

NEW YORK STATE DEPARTMENT OF HEALTH
PUBLIC HEALTH AND HEALTH PLANNING COUNCIL
COMMITTEE ON CODES, REGULATIONS AND LEGISLATION MEETING
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TRANSCRIPT

Mr. Holt Good morning. I'm Tom Holt. I'm the Chair of the committee on Codes, Regulations and Legislation. I have the privilege to call to order the Codes committee and welcome; members, participants and observers. I'd also like to welcome two new members to our committee. Welcome. We look forward to your participation today. I'd like to remind council members staff in the audience that the meeting is subject to the Open Meeting Law. It is broadcast over the internet. The webcasts are accessed at the Department of Health's website. The On Demand webcast will be available no later than seven days after the meeting for a minimum of thirty days, and then a copy will be retained in the department for four months. There are some suggestions or ground rules to follow to make this meeting more successful. Because there is synchronized captioning, it's important that people do not talk over each other. Captioning cannot be done correctly with two people speaking at the same time. The first time that you speak, please state your name and briefly identify yourself as a council member or DOH staff. This will be of assistance to the broadcasting company who's recording this meeting. Please note that the microphones are hot mics, meaning that they pick up every sound. I therefore ask that you avoid rustling papers next to the microphones and also be sensitive about personal conversations or sidebars as the microphones can pick up that chatter. As a reminder for our audience, there's a form that needs to be filled out before you go into the meeting room which records your attendance at these meetings. It's required by the Commission on Ethics, lobbying in the government in accordance with Executive Law Section 166. This form is also posted on the Department of Health's website under Certificate of Need. In the future, you can fill this form out prior to council meetings. We thank you for your cooperation in fulfilling our duties as prescribed by the law. We have two regulations on the agenda today for adoption. I'd like to just make a couple comments because I know we have two folks signed up to speak this morning. For members of the public, you need to limit your comments to three minutes or less. I'll be the timekeeper for that. You'll get a notice with one minute remaining. Presenters are limited to one speaker per organization. Please be prepared for your comments prompt to make your comments properly after your name is called. Your name will be called in order. Move close to the microphone and deliver your remarks. I would just advise you on the front end, get as close to that microphone as you can because you need to be closer than you might think if you're going to be speaking with us this morning. Again, we have two regulations on the agenda for adoption today. The first one that we're going to be reviewing is children's camp.

Mr. Holt May I have a motion for a recommendation for adoption of this regulation to be presented to the full Public Health and Health Planning Council?

Mr. Holt Dr. Watkins.

Mr. Holt And a second?

Mr. Holt Ms. Soffel.

Mr. Holt Ms. Amanda Tarrier and William Sacks from the department are available and will provide information for us about this proposal.

Ms. Tarrier Amanda Tarrier, Department of Health staff. The notice of proposed rulemaking for proposed amendments to Subpart 7 to children's camps was published in the November 19th, 2025 State Register. The proposed amendments address four legislative bills that amended Public Health Law. These were concerning pesticide application, national sex offender registry checks, minimum lifeguard age, and provision of AEDs and train staff. Camps have already been implementing these changes to comply with Public Health Law provisions. Additional amendments include administrative amendments, which were largely to improve consistency with regulations for other environmental health programs, and amendments to better clarify the applicability of the regulation. The department received thirteen comments in response to the notice of proposed rulemaking. These comments were from two parties, a medical professional, and the New York State Association of County Health Officials. The comments addressed amendments on AEDs, camp medical director qualifications, lifeguard age, permitting, incident reporting, vaccination, and applicability of Subpart 7-2. One minor revision was made in response to public comment. The word athletic was removed from Section 7.2-2.3A7, so that the revised exemption relates both to athletic and non-athletic tournaments, competitions, or any associated training where children are registered as part of independently formed teams accompanied by coaches or other adults associated with the team who have responsibility for the well-being, safety, and behavior of the participating children. This revision is considered non-substantive and is consistent with how such operations have been handled prior to this amendment. The department also received a question when presenting the proposed amendments for information at the December 4th, 2025 Public Health Council meeting. The question from Dr. Ortiz was in respect to the proposed addition of nurse practitioners as individuals who can serve as the health director at Camps for Children with Developmental Disabilities. We are making this amendment to correct an unintended omission in the regulation. Nurse practitioners are already listed for those professionals who can serve as the health director at any children's camp, not just at a camp for children with developmental disabilities. Dr. Ortiz noted that the regulation does not specify the type of nurse practitioner and that it wouldn't be appropriate for an adult geriatric nurse practitioner to serve as the health director as they are not licensed to treat individuals under 13 years of age. Our response is that the general role of a camp health director is to supervise health and sanitation at a camp. This includes implementation of the camp safety plan, reviewing and maintaining camper health histories, overseeing initial health screening and daily surveillance, handling emergencies and injuries, including emergency preparedness and referral for advanced care, and maintaining the camp's medical log. The proposed addition to Subpart 7-2

adds nurse practitioners to the list of types of medical professionals who could potentially serve as a health director at a camp for children with developmental disabilities. This list currently includes physicians, physician assistants, registered nurses, and licensed practical nurses. Our guidance to camps on the selection of a health director is contained in the written safety plan template. It advises the camp that Subpart 7.2 does not grant an individual authority to work outside of the scope of practice for their licensure, and that camps should evaluate the medical needs of campers and select a health director and other medical staff who can fulfill those needs. Thus, no changes were made in response to that comment. Thank you.

Mr. Holt Thank you.

Mr. Holt Any questions or comments from members of the committee or the council?

Mr. Holt Big room so I want to make sure I get around and see. I'm not seeing any. We did not have anyone from the community signed up to speak on this.

Mr. Holt All in favor?

All Aye.

Mr. Holt Opposed?

Mr. Holt Motion carries. Thank you.

Mr. Holt This will be presented to the full council for adoption later this morning.

Mr. Holt The second regulation on for adoption is nurse aide training program. I want to acknowledge that the department did receive a letter speaking to this regulation and that was shared with the members of the council.

Mr. Holt May I have a motion for recommendation of adoption of this regulation to the full Public Health and Health Planning Council?

Mr. Holt Dr. Watkins.

Mr. Holt Ms. Soffel.

Mr. Holt Thank you.

Mr. Holt Ms. Carolyn Cazer and Jonathan Karmel from the department are available and will provide us with information on this proposal.

Ms. Cazer Thank you.

Ms. Cazer Carolyn Cazer, Department of Health. The department recognizes that certified nurse aides play a significant role in the delivery of safe and effective care to nursing home residents. To align the state's minimum training requirements with those imposed by the federal department, with the federal government, the department proposes regulations to reduce the minimum nurse aide training standard from 100 hours to 75 hours. The proposed regulations align the state's minimum training requirements with those imposed by the federal government without altering curriculum or competency evaluation requirements. Further, the 75-hour minimum requirement establishes a regulatory minimum that does not prohibit approved nurse aide training programs from requiring or providing additional classroom or clinical instruction. The proposal does not reduce required curriculum content, required clinical instruction, competency requirements, or the requirement that candidates successfully complete the applicable competency examination before certification. Dear Administrator Letter; DAL NH 2020 22-21, dated December 9th, 2002, allowed the 75-hour requirement. The proposed regulation formally formalizes previous guidance. To reiterate, the 75-hour minimum requirement establishes a regulatory minimum that does not prohibit nurse aide training programs from requiring or providing additional classroom instruction. For example, currently, of the 161 nurse aide training programs, 131 programs require 100 or more hours of training, and five nurse aide programs require 76 to 99 hours of training. Currently, 26 programs have the 75-hour training curriculum. The department recognizes the importance of adequate education, clinical preparation, and demonstrated competency prior to certification. All trained candidates are required to pass the nursing home aide competency exam. To reiterate, this has not changed. In summary, there is no change to establish curriculum or competency requirements, and nothing requires nurse aide training programs to adopt the 75-hour standard. Facility specific training programs may exceed the 75 hours to support student learning and competency development. Reducing the minimum number of required training hours from 100 to 75 without any adjustment to define curriculum requirements will address the CNA shortage while maintaining an adequate level of training to preserve safety and health. Thank you.

Mr. Holt Thank you.

Mr. Holt Questions from the members of the committee?

Mr. Holt Ms. Monroe, and then we'll go to Dr. Soffel.

Ms. Monroe I should say, by the way, that I'm a board President of the Center for Elder Law and Justice, which did submit opposition to this regulation. And just for me, if we're not affecting the content and we're not affecting outcome... What are we doing? To me, it seems that these folks are going to take on more and more and more responsibility as the scope of practice keeps changing. What I don't understand is what are we getting? What are they getting for this? Just less time, but the same content and the same outcomes? I just don't understand that. Can you help me better see what you're referring to?

Ms. Cazer The regulation, if I understand you correctly. This is Carolyn Cazer, Department of Health. If I understand what you're saying, we are simply trying to align state regulations to federal regulations. Currently, the federal regulations are 75 hours.

Ms. Monroe Are we having trouble recruiting for these jobs with the hours the way they are?

Ms. Pergolino Thank you.

Ms. Pergolino This is Kristen Pergolino, Department of Health. I don't have the data to give you any concrete evidence, but we are hearing from the industry that it is difficult. There is a shortage of CNAs. This makes it more marketable, as well as still aligning with the requirements for competency as demonstrated by the federal standards and other states that are also meeting the curriculum requirements. They demonstrated competency and the 75-hour minimum. Thank you.

Mr. Holt Thank you.

Ms. Soffel Good morning. Denise Soffel, committee member and council member. My question is... When you referred to the 100 and whatever it was training programs that require more than 100 hours of training... Is that across the country or is that New York state based?

Ms. Cazer New York, that's New York State.

Ms. Soffel That's New York state based. Do you have any sense of across the county how many states have adopted the 75-hour minimum and how many states require more than that? I mean, will New York be sort of regressing to the mean or will we be...I'm sort of curious.

Ms. Cazer I do not have that data.

Ms. Soffel Okay, because I share some of Ann Monroe's concerns that the job does get more complex as medical conditions get more complex and dumbing down requirements is a little bit scary in this day and age.

Ms. Pergolino This is Kristen Pergolino, Department of Health again. I just want to reiterate the only change is the hours, the competencies, the testing, the training requirements and curriculum are all the same. It's not a matter of reducing the competency that needs to be demonstrated before someone can be certified.

Ms. Monroe Well, maybe the federal guidelines ought to move to the New York State level.

All (Laughing)

Mr. Holt Thank you for your questions, Ms. Soffel and Ms. Monroe.

Mr. Holt Any other questions from the members of the committee or the council?

Mr. Holt We do have one speaker who signed up to speak on this. If I could ask Mamassa Tuneya to come forward, introduce yourself in case I butchered that pronunciation, and we remind you that you have three minutes to talk or to make a presentation, and tying it specifically to the regulation that we're discussing today and I'll give you a warning when you've got one minute remaining.

Ms. Tuneya Good morning. My name is Mamassa Tuneya. I have been a CNA at Troy Center for the last eight years. I am one of the 47,000 1199 SCIU members who work in nursing homes across New York State. I am here today to urge you to vote no on reducing CNA training requirements from 100 hours to 75 hours. As CNAs, we provide most of resident direct care. We help them out, we help them bathe, dress, and move safely. We are trained to maintain residents' dignity, including how to appropriately support those with dementia. We are the first people to notice changes and the first to respond when there's an issue. That responsibility requires knowledge and skill we get from strong training. This proposal assumes that fewer training hours will improve nursing home staffing, but there is no evidence to support that. As someone with first-hand experience, I can tell you that 100 hours is not excessive to learn all of the necessary information and have the self-confidence necessary to provide quality care. I don't believe anyone is choosing not to become a CNA because of an extra 25 hours of training, but I do know that every hour of training helps us care for our residents and keep them safe and uphold their rights. Reducing training means trying to fit the same material into less time and taking away clinical hours. This rushes CNAs through brand new concepts without hands-on experience. That prepares us to prevent residents' harm and give appropriate support. Reducing training, reducing hours sets CNA's up for failure. Our residents should not have to bear the risk of receiving care from unprepared CNA's. On behalf of 1199 SCIU CNA, throughout New York State, I urge you to reject this proposal and maintain the current CNA requirements New York State nursing home workers, residents, and their loved ones deserve regulations that are informed by evidence and support quality care.

All (Clapping)

Mr. Holt Thank you. Thank you for your comments and certainly appreciate the good work that you do.

Mr. Holt Are there other questions from the members of the committee or council?

Mr. Holt That was the only person we had signed up to speak Just make sure that that's still the case.

Mr. Holt Seeing no other questions, I'll call the question.

Mr. Holt All in favor?

All Aye.

Mr. Holt Opposed?

Mr. Holt Dr. Berliner.

Mr. Holt Just as a reminder, this is just for the members of the committee.

Mr. Holt Let's go ahead and call the question again.

Mr. Holt All in favor?

All Aye.

Mr. Holt Opposed?

Mr. Holt Ms. Soffel.

Mr. Holt Thank you. That motion carries and will go on to the full council for its for its review later today. Thank you very much.

Mr. Holt That closes this morning's meeting of Codes.