

DEPARTMENT OF HEALTH AND MENTAL HYGIENE

Dr. Oxiris Barbot, 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, improving the control of blood pressure and 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's programs work to address and advance health equity. The City must be deliberate in naming and addressing health inequities rooted in historical and contemporary injustices and discrimination, including racism, in order to move forward in getting better health outcomes faster. At the cornerstone of these efforts is the Department's focus on centering communities, bridging public health and healthcare delivery as well as infusing mental health into our public health initiatives. It envisions a city where every New Yorker lives in a thriving neighborhood with equitable access to resources that will support their health and their community's health. The Department promotes equity by using data and storytelling to highlight injustices, inform policy, systems and environmental change and by implementing neighborhood-based programs and strategies to foster health. The Department oversees Neighborhood Health Action Centers in East Harlem, Tremont and Brownsville that offer coordinated health and social services, as well as community programs, under one roof. The Neighborhood Health Action Centers also provide a central location for people to connect and plan for improving the health of their neighborhoods.

OUR SERVICES AND GOALS

SERVICE 1 Detect and control infectious diseases.

- Goal 1a Reduce new cases of HIV and other sexually transmitted infections.
- 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 new HIV diagnoses in New York City continued to decline with a 13 percent decrease from the first quarter of Calendar 2019 compared to the first quarter of Calendar 2018. This decrease is in line with the key goals and wide-ranging initiatives of the City's "Ending the Epidemic" initiative.
- The number of reported primary and secondary syphilis cases decreased to 598 in the first four months of Fiscal 2020 compared to 716 in the first four months of Fiscal 2019. This slight decline may be due, in part, to true decreases in syphilis transmission as well as delays in reporting and classifying syphilis cases. 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.
- There was a 42.1 percent increase in the number of male condoms distributed during the first quarter of Fiscal 2020 compared to the same period last year. The sharp increase is attributed to the April 2019 launch of the NYC Safer Sex Portal, the Department's new online safer sex product ordering system. The portal streamlines ordering of NYC Condoms and safer sex products, as well as enables partners to place recurring orders and access important public health toolkits. Additionally, the NYC Safer Sex Portal automation has made reviewing incoming orders more efficient, allowing DOHMH staff to focus on improving customer service and targeted recruitment.
- There was a 9.1 percent decrease in tuberculosis (TB) cases in the first four months of Calendar 2019 compared to the same period in Calendar 2018. The number of TB cases has largely plateaued in the last 10 years, but reporting of TB cases fluctuates month-to-month and is not consistent throughout the year. The Department continues to screen and treat individuals infected with latent TB infection, as well as provide case management to all TB patients and their contacts in New York City.
- In the first quarter of Calendar 2019, there was an 11.9 percent decrease in blood lead levels from the same period in the prior year, with 1,135 children under the age of 18 with blood lead levels of five micrograms per deciliter or greater. This decrease may be due to multiple factors, including continued reduction of lead-based paint hazards in homes and lead poisoning prevention education efforts aimed at health care providers, community-based organizations and families. There was a similar trend in children under the age of six, with a 12.1 percent decrease during the first quarter of Calendar 2019 compared to the same period in 2018.
- In the first four months of Fiscal 2020, DOHMH performed 2,626 full inspections of group child care centers, 9.7 percent fewer than in the same time period in Fiscal 2019. This decrease can be attributed primarily to the Department's participation in the response to the measles outbreak, when the Bureau of Child Care (BCC) inspection and programmatic resources were diverted from routine activity. Additionally, more camps were permitted this past summer, requiring more inspections by BCC public health sanitarians. The program expects to meet all inspection targets in Fiscal 2020.
- In the first four months of Fiscal 2020, DOHMH conducted 5,674 fewer initial pest control inspections compared to the same period in Fiscal 2019. The 10.8 percent decrease can be attributed to conducting fewer initial inspections in lower risk areas where failure rates have been historically low and focusing proactive inspections in the Neighborhood Rat Reduction Initiative (NRFI) areas.
- The units of supportive housing available to persons with or at risk for developing mental health and substance use disorders increased 9.3 percent from 8,600 during the first four months of Fiscal 2019 to 9,400 in the current reporting period. This increase was anticipated and is on track to meet the Fiscal 2020 target. The NYC 15/15 initiative opened 230 new units during this time period and will develop 15,000 units of supportive housing in NYC over 15 years.
- Processing times for birth certificates for the first four months of Fiscal 2020 averaged 3.1 days, a 24.5 percent increase from an average of 2.5 days during the same period last year. The volume of customer orders increases sharply during summer months as customers travel, and during the spring, when birth certificates are ordered as part of tax preparation. Overall customer demand for birth certificates continues to increase to record levels, driven mainly by the October 2020 implementation of the federal Real ID policy. Other vital records jurisdictions and DMV offices also report significant increases in customer volume related to the upcoming policy. Processing times for death certificates for the first four months of Fiscal 2020 averaged 2.1 days, which is ahead of the three-day target.

SERVICE 1 Detect and control infectious diseases.

Goal 1a

Reduce new cases of HIV and other sexually transmitted infections.

Performance Indicators	Actual			Target		4-Month Actual	
	FY17	FY18	FY19	FY20	FY21	FY19	FY20
★ New HIV diagnoses (CY Preliminary)	2,279	2,157	1,917	↓	↓	494	430
★ Patients enrolled in Ryan White Part A with current antiretroviral (ARV) prescription at last assessment (%)	90.1%	95.8%	96.1%	94.0%	96.0%	94.9%	96.0%
★ Syphilis cases	1,912	1,936	1,974	↓	↓	716	598
Male condoms distributed (000)	35,220	20,917	19,076	34,045	25,000	6,577	9,346
★ Critical Indicator	"NA" Not Available		↑↓ Directional Target	* None			

Goal 1b

Prevent the spread of other infectious diseases.

Performance Indicators	Actual			Target		4-Month Actual	
	FY17	FY18	FY19	FY20	FY21	FY19	FY20
★ New tuberculosis cases (CY)	565	613	559	↓	↓	186	169
Seniors, aged 65+, who reported receiving a flu shot in the last 12 months (%) (CY)	65.4%	66.1%	62.8%	68.0%	68.0%	NA	NA
★ Children aged 19-35 months with up-to-date immunizations (%)	75.1%	74.1%	72.9%	77.0%	75.0%	73.0%	73.7%
★ Children in the public schools who are in compliance with required immunizations (%)	98.8%	99.0%	98.9%	99.0%	99.0%	93.9%	95.2%
★ HPV vaccine series completion (%)	56.6%	61.1%	63.2%	67.0%	70.0%	62.5%	64.7%
★ 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	
	FY17	FY18	FY19	FY20	FY21	FY19	FY20
★ Adults who smoke (%) (CY)	13.1%	13.4%	12.8%	12.4%	12.0%	NA	NA
Adults with obesity (%) (CY)	23.6%	25.1%	25.7%	24.4%	23.0%	NA	NA
Adults who consume an average of one or more sugar-sweetened beverages per day (%) (CY)	22.7%	23.0%	23.6%	21.3%	19.0%	NA	NA
★ Critical Indicator	"NA" Not Available		↑↓ Directional Target	* None			

Goal 2b

Improve preventive health care.

Performance Indicators	Actual			Target		4-Month Actual	
	FY17	FY18	FY19	FY20	FY21	FY19	FY20
Adult New Yorkers without health insurance (%) (CY)	10.9%	11.8%	11.6%	10.0%	10.5%	NA	NA
Adult patients with controlled blood pressure (%) (CY)	67.0%	67.3%	67.7%	68.2%	68.7%	NA	NA
Adults, aged 50+, who received a colonoscopy in the past ten years (%) (CY)	68.5%	69.9%	69.1%	71.4%	71.4%	NA	NA
★ Asthma-related emergency department visits among children ages 5-17 (per 10,000 children) (CY) (preliminary)	217.0	NA	NA	↓	↓	NA	NA
★ Infant mortality rate (per 1,000 live births) (CY)	4.1	4.3	3.9	4.1	4.1	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	
	FY17	FY18	FY19	FY20	FY21	FY19	FY20
★ Childhood blood lead levels - number of children under the age of 18 with blood lead levels of 5 micrograms per deciliter or greater (CY)	6,274	5,317	4,717	↓	↓	1,289	1,135
★ Childhood blood lead levels - number of children under the age of 6 with blood lead levels of 5 micrograms per deciliter or greater (CY)	4,928	4,261	3,866	↓	↓	1,033	908
★ Active group child care center full inspections	6,732	9,286	8,624	*	*	2,908	2,626
★ Active group child care center initial inspections that do not require a compliance inspection (%)	50.7%	64.3%	72.5%	↑	↑	72.7%	75.2%
★ Critical Indicator	"NA" Not Available	↑↓ Directional Target	* None				

Goal 3b Reduce the threat of foodborne illness.

Performance Indicators	Actual			Target		4-Month Actual	
	FY17	FY18	FY19	FY20	FY21	FY19	FY20
Restaurants inspected (%)	87.5%	99.5%	99.5%	100.0%	100.0%	46.5%	46.9%
★ Restaurants scoring an 'A' grade (%)	93.3%	93.7%	93.6%	↑	↑	92.4%	92.7%
★ Critical Indicator	"NA" Not Available	↑↓ Directional Target	* None				

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

Performance Indicators	Actual			Target		4-Month Actual	
	FY17	FY18	FY19	FY20	FY21	FY19	FY20
Initial pest control inspections (000)	146	175	178	*	*	53	47
Initial inspections with active rat signs (ARS) (%)	12.2%	11.5%	11.7%	*	*	12.6%	16.0%
★ Compliance inspections found to be rat free (%)	49.1%	53.3%	49.7%	↑	↑	49.9%	48.2%
Dogs licensed (000)	84.6	89.2	85.8	105.0	105.0	84.8	92.2
★ 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	
	FY17	FY18	FY19	FY20	FY21	FY19	FY20
Buprenorphine patients (CY)	13,612	14,098	15,174	16,022	16,919	10,499	10,584
★ Deaths from unintentional drug overdose (CY)	1,413	1,482	1,444	↓	↓	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	
	FY17	FY18	FY19	FY20	FY21	FY19	FY20
Individuals in the assisted outpatient mental health treatment program	2,368	2,517	2,476	*	*	2,025	1,944
Units of supportive housing available to persons with or at risk for developing serious mental health and substance use disorders (000)	7.8	8.4	9.1	9.7	10.4	8.6	9.4
New children receiving services from the Early Intervention Program (000)	14.0	13.8	13.8	*	*	4.8	4.8
★ 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	
	FY17	FY18	FY19	FY20	FY21	FY19	FY20
★ Average response time for birth certificates by mail/online (days)	1.6	1.9	6.5	3.0	3.0	2.5	3.1
★ Average response time for death certificates by mail/online (days)	1.5	1.7	2.8	3.0	3.0	2.0	2.1
★ Critical Indicator	"NA" Not Available		↕ Directional Target	* None			

AGENCY-WIDE MANAGEMENT

Performance Indicators	Actual			Target		4-Month Actual	
	FY17	FY18	FY19	FY20	FY21	FY19	FY20
Workplace injuries reported	116	137	144	*	*	49	43
Collisions involving City vehicles	28	47	24	*	*	10	11
ECB violations received at the Office of Administrative Trials and Hearings	34,973	68,228	38,339	*	*	15,379	12,404
ECB violations admitted to or upheld at the Office of Administrative Trials and Hearings (%)	28.9%	37.1%	54.8%	*	*	44.7%	74.8%
★ Critical Indicator	"NA" Not Available		↕ Directional Target	* None			

AGENCY CUSTOMER SERVICE

Performance Indicators	Actual			Target		4-Month Actual	
	FY17	FY18	FY19	FY20	FY21	FY19	FY20
Customer Experience							
Completed requests for interpretation	18,495	13,377	27,528	*	*	8,277	13,735
Letters responded to in 14 days (%)	44%	68%	74%	70%	70%	73%	71%
E-mails responded to in 14 days (%)	73%	86%	87%	80%	80%	87%	86%
Average wait time to speak with a customer service agent (minutes)	1	1	1	10	10	NA	NA
CORE facility rating	96	94	NA	85	85	NA	NA
Calls answered in 30 seconds (%)	73%	80%	70%	80%	80%	83%	63%
★ Critical Indicator	"NA" Not Available		↕ Directional Target	* None			

Performance Indicators	Actual			Target		4-Month Actual	
	FY17	FY18	FY19	FY20	FY21	FY19	FY20
Response to 311 Service Requests (SRs)							
Percent meeting time to first action - Rodent (14 days)	75%	81%	83%	73%	73%	83%	85%
Percent meeting time to first action - Food Establishment (14 days)	95%	95%	95%	90%	90%	96%	86%
Percent meeting time to first action - Food Poisoning (3 days)	98%	98%	100%	90%	90%	99%	99%
Percent meeting time to first action - Indoor Air Quality (14 days)	98%	98%	98%	95%	95%	99%	99%
Percent meeting time to first action - Smoking Complaint (14 days)	92%	60%	65%	75%	75%	74%	85%
★ Critical Indicator	"NA" Not Available		↕ Directional Target	* None			

AGENCY RESOURCES

Resource Indicators	Actual			Sept. 2019 MMR Plan	Updated Plan	Plan	4-Month Actual	
	FY17	FY18	FY19	FY20	FY20 ¹	FY21 ¹	FY19	FY20
Expenditures (\$000,000) ²	\$1,622.4	\$1,699.4	\$1,782.8	\$1,724.5	\$1,860.3	\$1,687.3	\$1,023.1	\$1,042.1
Revenues (\$000,000)	\$31.0	\$33.5	\$34.1	\$30.4	\$30.8	\$30.3	\$10.5	\$11.8
Personnel	6,577	6,858	6,935	6,726	6,973	6,976	6,819	6,773
Overtime paid (\$000,000)	\$10.9	\$11.0	\$13.3	\$5.3	\$9.6	\$5.3	\$3.7	\$3.8
Capital commitments (\$000,000)	\$21.4	\$17.2	\$67.1	\$103.5	\$116.6	\$182.7	\$8.1	\$15.6
Human services contract budget (\$000,000)	\$651.5	\$682.8	\$720.3	\$750.8	\$806.5	\$724.1	\$212.8	\$259.8
¹ January 2020 Financial Plan ² 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 FY19 ¹ (\$000,000)	January 2020 Financial Plan FY20 ² (\$000,000)	Applicable MMR Goals ³
Personal Services - Total	\$531.6	\$537.5	
101 - Health Administration	\$64.9	\$59.8	All
102 - Disease Control	\$102.3	\$104.4	1a, 1b
103 - Family and Child Health and Health Equity	\$137.0	\$126.9	1b, 2b
104 - Environmental Health Services	\$68.2	\$71.6	2b, 3a, 3b, 3c
105 - Early Intervention	\$15.4	\$16.2	4b
106 - Office of Chief Medical Examiner	\$63.1	\$70.0	Refer to table in OCME chapter
107 - Prevention and Primary Care	\$15.6	\$17.1	2a, 2b
108 - Mental Hygiene Management Services	\$45.8	\$53.5	4a, 4b
109 - Epidemiology	\$19.1	\$18.0	2a, 2b, 5a
Other Than Personal Services - Total	\$1,251.2	\$1,322.9	
111 - Health Administration	\$137.4	\$128.3	All
112 - Disease Control	\$186.3	\$192.0	1a, 1b
113 - Family and Child Health and Health Equity	\$65.5	\$63.6	1b, 2b
114 - Environmental Health Services	\$36.3	\$36.8	2b, 3a, 3b, 3c
115 - Early Intervention	\$270.8	\$261.7	4b
116 - Office of Chief Medical Examiner	\$21.6	\$25.6	Refer to table in OCME chapter
117 - Prevention and Primary Care	\$62.2	\$61.3	2a, 2b
118 - Mental Hygiene Management Services	\$70.1	\$52.0	4a, 4b
119 - Epidemiology	\$4.3	\$5.2	2a, 2b, 5a
120 - Mental Health Services	\$267.7	\$362.0	4b
121 - Developmental Disability	\$15.0	\$16.8	*
122 - Chemical Dependency and Health Promotion	\$113.9	\$117.5	4a
Agency Total	\$1,782.8	\$1,860.3	
¹ Comprehensive Annual Financial Report (CAFR) for the Fiscal Year ended June 30, 2019. Includes all funds. ² Includes all funds. ³ Refer to agency goals listed at front of chapter. "NA" Not Available * None			

NOTEWORTHY CHANGES, ADDITIONS OR DELETIONS

- The Fiscal 2017 total for 'Syphilis cases' has been revised from 1910 to 1912.
- The Department revised Fiscal 2020 targets for the following indicators: 'Patients enrolled in Ryan White Part A with current antiretroviral (ARV) prescription at last assessment (%)'; 'Adults who smoke (%) (CY)'; 'Adults with obesity (%) (CY)'; 'Adults who consume an average of one or more sugar-sweetened beverage per day (%) (CY)'; 'Adult patients with controlled blood pressure (%) (CY)'; and 'Infant mortality rate (per 1,000 live births) (CY).'
- The indicator 'Units of supportive housing available to persons at risk for developing serious mental health and substance use disorders (000)' has been revised to 'Units of supportive housing available to persons with or at risk for developing serious mental health and substance use disorders (000).'

ADDITIONAL RESOURCES

For additional information go to:

- Take Care New York 2020
<https://www1.nyc.gov/assets/doh/downloads/pdf/tcny/tcny-2020.pdf>.

For more information on the agency, please visit: www.nyc.gov/health.

