funds, and through what mechanism is important to address to ensure this bill has its intended impact.

Again, we support the intent of this bill and request time to ensure it is the best pathway to reach the intended goal.