

# DEPARTMENT OF HEALTH AND MENTAL HYGIENE

Dr. Mary T. Bassett, Commissioner



## WHAT WE DO

The Department of Health and Mental Hygiene (DOHMH) protects and promotes the health and well-being of all New Yorkers. The Department engages with communities to develop and implement robust public health programming and policy recommendations, enforces health regulations, responds to public health emergencies, and provides limited direct health services.

The Department works toward just and fair health outcomes for all New Yorkers. The Department seeks to reduce death and disability from chronic diseases, such as heart disease and cancer, by reducing smoking and the consumption of unhealthy foods and by promoting physical activity. It contracts with community-based organizations to deliver mental health, developmental disability and alcohol and substance use disorder treatment services. It works with health care providers to improve health care delivery and to increase the use of preventive services, such as immunizations, and collaborates with community-based organizations to prevent, detect and treat HIV and other communicable infections. Direct services are provided at four tuberculosis clinics, eight sexual health clinics, one immunization clinic and more than 1,200 public schools. The Department issues birth and death certificates, inspects restaurants and child care centers and protects public safety through immediate response to emergent public health threats. The Department's Early Intervention Program serves infants and toddlers with developmental delays. The Department's surveillance systems provide the basis for cutting edge research grounded in public health principles.

## FOCUS ON EQUITY

The Department has greatly increased its efforts to ensure its programs address disparities and advance health equity. Because these disparities are a direct result of historic disinvestment and structural racism, we must be more deliberate in naming and addressing them. At the cornerstone of these efforts is the Department's Center for Health Equity (CHE). CHE was created to focus its attention on New York City's communities of color, which have been deprived of the necessary resources to achieve optimal health. CHE strengthens the Department's place-based efforts via its three Neighborhood Health Action Centers in East Harlem, Brownsville and Tremont. The Action Centers are part of the City's plan to better link residents in neighborhoods with disproportionately high rates of chronic disease and premature death with local clinical and community services. The Action Centers enable community-based organizations, Health Department staff, and other City agencies to work together to advance neighborhood health.

## OUR SERVICES AND GOALS

### **SERVICE 1 Detect and control infectious diseases.**

- Goal 1a Reduce new cases of HIV and other sexually transmitted diseases.
- Goal 1b Prevent the spread of other infectious diseases.

### **SERVICE 2 Prevent chronic diseases by promoting healthy behaviors and preventive health care.**

- Goal 2a Reduce tobacco use and promote physical activity and healthy eating.
- Goal 2b Improve preventive health care.

### **SERVICE 3 Promote a safe environment.**

- Goal 3a Reduce hazards to children in homes and child care programs.
- Goal 3b Reduce the threat of foodborne illness.
- Goal 3c Reduce animal-related risks to human health.

### **SERVICE 4 Prevent and address mental illness, developmental delays and disabilities, and substance misuse.**

- Goal 4a Reduce the adverse health consequences of substance misuse.
- Goal 4b Facilitate access to services for New Yorkers with or at risk of developing mental illnesses or developmental disabilities.

### **SERVICE 5 Provide high quality and timely service to the public.**

- Goal 5a Provide birth and death certificates to the public quickly and efficiently.

## HOW WE PERFORMED

- The number of reported primary and secondary syphilis cases decreased to 590 in the first quarter of Fiscal 2018 compared to 684 in the first quarter of Fiscal 2017. This decline may be due, in part, to delays in reporting and classifying syphilis cases, as well as to true decreases in syphilis transmission. The Department provides syphilis testing and treatment in the NYC Sexual Health Clinics, monitors reports of syphilis and works to prevent ongoing syphilis transmission by notifying, testing and treating the partners of individuals diagnosed with syphilis.
- The NYC Condom Availability Program distributes condoms to more than 3,500 venues including Neighborhood Health Action Centers and traditional and non-traditional community sites citywide. The number of male condoms distributed during the first four months of Fiscal 2018 declined by 30 percent compared to the same period last year. Condom demand was lower than in recent years during the July-October 2017 period, while more condoms were distributed during the July-October 2016 reporting period as part of the Zika prevention initiative. The Department promotes safer sex through targeted condom distribution, outreach at community events and health fairs, condom education at the Sexual Health Clinics and social marketing and media campaigns. The Department expects annual condom distribution levels to remain consistent with prior years moving forward.
- There was a 23 percent increase in tuberculosis (TB) cases in the first four months of Calendar 2017 compared to the same period in Calendar 2016. The Department has observed increases in multidrug-resistant TB, with 14 cases in Calendar 2017. The Department continues to monitor surveillance data and provide case management to all TB patients and their contacts in New York City. Case management services ensure that providers follow TB care standards and that patients remain in care and adhere to treatment. The Department also screens and treats individuals at high risk for TB disease progression.
- The HPV vaccine series completion percentage continues to improve. In October 2016, the Advisory Committee on Immunization Practices' (ACIP) changed the recommendation for completing the HPV series from three to two doses if the series was initiated prior to age 15 and the two doses were spaced by at least five months. As a result, many patients can now complete the HPV vaccination series with only two doses.
- The number of children found to have elevated blood lead levels declined by nearly 15 percent during the first four months of Fiscal 2018 compared to the same time period last year. The improvement is attributed to multiple factors, including continued reduction of lead paint hazards in housing and primary prevention efforts.
- DOHMH conducted 6,557 day care site inspections during the first four months of Fiscal 2018, compared to 7,108 inspections during the same period in Fiscal 2017. This decrease can be attributed to improved performance by child care providers, resulting in fewer inspection cycles, as well as a slight decrease in the number of home-based child care providers. As of October 2017, the percentage of group child care programs that do not require a compliance inspection increased to 63 percent from 56.6 percent due to better compliance among programs.
- The number of initial pest control inspections increased by 29 percent due to revised requirements under the Neighborhood Rat Reduction Plan, which was launched in July 2017 in three neighborhoods in Manhattan, Brooklyn and the Bronx. The Department performs additional indexing inspections in these targeted areas.
- The rate of compliance inspections found to be rat free increased by five percentage points. The improvement can be attributed to the Rat Reservoir program's emphasis on case management of properties with the most severe problems. Highly trained inspectors work directly with property owners and staff to help them comply with rodent abatement orders. The Department also performs repeat rounds of inspections in problematic areas and offers free Rat Academy training to communities.
- The number of individuals in the Assisted Outpatient Treatment (AOT) program increased by 8.7 percent. Additionally, there was an increase in AOT referrals from the NY State Psychiatric Centers as well as City and State correctional facilities.
- The number of calls to NYC Well increased significantly during the first four months of Fiscal 2018 compared to the same period last year. Increased outreach, including an advertising campaign for NYC Well, began in October 2016. The program's capacity also increased to include chat and text message contacts.

- Average response time for birth certificate requests increased by 15 percent from 1.6 days in the first four months of Fiscal 2017 to 1.9 days for the first four months of Fiscal 2018. Processing times remained within target levels. During the first four months of Fiscal 2018, staff and resources were dedicated to the launch of a new system for registering births and deaths, which impacted processing times for birth certificate orders.
- Compared to the same period in Fiscal 2017, the number of summonses issued increased by 77 percent and the percentage of violations upheld declined by six percentage points during the first four months of Fiscal 2018. The increase in summonses issued is related in part to more cooling tower summonses issued in September and October of 2017 to address non-compliance.

## SERVICE 1 Detect and control infectious diseases.

**Goal 1a** Reduce new cases of HIV and other sexually transmitted diseases.

Performance Indicators	Actual			Target		4-Month Actual	
	FY15	FY16	FY17	FY18	FY19	FY17	FY18
★ New HIV diagnoses (CY Preliminary)	2,718	2,493	2,279	↓	↓	584	569
★ Patients enrolled in Ryan White with current antiretroviral (ARV) prescription at last assessment (%)	87.7%	86.2%	90.1%	93.0%	94.0%	90.0%	95.2%
★ Syphilis cases	1,315	1,804	1,808	↓	↓	684	590
Male condoms distributed (000)	36,604	35,666	35,220	37,828	37,828	12,644	8,838
★ Critical Indicator	"NA" Not Available		↑↓ Directional Target	* None			

**Goal 1b** Prevent the spread of other infectious diseases.

Performance Indicators	Actual			Target		4-Month Actual	
	FY15	FY16	FY17	FY18	FY19	FY17	FY18
★ New tuberculosis cases (CY)	585	575	565	↓	↓	159	195
Seniors, aged 65+, who reported receiving a flu shot in the last 12 months (%) (CY)	64.2%	65.5%	65.4%	68.0%	68.0%	NA	NA
★ Children aged 19-35 months with up-to-date immunizations (%)	73.0%	74.7%	75.1%	76.0%	77.0%	74.6%	74.7%
★ Children in the public schools who are in compliance with required immunizations (%)	99.0%	98.8%	98.8%	99.0%	99.0%	92.4%	93.6%
★ HPV vaccine series completion (%)	38.5%	44.2%	56.6%	60.0%	64.0%	52.2%	58.5%
★ Critical Indicator	"NA" Not Available		↑↓ Directional Target	* None			

## SERVICE 2 Prevent chronic diseases by promoting healthy behaviors and preventive health care.

**Goal 2a** Reduce tobacco use and promote physical activity and healthy eating.

Performance Indicators	Actual			Target		4-Month Actual	
	FY15	FY16	FY17	FY18	FY19	FY17	FY18
★ Adults who smoke (%) (CY)	13.9%	14.3%	13.1%	12.8%	12.6%	NA	NA
Adults who are obese (%) (CY)	24.7%	24.1%	23.6%	23.5%	23.3%	NA	NA
Adults who consume an average of one or more sugar-sweetened beverages per day (%) (CY)	22.5%	23.7%	22.7%	21.8%	20.9%	NA	NA
★ Critical Indicator	"NA" Not Available		↑↓ Directional Target	* None			

**Goal 2b** Improve preventive health care.

Performance Indicators	Actual			Target		4-Month Actual	
	FY15	FY16	FY17	FY18	FY19	FY17	FY18
Adult New Yorkers without health insurance (%) (CY)	13.8%	12.6%	10.9%	10.0%	9.5%	NA	NA
Adult patients with controlled blood pressure (%) (CY)	66.8%	67.2%	67.1%	70.0%	70.0%	NA	NA
Adults, aged 50+, who received a colonoscopy in the past ten years (%) (CY)	69.9%	69.9%	68.5%	71.4%	71.4%	NA	NA
★ Asthma-related emergency department visits among children ages 5-17 (per 10,000 children) (CY) (preliminary)	231.6	NA	NA	↓	↓	NA	NA
★ Infant mortality rate (per 1,000 live births) (CY)	4.2	4.3	4.1	4.2	4.2	NA	NA
★ Critical Indicator	"NA" Not Available	↑↓ Directional Target	* None				

**SERVICE 3** Promote a safe environment.

**Goal 3a** Reduce hazards to children in homes and child care programs.

Performance Indicators	Actual			Target		4-Month Actual	
	FY15	FY16	FY17	FY18	FY19	FY17	FY18
★ Childhood blood lead levels - new cases among children aged 6 months to less than six years with blood lead levels greater than or equal to 10 micrograms per deciliter	818	784	708	↓	↓	297	253
Day care initial site inspections	21,800	22,032	21,478	*	*	7,108	6,557
★ Child care inspections that do not require a compliance inspection (%)	65.9%	62.0%	57.4%	↑	↑	56.6%	63.1%
★ Critical Indicator	"NA" Not Available	↑↓ Directional Target	* None				

**Goal 3b** Reduce the threat of foodborne illness.

Performance Indicators	Actual			Target		4-Month Actual	
	FY15	FY16	FY17	FY18	FY19	FY17	FY18
Restaurants inspected (%)	99.9%	99.8%	87.5%	100.0%	100.0%	43.1%	41.2%
★ Restaurants scoring an 'A' grade (%)	93.0%	92.7%	93.3%	↑	↑	92.2%	93.4%
★ Critical Indicator	"NA" Not Available	↑↓ Directional Target	* None				

**Goal 3c** Reduce animal-related risks to human health.

Performance Indicators	Actual			Target		4-Month Actual	
	FY15	FY16	FY17	FY18	FY19	FY17	FY18
Initial pest control inspections (000)	97	98	146	*	*	42	55
Initial inspections with active rat signs (ARS) (%)	10.7%	13.9%	12.2%	*	*	11.9%	12.1%
★ Compliance inspections found to be rat free (%)	46.8%	47.8%	49.1%	↑	↑	47.5%	52.4%
Dogs licensed (000)	83.0	85.0	84.6	105.0	105.0	86.5	87.6
★ Critical Indicator	"NA" Not Available	↑↓ Directional Target	* None				

## SERVICE 4 Prevent and address mental illness, developmental delays and disabilities, and substance misuse.

**Goal 4a** Reduce the adverse health consequences of substance misuse.

Performance Indicators	Actual			Target		4-Month Actual	
	FY15	FY16	FY17	FY18	FY19	FY17	FY18
Buprenorphine patients (CY)	13,150	13,293	13,612	16,022	16,022	9,265	9,412
★ Deaths from unintentional drug overdose (CY)	793	939	1,374	↓	↓	NA	NA
★ Critical Indicator	"NA" Not Available		↑↓ Directional Target	* None			

**Goal 4b** Facilitate access to services for New Yorkers with or at risk of developing mental illnesses or developmental disabilities.

Performance Indicators	Actual			Target		4-Month Actual	
	FY15	FY16	FY17	FY18	FY19	FY17	FY18
Individuals in the assisted outpatient mental health treatment program	2,176	2,236	2,368	*	*	1,667	1,812
Units of supportive housing available to persons with serious mental illness (000)	5.7	6.0	6.2	7.0	7.5	6.0	6.2
New children receiving services from the Early Intervention Program (000)	14.3	14.4	14.0	*	*	4.7	4.7
Calls to NYC Well (000)	92.0	97.5	170.4	*	*	49.7	105.8
★ Critical Indicator	"NA" Not Available		↑↓ Directional Target	* None			

## SERVICE 5 Provide high quality and timely service to the public.

**Goal 5a** Provide birth and death certificates to the public quickly and efficiently.

Performance Indicators	Actual			Target		4-Month Actual	
	FY15	FY16	FY17	FY18	FY19	FY17	FY18
★ Average response time for birth certificates by mail/online (days)	1.3	1.8	1.6	3.0	3.0	1.6	1.9
★ Average response time for death certificates by mail/online (days)	1.7	2.0	1.5	3.0	3.0	1.7	1.8
★ Critical Indicator	"NA" Not Available		↑↓ Directional Target	* None			

## AGENCY-WIDE MANAGEMENT

Performance Indicators	Actual			Target		4-Month Actual	
	FY15	FY16	FY17	FY18	FY19	FY17	FY18
Workplace injuries reported	104	104	116	*	*	43	31
Collisions involving City vehicles	29	28	28	*	*	11	12
All summonses issued	64,625	59,067	57,780	*	*	22,349	39,533
Violations admitted to or upheld at ECB (%)	70.9%	70.0%	75.2%	*	*	73.6%	67.2%
★ Critical Indicator	"NA" Not Available		↑↓ Directional Target	* None			

## AGENCY CUSTOMER SERVICE

Performance Indicators	Actual			Target		4-Month Actual	
	FY15	FY16	FY17	FY18	FY19	FY17	FY18
Customer Experience							
Completed requests for interpretation	12,475	14,986	18,486	*	*	NA	NA
Letters responded to in 14 days (%)	36%	60%	44%	50%	50%	22%	58%
E-mails responded to in 14 days (%)	58%	72%	73%	75%	75%	52%	81%
Average wait time to speak with a customer service agent (minutes)	8	1	1	10	10	NA	NA
CORE facility rating	92	81	96	85	85	NA	NA
Calls answered in 30 seconds (%)	82%	78%	73%	80%	80%	75%	74%
★ Critical Indicator      "NA" Not Available      ↑↓ Directional Target      * None							

Performance Indicators	Actual			Target		4-Month Actual	
	FY15	FY16	FY17	FY18	FY19	FY17	FY18
Response to 311 Service Requests (SRs)							
Percent meeting time to first action - Rodent (14 days)	73%	73%	75%	73%	73%	74%	77%
Percent meeting time to first action - Food Establishment (14 days)	97%	92%	95%	90%	90%	96%	94%
Percent meeting time to first action - Food Poisoning (3 days)	84%	94%	98%	90%	90%	96%	99%
Percent meeting time to first action - Indoor Air Quality (14 days)	99%	99%	98%	95%	95%	99%	99%
Percent meeting time to first action - Smoking Complaint (14 days)	86%	81%	92%	75%	75%	82%	83%
★ Critical Indicator      "NA" Not Available      ↑↓ Directional Target      * None							

## AGENCY RESOURCES

Resource Indicators	Actual			Sept. 2017 MMR Plan	Updated Plan	Plan	4-Month Actual	
	FY15	FY16	FY17	FY18	FY18 <sup>1</sup>	FY19 <sup>1</sup>	FY17	FY18
Expenditures (\$000,000) <sup>2</sup>	\$1,495.5	\$1,450.7	\$1,622.4	\$1,612.1	\$1,676.8	\$1,611.8	\$884.3	\$934.7
Revenues (\$000,000)	\$31.6	\$60.0	\$31.0	\$31.4	\$30.4	\$30.4	\$10.0	\$10.1
Personnel	5,691	5,858	6,577	6,606	6,926	6,644	6,008	6,581
Overtime paid (\$000,000)	\$11.0	\$11.8	\$10.9	\$6.5	\$8.7	\$6.2	\$3.8	\$3.2
Capital commitments (\$000,000)	\$49.9	\$23.9	\$21.4	\$163.3	\$168.9	\$161.6	\$5.6	\$3.1
Human services contract budget (\$000,000)	\$725.2	\$626.3	\$651.5	\$696.5	\$666.3	\$697.7	\$182.7	\$202.3
<sup>1</sup> February 2018 Financial Plan <sup>2</sup> Expenditures include all funds      "NA" - Not Available								

## SPENDING AND BUDGET INFORMATION

Where possible, the relationship between an agency's goals and its expenditures and planned resources, by budgetary unit of appropriation (UA), is shown in the 'Applicable MMR Goals' column. Each relationship is not necessarily exhaustive or exclusive. Any one goal may be connected to multiple UAs, and any UA may be connected to multiple goals.

Unit of Appropriation	Expenditures FY17 <sup>1</sup> (\$000,000)	February 2018 Financial Plan FY18 <sup>2</sup> (\$000,000)	Applicable MMR Goals <sup>3</sup>
<b>Personal Services - Total</b>	<b>\$451.9</b>	<b>\$486.9</b>	
101 - Health Administration	\$55.9	\$55.4	All
102 - Disease Control	\$92.3	\$102.8	1a, 1b
103 - Family and Child Health and Health Services	\$117.2	\$120.5	1b, 2b
104 - Environmental Health Services	\$57.8	\$59.3	2b, 3a, 3b, 3c
105 - Early Intervention	\$15.2	\$17.1	4b
106 - Office of Chief Medical Examiner	\$53.1	\$59.5	Refer to table in OCME chapter
107 - Prevention and Primary Care	\$13.5	\$14.7	2a, 2b
108 - Mental Hygiene Management Services	\$30.5	\$40.2	4a, 4b
109 - Epidemiology	\$16.4	\$17.6	2a, 2b, 5a
<b>Other Than Personal Services - Total</b>	<b>\$1,170.5</b>	<b>\$1,189.9</b>	
111 - Health Administration	\$126.2	\$116.0	All
112 - Disease Control	\$209.8	\$204.1	1a, 1b
113 - Family and Child Health and Health Services	\$64.6	\$59.2	1b, 2b
114 - Environmental Health Services	\$40.3	\$38.4	2b, 3a, 3b, 3c
115 - Early Intervention	\$245.8	\$201.8	4b
116 - Office of Chief Medical Examiner	\$18.8	\$25.8	Refer to table in OCME chapter
117 - Prevention and Primary Care	\$60.8	\$52.8	2a, 2b
118 - Mental Hygiene Management Services	\$49.1	\$73.9	4a, 4b
119 - Epidemiology	\$5.3	\$5.3	2a, 2b, 5a
120 - Mental Health Services	\$243.7	\$288.8	4b
121 - Developmental Disability	\$14.7	\$15.8	NA
122 - Chemical Dependency and Health Promotion	\$91.3	\$108.1	4a
<b>Agency Total</b>	<b>\$1,622.4</b>	<b>\$1,676.8</b>	

<sup>1</sup>Comprehensive Annual Financial Report (CAFR) for the Fiscal Year ended June 30, 2017. Includes all funds.    <sup>2</sup>Includes all funds.    <sup>3</sup>Refer to agency goals listed at front of chapter.

## NOTEWORTHY CHANGES, ADDITIONS OR DELETIONS

- DOHMH revised the Fiscal 2018 target for the indicator 'Patients enrolled in Ryan White with current antiretroviral (ARV) prescription at last assessment (%)' to be more ambitious.
- The previously published Fiscal 2017 figure for the indicator 'Units of supportive housing available to persons with serious mental illness (000)' has been corrected. The Fiscal 2018 target for this indicator was revised according to the corrected Fiscal 2017 total.
- The Department revised the Fiscal 2017 figure for the indicator 'Syphilis cases' to reflect current data.
- The indicator 'New buprenorphine patients' has been replaced with 'Buprenorphine patients' to include the full scope of this program.
- Recent figures for the indicator 'Asthma-related emergency department visits among children ages 5-17 (per 10,000 children) (CY) (preliminary)' are currently unavailable due to a data system transition. The Department is conducting analyses to determine how best to measure trends in asthma emergency department visits. Calendar 2016 figures will be available in the Fiscal 2018 Mayor's Management Report.
- DOHMH revised the 4-month Fiscal 2017 figure for 'Letters responded to in 14 days (%)'.

## ADDITIONAL RESOURCES

For additional information go to:

- Data & statistics:  
<http://www1.nyc.gov/site/doh/data/data-sets/data-sets-and-tables.page>

For more information on the agency, please visit: [www.nyc.gov/health](http://www.nyc.gov/health).