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IN SENATE

November 19, 2018

Introduced by Sen. BENJAMIN -- read twice and ordered printed, and when printed to be committed to the Committee on Rules

AN ACT to amend the public health law, the education law and the penal law, in relation to requiring anaphylactic policies for child care services

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

Section 1. This act shall be known and may be cited as "Elijah's Law". 1 § 2. Section 2500-h of the public health law, as added by chapter 579 2 of the laws of 2007, is amended to read as follows: 3 4 § 2500-h. Anaphylactic policy for [school districts] child care 5 service providers. 1. For purposes of this section "child care service" or "child care service provider" shall mean care for any child under the 6 7 age of eighteen provided on a regular basis away from the child's residence for less than twenty-four hours per day by someone other than the 8 parent, step-parent, guardian, or relative within the third degree of 9 10 consanguinity of the parents or step-parents of such child; and shall include, but not be limited to: all public and private elementary and 11 12 secondary schools; group family day care home, family day care home and school age child care as such terms are defined in section three hundred 13 14 ninety of the social services law; a day camp as defined in the state 15 sanitary code; an after-school program operated for the purpose of reli-16 gious education, sports, or recreation; a facility providing day services under an operating certificate issued by the department, the 17 office of mental health or office for people with developmental disabil-18 ities; a kindergarten, pre-kindergarten or nursery school for children 19 20 three years of age or older; an after-school program for children oper-21 ated by a public school district or by a private school or academy which 22 is providing elementary or secondary education or both. 23 2. The commissioner[, in consultation with the commissioner of -educa-24 tion, shall establish an anaphylactic policy for school districts 25 setting forth guidelines and procedures to be followed for both] shall 26 adopt an anaphylactic policy which shall conform to the Voluntary Guide-27 lines for Managing Food Allergies In Schools and Early Care and Educa-

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

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tion Programs promulgated by the United States department of health and 1 human services for all child care services. Such anaphylactic policy 2 3 shall be followed for both the prevention of anaphylaxis and during a 4 medical emergency resulting from anaphylaxis. Such **anaphylactic** policy 5 shall be [developed] implemented after consultation with representatives б of pediatric physicians, [school nurses] and other health care providers with expertise in treating children with anaphylaxis, parents of chil-7 8 dren with life threatening allergies, [school administrators, teachers, 9 school food service directors] and appropriate not-for-profit corpo-10 rations representing allergic individuals at risk for anaphylaxis. 11 [2.] <u>3.</u> The anaphylactic policy established by [aubdivision one of] 12 this section shall include the following: 13 (a) a procedure and treatment plan, including responsibilities for 14 school nurses and other appropriate school personnel and every child 15 <u>care service provider</u>, for responding to anaphylaxis; 16 (b) a training course for appropriate [school] personnel for prevent-17 ing and responding to anaphylaxis; (c) a procedure and appropriate guidelines for the development of an 18 individualized emergency health care plan for children with a food or 19 20 other allergy which could result in anaphylaxis; 21 a communication plan for intake and dissemination of information (d) 22 regarding children with a food or other allergy which could result in 23 anaphylaxis; [and] 24 (e) strategies for the reduction of the risk of exposure to anaphylactic causative agents, including food and other allergens; 25 26 (f) a communication plan for discussion with anaphylactic children 27 about foods that are safe and unsafe for the child, and about strategies to avoid exposure to unsafe food; and 28 29 (g) a requirement that each child care service provider shall have an 30 onsite mechanism, including but not limited to auto injectors that are 31 current and not expired, that will immediately reduce the effects of any 32 life-threatening allergies. [3. On or before June thirtieth, two thousand eight] 4. Six months 33 after the effective date of the chapter of the laws of two thousand 34 35 eighteen that amended this section, an anaphylactic policy shall be 36 jointly forwarded by the commissioner and the commissioner of education 37 to each [local school board of education, charter school, and board of cooperative educational services] child care service provider in the 38 state. [Each such board and charter school] Every child care service 39 provider shall [consider and take action in response to] implement such 40 41 anaphylactic policy within ninety days of receiving such anaphylactic 42 policy from such commissioners. 43 5. (a) Any willful or negligent violation of this section by a child 44 care service provider shall result in a civil penalty not to exceed five 45 thousand dollars for each violation. 46 (b) If a child care service provider fails to implement the guidelines 47 and anaphylactic policy pursuant to this section, such child care service provider's license or registration shall be revoked. A child 48 care service provider may, by written request to the commissioner and in 49 the commissioner's discretion, be granted an extension of time to imple-50 51 ment the anaphylactic policy required pursuant to this section. 52 6. The commissioner, in consultation with the commissioner of educa-53 tion and the commissioner of the office of children and family services 54 shall develop and implement a plan for reporting, inspecting and moni-55 toring of child care services to ensure compliance with this section.

3. Paragraph (f) of subdivision 2 of section 3000-c of the public 1 S health law, as added by chapter 373 of the laws of 2016, is amended to 2 3 read as follows: 4 (f) [Nothing in] The provisions of this section shall not require 5 [any] an eligible person or entity which is not a child care service as б defined in section twenty-five hundred-h of this chapter to acquire, 7 possess, store, make available, or administer an epinephrine auto-injec-8 tor. 9 § 4. Section 921-a of the education law, as amended by chapter 200 of the laws of 2017, is amended to read as follows: 10 11 § 921-a. On-site epinephrine auto-injector. 1. School districts, boards of cooperative educational services, county vocational education 12 and extension boards, charter schools, and non-public elementary and 13 14 secondary schools in this state [may] shall provide and maintain on-site 15 in each instructional school facility epinephrine auto-injectors in 16 quantities and types deemed by the commissioner, in consultation with the commissioner of health, to be adequate to ensure ready and appropri-17 18 ate access for use during emergencies to any student or staff having anaphylactic symptoms whether or not there is a previous history of 19 20 severe allergic reaction. 21 2. School districts, boards of cooperative educational services, coun-22 ty vocational education and extension boards, charter schools, and nonpublic elementary and secondary schools in this state, any person 23 employed by any such entity, or employed by a contractor of such an 24 25 entity while performing services for the entity may administer epineph-26 rine auto-injectors in the event of an emergency pursuant to the 27 requirements of section three thousand-c of the public health law. 28 § 5. Section 260.10 of the penal law is amended by adding a new subdi-29 vision 4 to read as follows: 30 4. Being a child care service provider, he or she fails to comply with 31 the provisions of the anaphylactic policies adopted by the commissioner 32 of health pursuant to section twenty-five hundred-h of the public health 33 law, including the required availability and use of an epinephrine autoinjector, which results in harm to a child under the care of such child 34 35 <u>care service provider.</u>

36 § 6. This act shall take effect immediately.