



**Proposed Amendments to  
Commissioner's Regulations on  
School Health Services Part 136**

Board of Regents Meeting January 2017

# §136.1 Definitions



Current Regulation	Proposed Revision
<p>(f) Treatment means: <i>correction of physical defects or other health problems in need of attention wherein the student, for the most part, is a passive recipient.</i></p>	<p>(f) Treatment means: <i>including but not limited to, the care and management of a student to combat, ameliorate or prevent a disease, disorder or injury in need of attention....</i></p>
	<p>(h) Health certificate definition added to the definition section which conforms to the requirements outlined in Education Law §903.</p>
	<p>(i) Dental health certificate definition added which conforms to the requirements outlined in Education Law §903.</p>

# §136.2 Duties of Schools to Provide Health Services



<b>Current Regulation</b>	<b>Proposed Regulation</b>
(b) NYC, Buffalo, and Rochester exempted from regulation requirements for school health services program.	(b) NYC exempted from regulation requirements for school health services program.
(1)(d) provide approved and adequate personnel and facilities.	(1)(d) Provide approved and adequate personnel and adequate facilities for treatment.

# §136.3 School Health Services to be Provided



Current Regulation	Proposed Regulation
Health examination for attendance required in grades PreK or K, and 2, 4, 7, and 10.	Health examination for attendance required in grades PreK or K, and 1, 3, 5, 7, and 9.
Scoliosis screening required in grades 5-9.	Scoliosis screening required in grades 5 and 7 for girls, and once in grade 9 for boys.
Vision screening for distance acuity required within 6 months of admission to school and in K, 1, 2, 3, 5, 7, and 10.	Vision screening for distance and near vision acuity required within 6 months of admission to school and in grades PreK or K, 1, 3, 5, 7, and 10.
Hearing Screening utilizing pure tone and threshold air conduction screening required within 6 months of admission to school and in grades K, 1, 3, 5, 7, and 10.	Hearing screening utilizing pure tone screening required within 6 months of admission to school and in grades PreK or K, 1, 3, and 5.

# §136. 6 Authorized Use of Epinephrine Auto-Injector



Current Regulation	Proposed Regulation
<p>Definition of epinephrine auto-injector: <i>an automated injection delivery device approved by the USFDA for injecting a measured dose of the drug epinephrine.</i></p>	<p>Definition of epinephrine auto-injector device is revised to the same definition used in the revised PHL 3000c: <i>a single-use device for the automatic injection of a measured dose of epinephrine into the human body for the purpose of emergency treatment of a person appearing to experience anaphylactic symptoms approved by the USFDA</i></p>
<p>Collaborative Agreement with an emergency health care provider required.</p>	<p>Public Health Law removed the collaborative agreement requirement, so this provision is being deleted to mirror Public Health Law.</p>
<p>Any use of an epinephrine auto injector under a collaborative agreement must be reported to the appropriate provider the agreement is with.</p>	<p>Reporting requirement is deleted in accordance with the deletion of the collaborative agreement provision.</p>

# Highlights of Additional Proposed Amendments



## **The Proposed Amendments also:**

- Define the required components of the health certificate, including that the health certificate be on a form prescribed by the Commissioner to provide consistency across the State.
- Clarify that when the required vision, hearing and scoliosis screenings are completed by a student's health care provider, as documented on the health certificate form prescribed by the Commissioner, such screenings need not be duplicated in school.
- Make conforming technical changes to comply with Education Law §904 relating to the calculation of body mass index (BMI) and weight status categories.
- Clarify that the results of all health screenings shall be properly maintained in the student's cumulative health record.
- Make conforming changes to the required dental health certificates, in accordance with the provisions of Part S of Chapter 57 of the Laws of 2013, including permitting registered dental hygienists to complete the dental health assessment.
- Clarify which health care professionals (consistent with their scope of practice outlined in Title VIII of the Education Law) may, within their appropriate scope of practice, exclude from school students with symptoms of communicable or infectious diseases.

# Resources



**NYS Education Department, Office of Student Support Services  
School Health Services**

<http://www.p12.nysed.gov/sss/schoolhealth/schoolhealthservices/>

518-486-6090

**NYS Education Department, Office of Professions  
Nursing**

<http://www.op.nysed.gov/prof/nurse/>

518-474-3817 x120

**Statewide School Health Services Center**

[www.schoolhealthservicesny.com](http://www.schoolhealthservicesny.com)

585-617-2380

**NYS Department of Health- Bureau of Immunization**

<https://www.health.ny.gov/prevention/immunization/schools/>

518-473-4437

# Next Steps

1. If no objection by the Board, the Proposed Rule Making would be published in the State Register on January 25, 2017.
2. Following the 45-day public comment period, it is anticipated that the Proposed Rule would be presented to the Board for permanent adoption in April 2017. *However, the Department will need to come back to the Board in March 2017 for an emergency adoption of Section 136.6 on epinephrine auto-injector devices which will become effective on March 28, 2017, in accordance with Chapter 373 of the Laws of 2016.*