

2530

2013-2014 Regular Sessions

I N S E N A T E

January 18, 2013

Introduced by Sens. HANNON, DeFRANCISCO, GRISANTI -- read twice and ordered printed, and when printed to be committed to the Committee on Health

AN ACT to amend the public health law, in relation to establishing the eating disorders awareness and prevention program; and to amend the education law, in relation to screening students for eating disorders

THE PEOPLE OF THE STATE OF NEW YORK, REPRESENTED IN SENATE AND ASSEMBLY, DO ENACT AS FOLLOWS:

1 Section 1. The public health law is amended by adding a new article
2 27-FF to read as follows:

3 ARTICLE 27-FF

4 EATING DISORDERS AWARENESS AND PREVENTION PROGRAM

5 SECTION 2790. EATING DISORDERS AWARENESS AND PREVENTION PROGRAM; ESTAB-
6 LISHMENT.

7 2791. PROGRAM DEVELOPMENT.

8 S 2790. EATING DISORDERS AWARENESS AND PREVENTION PROGRAM; ESTABLISH-
9 MENT. THE EATING DISORDERS AWARENESS AND PREVENTION PROGRAM IS ESTAB-
10 LISHED WITHIN THE DEPARTMENT.

11 S 2791. PROGRAM DEVELOPMENT. 1. THE EATING DISORDERS AWARENESS AND
12 PREVENTION PROGRAM SHALL BE DESIGNED TO PROMOTE THE AWARENESS OF EATING
13 DISORDERS AND AVAILABLE SERVICES, AS WELL AS TO PREVENT AND REDUCE THE
14 INCIDENCE AND PREVALENCE OF EATING DISORDERS, ESPECIALLY AMONG CHILDREN
15 AND ADOLESCENTS. RECOGNIZING THAT EARLY IDENTIFICATION AND INTERVENTION
16 OF EATING DISORDERS IS ESSENTIAL, THIS PROGRAM SHALL PROVIDE A MULTI-FA-
17 CETED APPROACH TO ACHIEVE ITS INTENDED GOALS.

18 2. THE EATING DISORDERS AWARENESS AND PREVENTION PROGRAM SHALL, IN
19 CONSULTATION AND COOPERATION WITH THE DEPARTMENT OF EDUCATION, THE NEW
20 YORK STATE COMPREHENSIVE CARE CENTERS FOR EATING DISORDERS AND THE
21 NATIONAL EATING DISORDERS ASSOCIATION, BE ESTABLISHED IN ORDER TO, BUT
22 NOT BE LIMITED TO:

EXPLANATION--Matter in ITALICS (underscored) is new; matter in brackets
[] is old law to be omitted.

LBD05353-01-3

(A) DEVELOP MEDIA HEALTH PROMOTION CAMPAIGNS TARGETED TO CHILDREN, ADOLESCENTS AND THEIR PARENTS OR CAREGIVERS THAT RAISE AWARENESS ABOUT EATING DISORDERS AND PROVIDE INFORMATION AND RESOURCES ON WHERE TO SEEK HELP;

(B) ESTABLISH SCHOOL-BASED EATING DISORDERS AWARENESS AND PREVENTION PROGRAMS WITH LINKAGES TO HEALTH EDUCATION COURSES;

(C) SPONSOR PERIODIC CONFERENCES OR MEETINGS TO BRING TOGETHER EXPERTS IN PUBLIC HEALTH, MENTAL HEALTH, EDUCATION, PARENTING, MEDIA, FOOD MARKETING, AND OTHER DISCIPLINES TO EXAMINE SOLUTIONS TO THE PROBLEM OF EATING DISORDERS AND MAKE RECOMMENDATIONS FOR FURTHER STATE POLICIES AND PROGRAMS; AND

(D) DEVELOP, PROMOTE AND MAKE AVAILABLE TRAINING PROGRAMS FOR MEDICAL AND OTHER HEALTH PROFESSIONALS TO BETTER UNDERSTAND, IDENTIFY AND PROVIDE APPROPRIATE TREATMENT AND/OR REFERRALS OF PATIENTS AND THEIR FAMILIES.

3. THE DEPARTMENT SHALL PERIODICALLY COLLECT AND ANALYZE INFORMATION FROM SCHOOLS, HEALTH AND NUTRITION PROGRAMS, THE COMPREHENSIVE CARE CENTERS FOR EATING DISORDERS AND OTHER SOURCES TO DETERMINE THE PREVALENCE OF EATING DISORDERS IN THIS STATE, AND TO EVALUATE, TO THE EXTENT POSSIBLE, THE EFFECTIVENESS OF THE EATING DISORDERS AWARENESS AND PREVENTION PROGRAM AND OTHER STATE PROGRAMS DESIGNED TO ADDRESS EATING DISORDERS.

S 2. Subdivision 1 of section 903 of the education law, as separately amended by section 11 of part B of chapter 58 and chapter 281 of the laws of 2007, is amended to read as follows:

1. A health certificate shall be furnished by each student in the public schools upon his or her entrance in such schools and upon his or her entry into the grades prescribed by the commissioner in regulations, provided that such regulations shall require such certificates at least twice during the elementary grades and twice in the secondary grades. An examination and health history of any child may be required by the local school authorities at any time in their discretion to promote the educational interests of such child. Each certificate shall be signed by a duly licensed physician, physician assistant, or nurse practitioner, who is authorized by law to practice in this state, and consistent with any applicable written practice agreement, or by a duly licensed physician, physician assistant, or nurse practitioner, who is authorized to practice in the jurisdiction in which the examination was given, provided that the commissioner has determined that such jurisdiction has standards of licensure and practice comparable to those of New York. Each such certificate shall describe the condition of the student when the examination was made, which shall not be more than twelve months prior to the commencement of the school year in which the examination is required, and shall state whether such student is in a fit condition of health to permit his or her attendance at the public schools. Each such certificate shall also state the student's body mass index (BMI) and weight status category. For purposes of this section, BMI is computed as the weight in kilograms divided by the square of height in meters or the weight in pounds divided by the square of height in inches multiplied by a conversion factor of 703. Weight status categories for children and adolescents shall be as defined by the commissioner of health. FURTHERMORE, EACH SUCH CERTIFICATE SHALL INCLUDE AN ASSESSMENT OF THE STUDENT FOR EATING DISORDERS. SUCH ASSESSMENT SHALL BE CONDUCTED PURSUANT TO STANDARDS ESTABLISHED BY THE COMMISSIONER OF HEALTH. In all school districts such physician, physician assistant or nurse practitioner shall determine whether a one-time test for sickle cell anemia is

1 necessary or desirable and he or she shall conduct such a test and the
2 certificate shall state the results.

3 S 3. Subdivision 1 of section 904 of the education law, as amended by
4 section 12 of part B of chapter 58 of the laws of 2007, is amended to
5 read as follows:

6 1. Each principal of a public school, or his or her designee, shall
7 report to the director of school health services having jurisdiction
8 over such school, the names of all students who have not furnished
9 health certificates as provided in section nine hundred three of this
10 article, or who are children with disabilities, as defined by article
11 eighty-nine of this chapter, and the director of school health services
12 shall cause such students to be separately and carefully examined and
13 tested to ascertain whether any student has defective sight or hearing,
14 AN EATING DISORDER, or any other physical disability which may tend to
15 prevent him or her from receiving the full benefit of school work, or
16 from requiring a modification of such work to prevent injury to the
17 student or from receiving the best educational results. Each examina-
18 tion shall also include a calculation of the student's body mass index
19 (BMI) and weight status category. For purposes of this section, BMI is
20 computed as the weight in kilograms divided by the square of height in
21 meters or the weight in pounds divided by the square of height in inches
22 multiplied by a conversion factor of 703. Weight status categories for
23 children and adolescents shall be as defined by the commissioner of
24 health. In all school districts, such physician, physician assistant or
25 nurse practitioner shall determine whether a one-time test for sickle
26 cell anemia is necessary or desirable and he or she shall conduct such
27 tests and the certificate shall state the results. If it should be
28 ascertained, upon such test or examination, that any of such students
29 have defective sight or hearing, AN EATING DISORDER, or other physical
30 disability, including sickle cell anemia, as above described, the prin-
31 cipal or his or her designee shall notify the parents of, or other
32 persons in parental relation to, the child as to the existence of such
33 disability OR DISORDER. If the parents or other persons in parental
34 relation are unable or unwilling to provide the necessary relief and
35 treatment for such students, such fact shall be reported by the princi-
36 pal or his or her designee to the director of school health services,
37 whose duty it shall be to provide relief for such students. Each school
38 and school district chosen as part of an appropriate sampling methodol-
39 ogy shall participate in surveys directed by the commissioner of health
40 pursuant to the public health law in relation to students' BMI and
41 weight status categories as determined by the examination conducted
42 pursuant to this section and which shall be subject to audit by the
43 commissioner of health. Such surveys shall contain the information
44 required pursuant to this subdivision in relation to students' BMI and
45 weight status categories in aggregate. Parents or other persons in
46 parental relation to a student may refuse to have the student's BMI and
47 weight status category included in such survey. Each school and school
48 district shall provide the commissioner of health with any information,
49 records and reports he or she may require for the purpose of such audit.
50 The BMI and weight status survey and audit as described in this section
51 shall be conducted consistent with confidentiality requirements imposed
52 by federal law. Data collection for such surveys shall commence on a
53 voluntary basis at the beginning of the two thousand seven academic
54 school year, and by all schools chosen as part of the sampling methodol-
55 ogy at the beginning of the two thousand eight academic school year. The

1 department shall also utilize the collected data to develop a report of
2 child obesity and obesity related diseases.
3 S 4. This act shall take effect on the ninetieth day after it shall
4 have become a law, except that sections two and three of this act shall
5 take effect on the first of July next succeeding the date on which it
6 shall have become a law; provided that, effective immediately, any rules
7 and regulations necessary to implement the provisions of this act on its
8 effective date are authorized and directed to be completed on or before
9 such date.