

Testimony of Angela Nadeau of West Hartford in Support of

HB 6975 AN ACT ESTABLISHING A TASK FORCE TO STUDY LIFE-THREATENING FOOD ALLERGIES IN SCHOOLS

And

HB 6272 AN ACT CONCERNING THE ADMINISTRATION OF EPINEPHRINE ON SCHOOL BUSES

Chairman Fleischman, Chairman Slossberg, Members of the Education Committee, for the record my name is Angela Nadeau and I am submitting written testimony in support of HB 6975 and HB 6272. Below is the testimony I originally submitted to Representative John Hampton on behalf of HB 6272. It is my understanding that that bill may be put on hold and the issue revisited by the task force referenced in HB 6975. The issue of bus drivers administering epinephrine is an issue that I feel strongly about but it is only one of many issues faced in the school setting by children with life-threatening food allergies. I respectfully ask you to support HB 6975 so that these issues may be addressed and standards may be created and enforced across the state. Thank you for the opportunity to provide testimony.

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Dear State Representative Hampton,

I am writing you because I want to join the fight to allow the administration of Epinephrine on school buses. I am the mother of a boy who attends Kindergarten in West Hartford. He happens to have a peanut allergy and the morning bus ride just happens to be one of the highlights of his day.

Prior to the start of school I was most worried about how he would fit in with his new school, classmates and teacher, and whether other children would be sitting at the peanut-free table with him. I never imagined the jeopardy his life might be in until approximately one week prior to the start of school. That is when I found out that my son's bus driver would not be EpiPen trained nor be able to administer Epinephrine on the bus. I am the daughter of an EpiPen-trained bus driver in Massachusetts and perhaps that is why the thought never crossed my mind about my own son not having these measures in place. He is too young to self-carry or self-administer his own EpiPen. He relies on us parents to read labels and carry the EpiPen at all times to save him from a life-threatening reaction to peanuts or tree nuts. We have seen his anaphylactic reaction before; approximately one hour after eating even traces of nuts, his tongue, lips and throat swell to the point of incomprehensible speech. He is on the school bus approximately one hour after breakfast. While we as parents do our best to read labels to ensure our son is reaction free, there are no guarantees. There is the risk of cross contamination and the

risk of other children having peanut residue on their hands or eating on the bus without the driver knowing. This bill being passed means that my son will have a chance at life if he were to have a reaction on the bus. Currently, the protocol, per the transportation department, is to have the driver pull over and radio dispatch. Dispatch will then call 911 and emergency services are then sent to the location. This takes critical time that my son will likely not have. Having already experienced needing to call for an ambulance to our house, we know it can take approximately 10 mins for an ambulance to arrive to our home with a direct 911 call from our house.

We are fortunate that our school is so accommodating to my son's peanut allergy. I have been told that the bus is "an extension of the school day." If this is so why would processes not be in place to deal with an allergic reaction on the bus vs. in the school? I placed calls to the transportation department and the school. Several calls later, I was told that best option for my son would be to ride a mini bus that had room on it for him and came near our neighborhood. They could not tell me what time it would be coming, how long the ride would be, or how many other students would be on it. My husband and I thought carefully and ultimately decided against this option for many reasons. My son had watched for years as the other children in the neighborhood gathered together at the bus stop and he had been told that he was finally going to get to ride the bus with those other children in the neighborhood. He was ecstatic about this and looking forward to the start of kindergarten. With this new bus we could not be sure what the needs of the other children would be and how that may impact our son. I even requested the opinion of my mother who has EpiPen training as well as experience driving special needs children. We chose to research the route of the current bus he was scheduled to take and make a careful decision to keep him on this bus due to the short duration (approximately 20 mins) and wanting him to feel included with the other neighborhood children. He gets to sit with his best friend in the neighborhood and he loves it. I live everyday with anxiety of if he will get to school without having a reaction. My choices are to hope he gets to school reaction-free or to pack up my 2 year old and either follow the bus to school or drive him myself. Neither option is favorable to me as a full-time working mother.

I hope I can help educate others on the importance of having this bill passed so that children with allergies such as my son can have a safer ride to school without being segregated with other children who truly need a bus monitor. This simple training and willingness of a trained adult to administer Epinephrine is life-saving, and what can be wrong with that?

Sincerely,

Angela Nadeau  
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