

# STATE OF NEW YORK

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2724--A

Cal. No. 830

2017-2018 Regular Sessions

## IN SENATE

January 17, 2017

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Introduced by Sens. KLEIN, DILAN -- read twice and ordered printed, and when printed to be committed to the Committee on Education -- reported favorably from said committee, ordered to first and second report, amended on second report, ordered to a third reading, and to be reprinted as amended, retaining its place in the order of third reading

AN ACT to amend the education law, in relation to childhood obesity and instruction in good health and reducing the incidence of obesity

The People of the State of New York, represented in Senate and Assembly, do enact as follows:

1 Section 1. Section 901 of the education law, as amended by chapter 477  
2 of the laws of 2004, subdivision 1 as amended by section 57 of part A-1  
3 of chapter 58 of the laws of 2006, is amended to read as follows:

4 § 901. School health services to be provided. 1. School health  
5 services, as defined in subdivision two of this section, shall be  
6 provided by each school district for all students attending the public  
7 schools in this state, except in the city school district of the city of  
8 New York, as provided in this article. School health services shall  
9 include the services of a registered professional nurse, if one is  
10 employed, and shall also include such services as may be rendered as  
11 provided in this article in examining students for the existence of  
12 disease or disability, or may include services related to examining for  
13 childhood obesity conditions pursuant to subdivision one of section nine  
14 hundred four of this article, and in testing the eyes and ears of such  
15 students.

16 2. School health services for the purposes of this article shall mean  
17 the several procedures, including, but not limited to, medical examina-  
18 tions, dental inspection and/or screening, scoliosis screening, vision  
19 screening [~~and~~], audiometer tests, and may include childhood obesity  
20 measurements as provided for in subdivision one of section nine hundred  
21 four of this article, designed to determine the health status of the

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

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1 child; to inform parents or other persons in parental relation to the  
2 child, pupils and teachers of the individual child's health condition  
3 subject to federal and state confidentiality laws; to guide parents,  
4 children and teachers in procedures for preventing and correcting  
5 defects ~~[and]~~, diseases and childhood obesity conditions; to instruct  
6 the school personnel in procedures to take in case of accident or  
7 illness; to survey and make necessary recommendations concerning the  
8 health and safety aspects of school facilities and the provision of  
9 health information.

10 § 2. Subdivision 1 of section 903 of the education law, as amended by  
11 chapter 376 of the laws of 2015, is amended to read as follows:

12 1. A health certificate shall be furnished by each student in the  
13 public schools upon his or her entrance in such schools and upon his or  
14 her entry into the grades prescribed by the commissioner in regulations,  
15 provided that such regulations shall require such certificates at least  
16 twice during the elementary grades and twice in the secondary grades. An  
17 examination and health history of any child may be required by the local  
18 school authorities at any time in their discretion to promote the educa-  
19 tional interests of such child. Each certificate shall be signed by a  
20 duly licensed physician, physician assistant, or nurse practitioner, who  
21 is authorized by law to practice in this state, and consistent with  
22 subdivision three of section six thousand nine hundred two of this chap-  
23 ter, or by a duly licensed physician, physician assistant, or nurse  
24 practitioner, who is authorized to practice in the jurisdiction in which  
25 the examination was given, provided that the commissioner has determined  
26 that such jurisdiction has standards of licensure and practice compara-  
27 ble to those of New York. Each such certificate shall describe the  
28 condition of the student when the examination was made, which shall not  
29 be more than twelve months prior to the commencement of the school year  
30 in which the examination is required, and shall state whether such  
31 student is in a fit condition of health to permit his or her attendance  
32 at the public schools. The examination may include a diabetes risk  
33 analysis and, if necessary, children with risk factors for type 1  
34 diabetes, or risk factors associated with type 2 diabetes such as obesi-  
35 ty, a family history of type 2 diabetes, or any other factors consistent  
36 with increased risk may also be tested for diabetes. Each such certifi-  
37 cate shall also state the student's body mass index (BMI) and weight  
38 status category. For purposes of this section, BMI is computed as the  
39 weight in kilograms divided by the square of height in meters or the  
40 weight in pounds divided by the square of height in inches multiplied by  
41 a conversion factor of 703. Weight status categories for children and  
42 adolescents shall be as defined by the commissioner of health. In all  
43 school districts such physician, physician assistant or nurse practi-  
44 tioner shall determine whether a one-time test for sickle cell anemia is  
45 necessary or desirable and he or she shall conduct such a test and the  
46 certificate shall state the results.

47 § 3. Subdivisions 4 and 5 of section 918 of the education law, as  
48 added by chapter 493 of the laws of 2004, are amended to read as  
49 follows:

50 4. The committee is encouraged to study and make recommendations on  
51 all facets of the current nutritional policies of the district includ-  
52 ing, but not limited to, the goals of the district to promote health and  
53 proper nutrition, reduce the incidence of childhood obesity, vending  
54 machine sales, menu criteria, educational curriculum teaching healthy  
55 nutrition, and educational information provided to parents or guardians  
56 regarding healthy nutrition and the health risks associated with obesi-

1 ty, asthma, chronic bronchitis and other chronic respiratory diseases.  
2 Provided, further, the committee may provide information to persons in  
3 parental relation on opportunities offered to parents or guardians to  
4 encourage healthier eating habits to students, and the education  
5 provided to teachers and other staff as to the importance of healthy  
6 nutrition and about the dangers of childhood obesity. In addition the  
7 committee shall consider recommendations and practices of other  
8 districts and nutrition studies.

9 5. The committee is encouraged to report periodically to the district  
10 regarding practices that will educate teachers, parents or guardians and  
11 children about healthy nutrition and raise awareness of the dangers of  
12 childhood obesity, asthma, chronic bronchitis and other chronic respir-  
13 atory diseases. The committee is encouraged also to provide any parent  
14 teacher associations in the district with such findings and recommenda-  
15 tions.

16 § 4. Subdivision 1 of section 804-a of the education law, as added by  
17 chapter 730 of the laws of 1986, is amended to read as follows:

18 1. Within the amounts appropriated, the commissioner is hereby  
19 authorized to establish a demonstration program and to distribute state  
20 funds to local school districts, boards of cooperative educational  
21 services and in certain instances community school districts, for the  
22 development, implementation, evaluation, validation, demonstration and  
23 replication of exemplary comprehensive health education programs to  
24 assist the public schools in developing curricula, training staff, and  
25 addressing local health education needs of students, parents, and staff.  
26 Such programs may serve the purpose of developing and enhancing pupils'  
27 health knowledge, skills, attitudes and behaviors, which is fundamental  
28 to improving their health status and academic performance, as well as  
29 reducing the incidence of adolescent pregnancy, alcohol abuse, tobacco  
30 abuse, truancy, suicide, substance abuse, obesity, asthma, other chronic  
31 respiratory diseases, and other problems of childhood and adolescence.

32 § 5. This act shall take effect immediately, except that sections one,  
33 two and three of this act shall take effect two years after this act  
34 shall have become a law.