



Legislation Details (With Text)

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Date	Ver.	Action By	Action	Result
4/18/2024	*	City Council	Introduced by Council	
4/18/2024	*	City Council	Referred to Comm by Council	

Int. No. 804

By Council Members Abreu, Sanchez, Louis, Hanif, Brannan, Rivera, Ossé, Avilés, Won, Brooks-Powers, Ayala, Marte, Banks and Hanks

A Local Law to amend the administrative code of the city of New York, in relation to establishing a child care opioid antagonist program

Be it enacted by the Council as follows:

Section 1. Title 17 of the administrative code of the city of New York is amended by adding a new chapter 22 to read as follows:

CHAPTER 22

CHILD CARE OPIOID ANTAGONIST PROGRAM

§ 17-2201 Definitions. As used in this chapter, the following terms have the following meanings:

Child care program. The term “child care program” means a program that provides care for a child up to 12 years of age on a regular basis, away from the child’s residence, for less than 24 hours per day by a person other than a parent, stepparent, or guardian of such child or a relative within the third degree of consanguinity

of the parents or stepparents of such child.

Opioid antagonist. The term “opioid antagonist” means naloxone or any other medication approved by the New York state department of health and the federal food and drug administration that, when administered, negates or neutralizes in whole or in part the pharmacological effects of an opioid in the human body.

§ 17-2202 Child care opioid antagonist program. The commissioner shall establish a program whereby an owner or employee of a child care program may request an opioid antagonist from the department that is intended to be administered to individuals, including but not limited to children, on the premises of such child care program. The commissioner shall operate such program in compliance with existing federal, state, and local laws and regulations relating to the distribution of an opioid antagonist.

§ 17-2203 Terms and conditions. a. Pursuant to this chapter, an owner or employee of a child care program may request 1 kit of an opioid antagonist for every child that is registered at such child care program, and 1 kit of an opioid antagonist for every owner and employee of such child care program, at one time. An owner or employee of a child care program may only request additional kits of an opioid antagonist if such child care program does not possess 1 kit of an opioid antagonist for every child that is registered at the child care program and 1 kit of an opioid antagonist for every owner and employee of the child care program at the time of such request.

b. To request an opioid antagonist pursuant to this chapter, an owner or employee of a child care program shall provide the following information to the department:

1. Name, mailing address, zip code of residence, and contact information of such owner or employee;
2. Name, mailing address, zip code, and contact information of such child care program;
3. The number of opioid antagonist kits requested;
4. The number of opioid antagonist kits possessed by the child care program at the time of such request;
5. The total number of children registered at the child care program at the time of such request;
6. The total number of owners and employees of the child care program at the time of such request; and

7. Any other information the commissioner determines is required for the department to provide an opioid antagonist to such owner or employee.

c. The department shall not charge a fee for receiving an opioid antagonist through the program established by this chapter.

d. Such owner or employee shall comply with all applicable federal, state, and local laws and regulations, including the requirements of this chapter, relating to the receipt, administration, and use of opioid antagonists.

§ 17-2204 Trainings and other resources. The commissioner shall offer owners and employees of child care programs training and other resources on opioid overdose prevention and administration of an opioid antagonist. An owner or employee of a child care program who has received such training, who has received training from another opioid overdose prevention program approved pursuant to section 3309 of the public health law, or who is otherwise in compliance with relevant federal, state, and local laws and regulations regarding the administration of opioid antagonists may administer an opioid antagonist to an individual such owner or employee reasonably believes is experiencing an opioid overdose.

§ 17-2205 Disclaimer of liability for child care programs and their owners and employees. The administration of an opioid antagonist pursuant to this chapter is considered first aid or emergency treatment for the purpose of any statute relating to liability. A child care program or an owner or employee of such child care program, acting reasonably and in good faith in compliance with this section and section 3309 of the public health law, is not subject to criminal, civil, or administrative liability solely by reason of such action. Nothing contained in this chapter or in the administration or application hereof shall be construed as creating any private right of action against a child care program or an owner or employee of such child care program for use of or failure to use an opioid antagonist in the event of an opioid overdose.

§ 17-2206 Construction. Nothing in this chapter prohibits any other program or policy to provide an opioid antagonist to any individual allowed to obtain and use an opioid antagonist in accordance with federal,

state, and local laws and regulations.

§17-2207 Report. a. No later than 1 year after the effective date of the local law that added this chapter, and annually thereafter, the commissioner shall submit a report to the mayor and the speaker of the council on the program established by this chapter.

b. Such report shall include, but need not be limited to, the following information for the previous calendar year:

1. The total number of opioid antagonist kits provided by the department to owners and employees of child care programs, disaggregated by the zip code of the child care programs; and

2. The total number of trainings on opioid overdose prevention and administration of an opioid antagonist offered by the commissioner to owners and employees of child care programs.

§ 2. This local law takes effect 120 days after it becomes law.

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