
March 2006

IBO's Programmatic Review of the 2007 Preliminary Budget

*Department of Health
and Mental Hygiene
(DOHMH)*

IBO

New York City
Independent Budget Office

Ronnie Lowenstein, Director
George Sweeting, Deputy Director
Preston Niblack, Deputy Director
Frank Posillico, Deputy Director
110 William St., 14th Floor . New York, NY 10038
Tel. (212) 442-0632 . Fax (212) 442-0350
e-mail: ibo@ibo.nyc.ny.us . <http://www.ibo.nyc.ny.us>

Introductory Note

IBO's programmatic reviews of the 2007 preliminary budgets of selected city agencies is intended to assist the public and elected officials better understand the allocation of budgetary resources to city services by presenting agency budgets in a way that is more closely aligned with the actual programs, functions, and services of major city agencies.

The current city budget presentation inhibits understanding and participation in three ways.

First, agency budgets, organized into broad *units of appropriation*, do not easily allow users to understand how much money is being spent from one year to the next on the programs and services that citizens and their elected representatives care about—programs such as job training, childhood lead-poisoning prevention, HIV/AIDS prevention and treatment, after-school programs, immigrant services, affordable housing construction, and recreation programs.

Second, budget proposals are presented in terms of Financial Plan changes, rather than in terms of year-to-year comparisons. A proposed cut, or “PEG,” of \$1 million in a program is presented without information on how much was previously projected for spending on that program in previous Financial Plans, and whether the \$1 million “cut” would leave spending lower, higher, or the same as previous years' spending levels. This presentation often manifests itself in annual debates over “hidden cuts” and what has been “baselined” in the Financial Plan. This manner of presenting the budget makes it difficult to understand the consequences for agency programs of budgetary decisions.

Finally, it is virtually impossible to link spending decisions to program results. Although at one time the city was a trailblazer in performance reporting, the lack of linkage between performance data reported in the Mayor's Management Report and elsewhere, and clear spending information, makes it difficult for citizens, elected officials, and even agency managers to know what they are getting for their money and to evaluate alternatives. Our programmatic budget presentations integrate existing performance data from the Mayor's Management Report, Capstat, and other sources produced by the Mayor's office alongside spending figures, to provide a unified presentation of both spending and performance.

Our goal in preparing these budget reviews has been to hew as closely as possible to how the agencies themselves present their organization, programs, and services, on their official Web sites and other sources, including using the agencies' own language to describe programs in most cases. While we have sought, and in most cases received, considerable input from agencies in the preparation of the program budget reviews, our presentations are not necessarily how the Mayor's budget office or the agencies themselves would present their budgets, were they to do so in programmatic terms. Nonetheless, we think that our presentations can be instructive and point the way toward how to improve understanding of the city's budget in a way that enhances public participation in the budget process.

IBO will periodically update our program budgets. We will continue to separately issue our analysis of the Preliminary Budget, including of selected agency budgets, as we have every year as required by City Charter section 246.

We welcome your comments or questions, which you may direct to IBO at (212) 442-0632, or by e-mail to ibo@ibo.nyc.ny.us.

Department of Health and Mental Hygiene

MISSION

The mission of the Department of Health and Mental Hygiene (DOHMH) is to protect and promote the health and mental health of all New Yorkers, to support the recovery of individuals with mental illness and chemical dependencies, and to promote the realization of the full potential for individuals with mental retardation and developmental disabilities.

AGENCY DESCRIPTION

The Department of Health and Mental Hygiene provides mental health services, mental retardation and developmental disabilities services, chemical dependency prevention and treatment, and Early Intervention services to developmentally delayed infants and toddlers. DOHMH's community-based services include three District Public Health Offices, seven walk-in immunization clinics, 10 TB centers, 10 clinics treating sexually transmitted diseases (STD), and health and mental health services in the City's adult correctional facilities.

FIVE-YEAR EXPENDITURE TRENDS BY PROGRAM AREA

Department of Health and Mental Hygiene					
<i>Dollars in millions</i>	2003 Actual Expenses	2004 Actual Expenses	2005 Actual Expenses	2006 January Plan	2007 Preliminary Budget
Spending by Program Area					
Disease Prevention and Treatment	\$ 261.8	\$ 278.8	\$ 278.2	\$ 313.8	\$ 275.3
Environmental Health Services	53.1	57.1	63.2	74.0	62.6
Personal and Community Health Services	98.5	104.4	123.3	131.8	106.1
Health Insurance and Health Care Access	169.7	156.3	154.9	164.4	162.0
Mental Health Services	726.7	768.5	714.8	755.7	761.6
Office of the Chief Medical Examiner	52.6	39.4	39.4	49.1	52.5
Administration	66.0	66.2	69.7	75.2	66.1
Unallocated Financial Plan Savings					(0.9)
TOTAL	1,428.5	1,470.6	1,443.5	1,563.9	1,485.4
Spending by Object					
Personal Services	\$ 240.9	\$ 266.8	\$ 280.0	\$ 317.5	\$ 336.7
OTPS	1,187.5	1,203.8	1,163.5	1,246.4	1,148.7
Full-time Personnel*	3,253	3,693	3,788	3,867	n.a.
Capital Commitments	\$ 54.5	\$ 32.5	\$ 51.3	\$ 167.7	\$ 134.3

SOURCE: IBO.
 NOTES: *Fulltime personnel: June 30 actual for 2002 through 2005; budgeted positions for 2006. Actual fulltime staffing as of November 2005.

Department of Health and Mental Hygiene

PROGRAM CHART

Program Area	Programs
Disease Prevention and Treatment	HIV/AIDS Prevention and Treatment STD Prevention and Treatment Tuberculosis Control Epidemiology Immunization Bioterrorism Preparedness World Trade Center Health Registry General Disease Prevention and Treatment
Environmental Health Services	General Environmental Health Veterinary and Pest Control Services Lead Poisoning Prevention and Treatment Asthma Initiatives Environmental Sciences and Engineering Poison Control Food Safety and Community Sanitation
Personal and Community Health Services	School Health Services General Personal and Community Health Services Day Care Monitoring Maternal and Child Health Tobacco Control
Health Insurance and Health Care Access	Correctional Health Services Health Insurance and Medicaid Managed Care Oral Health Services
Mental Health Services	Early Intervention Program General Mental Health Chemical Dependency Prevention and Treatment
Office of the Chief Medical Examiner	

Department of Health and Mental Hygiene
Disease Prevention and Treatment

PROGRAM AREA: DISEASE PREVENTION AND TREATMENT

The Division of Disease Control safeguards the health of New Yorkers through the identification, monitoring, treatment, prevention, and control of infectious diseases. The Division is also charged with protecting the health of city residents during emergencies—an effort that includes bioterrorism preparedness and emergency management.

Disease Prevention and Treatment <i>Dollars in thousands</i>	2005 Actual Expenses	2006 January Plan	2007 Preliminary Budget
Spending	\$278,179	\$313,756	\$275,320
Personal services	81,003	86,392	92,626
Other than personal services	197,176	227,364	182,694
Full-time Positions	1,341	1,344	n.a.
Programs			
HIV/AIDS Prevention and Treatment	\$180,765	185,881	173,007
STD Prevention and Treatment	13,746	12,948	13,674
Tuberculosis Prevention and Treatment	32,107	43,868	32,335
Epidemiology	21,367	23,231	25,856
Immunization	8,885	10,966	13,398
Bioterrorism Preparedness	20,139	34,739	15,107
World Trade Center Health Registry	925	1,265	824
General Disease Prevention and Treatment	245	859	1,119
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results: See program sections.

Department of Health and Mental Hygiene
Disease Prevention and Treatment

HIV/AIDS Prevention and Treatment

The Bureau of HIV/AIDS performs HIV and AIDS surveillance, participates in community planning through the NYC HIV Prevention Planning Group, and oversees contracts for HIV prevention, care, and housing in New York City.

HIV/AIDS Prevention and Treatment	2005	2006	2007
<i>Dollars in thousands</i>	Actual	Januar	Preliminary
	Expenses	Plan	Budget
Spending	\$180,765	\$185,881	\$173,007
PS	14,878	15,637	15,397
OTPS	165,887	170,244	157,609
Full-time Positions	271	278	n.a.
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results:

HIV/AIDS Prevention and Treatment					
Performance Statistics	Type of Indicator	2002	2003	2004	2005
Persons diagnosed, living, and reported with HIV/AIDS (calendar year)	Demand	78,880	82,810	88,479	95,451
Clients enrolled in HIV/AIDS health and supportive services	Demand	74,100	80,000	85,100	94,400
Laboratory tests for HIV performed by DOHMH	Output	120,720	121,440	116,820	90,113
Average turnaround time for tests with a negative HIV result (in days)	Efficiency	1.1	1.0	1.0	1.1
Average turnaround time for tests with a positive result (in days)	Efficiency	2.1	2.1	2.1	2.0
Number of HIV rapid tests conducted	Output	n.a.	n.a.	6,640	51,673
SOURCE: Mayor's Management Report.					

Department of Health and Mental Hygiene
Disease Prevention and Treatment

STD Prevention and Treatment

The Bureau of Sexually Transmitted Disease (STD) Control monitors STD trends throughout the city, promotes behaviors that prevent STDs, and conducts research to gather new information about risk behaviors, prevention, and treatment. The Bureau also promotes STD diagnosis and encourages counseling and partner notification. DOHMH operates 10 full-service STD clinics which, in addition to STD testing and treatment, provide free emergency contraception, hepatitis C testing, and vaccination services for hepatitis A and B.

STD Prevention and Treatment	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$13,746	\$12,948	\$13,674
PS	11,514	10,776	11,678
OTPS	2,232	2,172	1,996
Full-time Positions	162	162	n.a.

SOURCE: IBO.
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.

Performance Results:

STD Prevention and Treatment		2002	2003	2004	2005
Performance Statistics	Type of Indicator				
Reported STD cases, citywide	Demand	54,997	61,341	57,877	54,502
STD cases treated by DOHMH	Output	45,543	45,368	44,231	40,874
STD clinic visits	Demand	67,088	70,114	70,669	67,417

SOURCE: Mayor's Management Report.

Tuberculosis Control

The Bureau of Tuberculosis Control's mission is to prevent the spread of tuberculosis (TB) and eliminate it as a public health problem in New York City. To achieve this, the Bureau attempts to identify all individuals with suspected or confirmed TB disease and ensure their appropriate treatment.

Tuberculosis Prevention and Treatment	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$32,107	\$43,868	\$32,335
PS	20,121	20,066	21,571
OTPS	11,986	23,802	10,764
Full-time Positions	351	337	n.a.

SOURCE: IBO.
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.

Performance Results:

Tuberculosis Control Performance Statistics*	Type of Indicator	2002	2003	2004	2005
New tuberculosis cases reported and confirmed, citywide	Demand	1,261	1,084	1,140	1,039
Patients who completed treatment for active tuberculosis (%)	Outcome	91.3%	91.0%	91.1%	91.0%
Number of visits to DOHMH TB clinics	Demand	134,834	134,421	124,695	122,239
Percentage of all confirmed TB patients treated by DOHMH	Outcome	55.7%	57.4%	71.7%	73.0%
Percentage of all high-risk TB patients treated and monitored by DOHMH	Outcome	59.1%	59.7%	63.1%	78.0%

SOURCE: Mayor's Management Report.
*NOTE: All indicators are on a calendar year basis.

Epidemiology

The Division of Epidemiology provides epidemiologic support to DOHMH programs and external organizations to improve monitoring and delivery of public health services in New York City. The Division's primary goals are four-pronged: to strengthen the DOHMH's epidemiological capacity through research, consultation to programs, and public health and technical training; enhance surveillance activities to ensure timely and focused response to ongoing public health issues, as well as public health emergencies; collect, analyze, and disseminate vital statistics and other data; develop agency-wide training programs in epidemiology, emergency preparedness, and other public health areas.

Epidemiology <i>Dollars in thousands</i>	2005 Actual Expenses	2006 January Plan	2007 Preliminary Budget
Spending	\$21,367	\$23,231	\$25,856
PS	15,014	16,737	19,766
OTPS	6,353	6,495	6,090
Full-time Positions	257	270	n.a.
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results:

Epidemiology <i>Performance Statistics</i>	Type of Indicator	2002	2003	2004	2005
Average response time for mailed requests for birth certificates (days)	Efficiency	3	5	7	4
Average response time for mailed requests for death certificates (days)	Efficiency	6	8	10	7
SOURCE: Mayor's Management Report.					

Department of Health and Mental Hygiene
Disease Prevention and Treatment

Immunization

The Bureau of Immunization operates clinics, monitors school entrance vaccination rates, and maintains the Citywide Immunization Registry. Citywide influenza vaccination efforts include free vaccinations at 6 walk-in immunization clinics and hundreds of senior centers.

Immunization <i>Dollars in thousands</i>	2005 Actual Expenses	2006 January Plan	2007 Preliminary Budget
Spending	\$8,885	\$10,966	\$13,398
PS	6,444	6,595	7,784
OTPS	2,441	4,371	5,614
Full-time Positions	128	128	n.a.
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results:

Immunization <i>Performance Statistics</i>	Type of Indicator	2002	2003	2004	2005
Immunizations given at DOHMH walk-in clinics	Output	92,351	89,077	85,065	116,206
Percent of students entering the school system completely immunized	Outcome	90%	91%	90%	89%
SOURCE: Mayor's Management Report.					

Bioterrorism Preparedness

Recognizing the need for coordination of emergency response within the agency and between the agency and its partners, a new Bureau of Emergency Management was formed in 2002. The Bureau conducts emergency preparedness education for DOHMH staff, develops emergency communications systems, provides logistical support for planning as well as crisis-management and emergency-response services.

Bioterrorism Preparedness	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$20,139	\$34,739	\$15,107
PS	12,228	15,523	15,000
OTPS	7,911	19,216	107
Full-time Positions	160	159	n.a.
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results: No reported performance statistics.

World Trade Center Health Registry

DOHMH and the federal Agency for Toxic Substances and Disease Registry received a grant from the Federal Emergency Management Agency (FEMA) to design and maintain a World Trade Center Health Registry for persons most directly exposed to the disaster site. DOHMH has overall responsibility for the development, start-up, enrollment, and maintenance of the Registry. The Registry is designed to: identify and register individuals who were in close proximity to the disaster site on 9/11 or who worked in the rescue, recover, or clean-up efforts; follow the health of those individuals over the next 10 years to track and compare changes in their physical and mental health with people who were not exposed; and use what is learned to improve health, reduce injuries, and save lives in future disasters.

World Trade Center Health Registry	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$925	\$1,265	\$824
PS	605	504	554
OTPS	320	760	270
Full-time Positions	7	7	n.a.
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results:

World Trade Center Health Registry		2002	2003	2004	2005
Performance Statistics	Type of Indicator				
Total enrollment in the WTC Health Registry*	Outcome	n.a.	n.a.	41,080	71,609
Enrollees interviewed	Outcome	n.a.	n.a.	n.a.	61,087
SOURCE: Department Of Health and Mental Hygiene.					
*NOTE: Registry was launched in FY 2004.					

Department of Health and Mental Hygiene
Disease Prevention and Treatment

General Disease Prevention and Treatment

The Division collects and analyzes data on disease trends, providing active surveillance, and educates the public and the medical community about disease prevention and treatment.

General Disease Prevention and Treatment	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$245	\$859	\$1,119
PS	199	555	876
OTPS	46	304	243
Full-time Positions	5	3	n.a.
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results: No reported performance statistics.

Department of Health and Mental Hygiene
Environmental Health Services

PROGRAM AREA: ENVIRONMENTAL HEALTH SERVICES

The goal of the Division of Environmental Health Services is to eliminate the incidence of injury and illness related to environmental health risks through prevention, education, and surveillance activities.

Environmental Health Services	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$63,172	\$73,966	\$62,622
Personal services	32,309	40,922	39,119
Other than personal services	30,862	33,044	23,503
Full-time Positions	494	503	n.a.
Programs			
General Environmental Health	\$31,082	31,993	23,247
Veterinary and Pest Control Services	18,836	24,217	23,540
Lead Poisoning Prevention and Treatment	6,555	9,204	9,603
Asthma Initiatives	4,191	3,823	3,893
Environmental Sciences and Engineering	2,418	2,436	1,712
Poison Control	22	1,949	300
Food Safety and Community Sanitation	68	344	327
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance results: See program sections.

General Environmental Health Services

The Division of Environmental Health Services prevents and controls environmentally and occupationally related diseases. The Division protects New York City residents and workers with a range of services, including epidemiological assessments, community studies, consultation and technical assistance, public education, and policy development and analysis. The Division has received funding from the US Centers for Disease Control and Prevention (CDC) to develop an Environmental Public Health Tracking Program to collect and analyze data on environmental hazards and exposures.

General Environmental Health	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$31,082	\$31,993	\$23,247
PS	12,456	11,205	11,043
OTPS	18,625	20,788	12,204
Full-time Positions	207	222	n.a.

SOURCE: IBO.
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.

Performance Results:

General Environmental Health Services					
Performance Statistics	Type of Indicator	2002	2003	2004	2005
Environmental health complaints	Demand	21,293	31,936	39,259	50,832

SOURCES: HealthTrac, Department Of Health and Mental Hygiene.

Veterinary and Pest Control Services

The Bureau of Veterinary and Pest Control Services conducts activities to protect the public from animal-borne disease, hazards, and nuisances by controlling and regulating animals. The Bureau investigates reported animal bites and conducts follow-up on biting animals that are capable of transmitting disease. The Bureau also contracts with New York City Animal Care and Control (NYCACC), a non-profit organization that operates shelters for homeless and abused animals. To prevent rodent-borne diseases and improve the quality of life of in New York City, the Bureau conducts inspections, enforcement, extermination, clean-up, and education. The Bureau also works to detect the presence of vector-borne disease pathogens and prevent the transmission of these pathogens to humans and other hosts, and focuses on preventing encephalitis, Lyme disease, Rocky Mountain spotted fever, West Nile Virus, and additional diseases borne by mosquitoes, ticks, and other arthropods.

Veterinary and Pest Control Services	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$18,836	\$24,217	\$23,540
PS	10,348	15,287	15,644
OTPS	8,488	8,930	7,896
Full-time Positions	108	105	n.a.
Service Areas			
General Pest Control Services	\$10,737	\$15,795	\$15,286
Animal Care and Control	8,097	8,420	8,253

SOURCE: IBO.
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.

Performance Results:

Veterinary and Pest Control Services					
Performance Statistics	Type of Indicator	2002	2003	2004	2005
Pest control complaints received	Demand	16,176	20,934	22,595	31,606
Inspections made in response to complaints	Output	13,828	19,241	22,103	27,346
Exterminations performed	Output	71,566	74,829	83,874	88,056
Properties inspected as part of citywide rodent initiative*	Output	n.a.	n.a.	21,212	20,660
Properties failing inspection as part of citywide rodent initiative*	Outcome	n.a.	n.a.	1,739	1,075
West Nile virus cases reported**	Outcome	7	29	31	5
Animal bites reported	Outcome	8,036	7,849	5,835	5,448
Dog licenses issued	Output	95,121	94,353	104,633	100,576

SOURCES: Mayor's Management Report, HealthTrac, Department Of Health and Mental Hygiene.
NOTES: *Citywide rodent initiative was launched in FY '04. ** Indicator reported on a calendar year basis.

Lead Poisoning Prevention and Treatment

Founded in 1970, the Lead Poisoning Prevention Program prevents and controls childhood lead poisoning by: pursuing public and private action to prevent lead poisoning by reducing children's exposure to lead hazards; promoting early detection of lead poisoning through screening to help prevent additional exposure; and providing services for lead-poisoned children, their families, and their health care providers.

Lead Poisoning Prevention and Treatment	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$6,555	\$9,204	\$9,603
PS	5,926	9,149	9,330
OTPS	629	55	273
Full-time Positions	116	116	n.a.

SOURCE: IBO.
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.

Performance Results:

Lead Poisoning Prevention and Treatment	Type of Indicator	2002	2003	2004	2005
Performance Statistics					
New cases among children under 18 years old identified with blood lead levels greater than or equal to 10 micrograms per deciliter	Demand	5,430	4,632	4,071	3,501
Percentage of new cases among children aged 6 months to 6 years	Outcome	82.1%	80.8%	81.5%	84.0%
Lead complaints received	Demand	107	88	121	203
Complaints responded to (%)	Output	96%	99%	98%	91%
Total safety inspections conducted	Output	2,001	1,351	1,200	2,571
Total safety violations issued	Outcome	383	239	238	446

SOURCE: Mayor's Management Report.

Asthma Initiatives

The Asthma Initiative aims to reduce asthma-related illness and death in New York City by promoting asthma control in a variety of settings, including schools, communities, and health care institutions. The program promotes improved family management of asthma, state-of-the-art medical care, and community awareness of asthma, among other activities targeted to children and their families.

Asthma Initiatives <i>Dollars in thousands</i>	2005 Actual Expenses	2006 January Plan	2007 Preliminary Budget
Spending	\$4,191	\$3,823	\$3,893
PS	1,155	763	763
OTPS	3,036	3,060	3,130
Full-time Positions	18	19	n.a.
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results:

Asthma Initiatives <i>Performance Statistics</i>	Type of Indicator	2002	2003	2004	2005
Hospitalization rate for children aged 0-14 (per 1,000 children)*	Outcome	6.2	6.0	6.5	6.1
SOURCE: Mayor's Management Report.					
* NOTE: Indicator reported by calendar year, not fiscal year.					

Environmental Sciences and Engineering

The Bureau of Environmental Sciences and Engineering investigates, assesses, and prevents public health threats from toxic and hazardous materials, ionizing radiation, and food-borne illness, as well as monitors the quality and safety of drinking water and recreational water.

Environmental Sciences and Engineering	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$2,418	\$2,436	\$1,712
PS	2,339	2,243	1,712
OTPS	79	193	0
Full-time Positions	44	40	n.a.
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results:

Environmental Sciences and Engineering	Type of Indicator	2002	2003	2004	2005
Performance Statistics					
Initial Radiation Equipment Cycle Inspections	Output	1,321	1,496	1,584	1,506
SOURCE: Mayor's Management Report.					

Poison Control

The New York City Poison Control Center provides comprehensive services for poison prevention and treatment to all New Yorkers, 24-hours-a-day, 7-days-a-week. The Poison Control Center is the only facility that provides emergency toxicology services to emergency departments, doctors, and households in New York City. A voluntary medical support network of physician consultants provide expertise in associated toxicology fields including herpetology (reptiles), mycology (fungus), botany (plants), and environmental and occupational medicine. The Center also conducts community education to prevent poisoning. The Poison Control Center can be reached either through its hotline (212) POISONS or 311.

Poison Control <i>Dollars in thousands</i>	2005 Actual Expenses	2006 January Plan	2007 Preliminary Budget
Spending	\$22	\$1,949	\$300
PS	22	1,949	300
OTPS	0	0	0
Full-time Positions	0	0	n.a.
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results:

Poison Control Performance Statistics	Type of Indicator	2002	2003	2004	2005
Calls to poison control	Demand	63,466	64,260	70,036	65,601
SOURCES: HealthTrac, Department Of Health and Mental Hygiene.					

Food Safety and Community Sanitation

The Bureau of Food Safety and Community Sanitation conducts inspections of food service establishments, mobile food vending operations, senior centers, public schools, day camps, correctional facilities, single-room occupancy hotels, and window guard installations in multiple family dwellings.

Food Safety and Community Sanitation <i>Dollars in thousands</i>	2005 Actual Expenses	2006 January Plan	2007 Preliminary Budget
Spending	\$68	\$344	\$327
PS	62	327	327
OTPS	6	17	0
Full-time Positions	1	1	n.a.
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results:

Food Safety and Community Sanitation <i>Performance Statistics</i>	Type of Indicator	2002	2003	2004	2005
Food service establishment inspections performed	Output	19,207	21,781	25,045	25,819
Health Academy attendance	Output	9,739	12,903	13,429	14,001
Window guard inspections performed	Output	7,834	11,298	17,118	19,089
SOURCES: Mayor's Management Report, HealthTrac, Department Of Health and Mental Hygiene.					

Department of Health and Mental Hygiene
 Personal and Community Health Services

PROGRAM AREA: PERSONAL AND COMMUNITY HEALTH SERVICES

DOHMH's personal and community health services focus on community-oriented approaches. Personal and community health services' core programs include: tobacco control, chronic disease prevention, neighborhood-based District Public Health Offices, school health, maternal and child health, and day care monitoring.

Personal and Community Health Services	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$123,323	\$131,765	\$106,105
Personal services	72,765	79,739	88,264
Other than personal services	50,558	52,026	17,841
Full-time Positions	531	551	n.a.
Programs			
School Health Services	\$50,762	61,206	69,052
General Personal and Community Health Services	57,114	57,508	24,101
Day Care Monitoring	7,522	6,409	6,442
Maternal and Child Health	3,807	3,644	4,200
Tobacco Control	4,119	2,999	2,311
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results: See program sections.

Department of Health and Mental Hygiene
 Personal and Community Health Services

School Health Services

The Office of School Health promotes the physical, emotional, social, and environmental health of 1.4 million schoolchildren in approximately 1,300 public and non-public schools. Services include counseling, health education, and case management that focus on identifying health problems and making referrals for ongoing treatment.

School Health Services <i>Dollars in thousands</i>	2005 Actual Expenses	2006 January Plan	2007 Preliminary Budget
Spending	\$50,762	\$61,206	\$69,052
PS	50,762	61,206	69,052
OTPS	0	0	0
Full-time Positions	154	154	n.a.
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results:

School Health Services <i>Performance Statistics</i>	Type of Indicator	2002	2003	2004	2005
New admission exams collected and reviewed by DOHMH school health staff	Output	128,872	121,027	110,324	112,669
New admission exams performed by DOHMH school health staff	Output	541	n.a.	15,511	12,236
SOURCE: Mayor's Management Report.					

General Personal and Community Health Services

Generally, DOHMH's personal and community health service programs promote healthy behaviors to prevent and control chronic diseases, such as diabetes, heart disease, and cancer. The Bureau of Chronic Disease's approach to this task includes a broad focus on biological, psychological, social, and environmental issues. DOHMH has established three District Public Health Offices in high-risk neighborhoods—the South and East Bronx, East and Central Harlem, and North and Central Brooklyn. In each community, the District Public Health Office coordinates and monitors existing public health programs; expands collaboration with other city and state agencies; develops joint projects with community-based organizations, hospitals, and clinics to improve health; and ensures that community residents know where to get health care services and information.

General Personal and Community Health	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$57,114	\$57,508	\$24,101
PS	9,671	7,616	7,263
OTPS	47,443	49,892	16,838
Full-time Positions	140	141	n.a.
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results:

General Personal and Community Health Services		2002	2003	2004	2005
Performance Statistics	Type of Indicator				
Adults, aged 50+, who received a colonoscopy in the past 10 years (%)*	Outcome	n.a.	n.a.	42.0%	52.2%
SOURCE: Mayor's Management Report.					
*NOTE: Indicator statistics available only for FY 2004 and 2005; indicator was a new initiative in 2004.					

Day Care Monitoring

As the regulatory agency for both public and private child-care services, the Bureau of Day Care regulates day-care programs conducts site visits to determine compliance with city and state regulations. The Bureau also receives and investigates complaints regarding day care center operations.

Day Care Monitoring	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$7,522	\$6,409	\$6,442
PS	6,946	5,679	6,016
OTPS	576	730	426
Full-time Positions	156	169	n.a.
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results:

Day Care Monitoring	Type of Indicator	2002	2003	2004	2005
<i>Performance Statistics</i>					
Total day care services known to DOHMH at end of FY	Demand	19,736	14,381	12,784	11,715
Group day care permits issued	Output	1,426	1,554	1,410	1,482
Family day care and group family day care permits issued	Output	3,289	3,676	3,780	3,712
Day care site complaints received	Demand	n.a.	n.a.	1,052	1,435
SOURCE: Mayor's Management Report.					

Maternal and Child Health Services

The Bureau of Maternal, Infant and Reproductive Health promotes the health of women and their infants and families in New York City. The Bureau's goals are to reduce infant and maternal mortality, prevent unintended pregnancies (which account for more than half of all pregnancies in New York City), and eliminate disparities in prenatal and reproductive health. The Bureau addresses these critical public health issues through outreach, community and provider education, demonstration and dissemination of evidence-based interventions, surveillance, surveys, case reviews of infant and maternal deaths, community- based strategic planning, and program implementation.

Maternal and Child Health <i>Dollars in thousands</i>	2005 Actual Expenses	2006 January Plan	2007 Preliminary Budget
Spending	\$3,807	\$3,644	\$4,200
PS	3,078	3,628	4,200
OTPS	729	16	0
Full-time Positions	52	49	n.a.
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results:

Maternal and Child Health Services		2002	2003	2004	2005
Performance Statistics	Type of Indicator				
Infant mortality rate (per 1,000 live births)*	Outcome	6.0	6.5	6.1	n.a.
Calls to women's healthline	Output	26,945	22,995	10,296	8,919
Initial prenatal care appointments made within 3 weeks of initial contact	Output	698	787	n.a.	n.a.
Percentage of initial prenatal care appointments kept	Outcome	77%	59%	n.a.	n.a.
SOURCE: Mayor's Management Report.					
*NOTE: Indicator reported on a calendar year basis.					

Tobacco Control

Tobacco kills 10,000 New Yorkers each year and is the leading cause of preventable death in New York City. Stopping the epidemic of tobacco use is a top priority at DOHMH. The Tobacco Control Program addresses this epidemic through education, smoking-cessation programs, legal action, taxation, and evaluation of policies and activities.

Tobacco Control <i>Dollars in thousands</i>	2005 Actual Expenses	2006 January Plan	2007 Preliminary Budget
Spending	\$4,119	\$2,999	\$2,311
PS	2,308	1,611	1,734
OTPS	1,811	1,388	577
Full-time Positions	31	38	n.a.
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results:

Tobacco Control Performance Statistics	Type of Indicator	2002	2003	2004	2005
Adults who smoke (%)*	Outcome	21.5%	19.2%	18.4%	n.a.
SOURCE: Mayor's Management Report.					
*NOTE: Indicator reported on a calendar year basis.					

PROGRAM AREA: HEALTH INSURANCE AND HEALTH CARE ACCESS

The Division of Health Insurance and Health Care Access promotes the availability of quality health care services in New York City through Medicaid managed care and other insurance programs. The Division creates mechanisms to promote access to quality health care for the uninsured and underinsured, oversees and evaluates health insurance programs and health services to ensure maximum access to quality services for targeted populations, including those with special needs, and promotes awareness and understanding of available health services. The Division also provides medical care to incarcerated populations through its Office of Correctional Health Services. Finally, the Division's Office of Oral Health provides oral health care to populations that might otherwise lack access to dental services.

Health Insurance and Health Care Access	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$154,855	\$164,432	\$161,954
Personal services	13,891	25,813	26,007
Other than personal services	133,816	131,066	138,425
Full-time Positions	307	311	n.a.
Programs			
Correctional Health Services	\$135,848	140,902	145,009
Health Insurance and Medicaid Managed Care	11,860	15,308	10,519
Oral Health Services	7,147	8,222	6,426
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results: See program section.

Correctional Health Services

There are more than 100,000 admissions to the New York City prison system each year. DOHMH has responsibility for managing correctional health services for the City of New York, providing comprehensive medical, mental health, and dental services to inmates in the city's correctional facilities. Given the high rates of HIV infection, tuberculosis, sexually-transmitted diseases, psychiatric problems, and substance abuse in this population, these services are critical. Correctional Health Services provides both directed and contracted services for medical visits, dental visits, and mental health visits for patients in correctional facilities.

Correctional Health Services	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$135,848	\$140,902	\$145,009
PS	9,732	13,143	11,062
OTPS	126,116	127,759	133,947
Full-time Positions	170	178	n.a.

SOURCE: IBO.
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.

Performance Results:

Correctional Health Services		2002	2003	2004	2005
Performance Statistics	Type of Indicator				
Direct Services					
Medical visits	Output	96,872	83,045	36,541	44,269
Mental health visits	Output	13,509	15,983	5,377	5,712
Dental visits (initial)	Output	3,696	2,613	967	1,485
Contracted Services					
Medical visits	Output	372,041	644,562	715,602	778,465
Mental health visits	Output	283,581	188,397	190,436	210,270
Dental visits (initial)	Output	13,267	15,184	15,347	11,985

SOURCE: Mayor's Management Report.

Health Insurance and Medicaid Managed Care

The Division administers and monitors Medicaid managed care plans, which deliver health care services to most Medicaid beneficiaries in New York City. The Division executes contractual agreements with managed care plans, monitors the performance of these plans, and enforces the terms of the contracts.

Health Insurance and Medicaid Managed Care	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$11,860	\$15,308	\$10,519
PS	4,160	6,126	6,395
OTPS	7,700	9,181	4,123
Full-time Positions	69	64	n.a.
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results:

Health Insurance and Medicaid Managed Care					
Performance Statistics					
	Type of Indicator	2002	2003	2004	2005
Medicaid Managed Care Enrollment	Outcome	666,744	1,116,601	1,362,061	1,472,868
SOURCE: Mayor's Management Report.					

Oral Health Services

The Bureau of Oral Health promotes the oral health of New York City residents through the prevention and control of oral diseases. To expand its reach, the Bureau partners with academic institutions, private corporations, and dental organizations. One such partnership is with Colgate-Palmolive's Bright Smiles, Bright Futures Mobile Dental Program, through which oral screening, education and referral activities are extended far beyond the Bureau's 43 dental clinics citywide. These clinics provide comprehensive dental treatment for children and adolescents. The Bureau also provides free oral cancer screenings throughout the city in conjunction with the Oral Cancer Consortium.

Oral Health Services	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$7,147	\$8,222	\$6,426
PS	6,292	6,738	5,508
OTPS	855	1,485	918
Full-time Positions	68	69	n.a.
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results:

Oral Health Services	Type of Indicator	2002	2003	2004	2005
<i>Performance Statistics</i>					
Dental visits	Outcome	56,053	59,296	57,492	66,589
SOURCE: Mayor's Management Report.					

PROGRAM AREA: MENTAL HEALTH

The mission of the Division of Mental Hygiene is to improve access to, and enhance the quality and effectiveness of, mental hygiene services for New Yorkers. The Division carries out its mission through the following activities: planning, funding, developing, certifying, and overseeing programs and services designed to meet consumers' needs and improve the lives of New Yorkers; monitoring the quality of programs under contract with DOHMH to ensure their effectiveness; conducting health promotion activities, crisis intervention, and training; and providing public education to promote the availability of mental health, developmental disability, and chemical dependency services. The Division of Mental Hygiene also prepares and disseminates information on a range of mental hygiene issues.

Mental Health	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$714,811	\$755,651	\$761,624
Personal services	6,111	7,190	9,757
Other than personal services	708,700	748,461	751,866
Full-time Positions	118	119	n.a.
Programs			
Early Intervention Program	\$464,182	500,139	524,264
General Mental Health	206,561	212,604	200,988
Chemical Dependency Prevention and Treatment	44,068	42,908	36,372
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results:

Key Performance Measures	Type of Indicator	2002	2003	2004	2005
Total number of contracts with voluntary agencies for mental health services	Demand	373	365	346	358
Fiscal audits on voluntary agencies completed	Output	377	449	277	380
Comprehensive program audits completed	Output	514	446	465	426
Unannounced site visits	Output	362	345	322	330
Contracts canceled due to evaluation or audit	Outcome	0	0	0	0
SOURCE: Mayor's Management Report.					

Early Intervention Program

The Early Intervention Program (EIP) offers evaluation and services for infants and toddlers up to 3 years old who have developmental delays. Prompt intervention in the first 3 years of a child's life can greatly increase a child's ability to reach his or her full potential. The EIP offers therapeutic services including speech, occupational, and physical therapy; special instruction; nutrition services; nursing services; and service coordination. Many of these services are provided at home as well as in neighborhood facilities.

Early Intervention Program	2005 Actual Expenses	2006 January Plan	2007 Preliminary Budget
Spending	\$464,182	\$500,139	\$524,264
PS	327	347	2,980
OTPS	463,855	499,792	521,284
Full-time Positions	6	6	n.a.

SOURCE: IBO.
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.

Performance Results:

Early Intervention Program Performance Statistics	Type of Indicator	2002	2003	2004	2005
Children referred to Early Intervention*	Demand	n.a.	n.a.	23,105	23,599
Children evaluated	Output	n.a.	n.a.	20,079	21,246
Children found eligible	Outcome	n.a.	n.a.	17,491	18,360
Children for whom an initial service plan is developed	Output	n.a.	n.a.	15,877	16,001
Children with active service plans at end of year	Outcome	n.a.	n.a.	19,426	17,618

SOURCE: Mayor's Management Report.
*NOTE: Indicator now provided on a calendar year basis.

General Mental Health Services

Through contracts with provider agencies, the Division of Mental Hygiene provides a variety of mental health services to New York City residents. LifeNet, a toll-free, 24-hour confidential hotline that provides free mental health information and referral services, has had a long-term relationship with the DOHMH. Operated by the Mental Health Association of New York City and funded by DOHMH, hotline services are available in English, Spanish, and Chinese, with services in other languages available upon request. The Division also contracts for mental health services aimed specifically at children and adolescents as well as contracts for adults with mental retardation and developmental disabilities (MRDD). Services provided to MRDD individuals include: medical and clinical services, vocational programs, work readiness and transitional employment programming, family support, senior day-care programs, home services, counseling, and continuing education.

General Mental Health Services	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$206,561	\$212,604	\$200,988
PS	5,783	6,843	6,778
OTPS	200,777	205,761	194,210
Full-time Positions	112	113	n.a.

SOURCE: IBO.
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.

Performance Results:

General Mental Health Services		2002	2003	2004	2005
Performance Statistics	Type of Indicator				
Calls to LifeNet	Outcome	60,900	87,700	70,300	67,600
Individuals served through Project Liberty (cumulative)	Outcome	197,700	709,700	1,223,500	1,492,100
Units of supportive housing available to persons with diagnosis of severe mental illness	Output	10,700	11,100	11,500	12,500

SOURCE: Mayor's Management Report.

Chemical Dependency Prevention and Treatment

The Division of Mental Hygiene develops, contracts, and monitors chemical dependency prevention and treatment services throughout New York City. Core goals with respect to chemical dependency services are to: monitor chemical dependency services delivered by voluntary agencies, hospitals, community-based organizations, and the New York City Health and Hospitals Corporation; promote public awareness about the harmful consequences of alcohol and drug use; and provide information about alcohol and substance abuse prevention and treatment services citywide.

Chemical Dependency Prevention and Treatment	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$44,068	\$42,908	\$36,372
PS	0	0	0
OTPS	44,068	42,908	36,372
Full-time Positions	0	0	n.a.

SOURCE: IBO.
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.

Performance Results:

Chemical Dependency Prevention and Treatment					
Performance Statistics	Type of Indicator	2002	2003	2004	2005
Deaths due to drug abuse*	Outcome	905	960	849	n.a.

SOURCE: Mayor's Management Report.
*NOTE: Indicator reported on a calendar year basis.

PROGRAM AREA: OFFICE OF THE CHIEF MEDICAL EXAMINER

The Office of Chief Medical Examiner investigates cases of persons who die within New York City from criminal violence; by casualty or by suicide; suddenly, when in apparent good health; when unattended by a physician; in a correctional facility; or in any suspicious or unusual manner. The Office also investigates when an application is made pursuant to law for a permit to cremate the body of a person. The Office provides additional forensic services, including DNA testing, to support criminal investigations. The Office also manages all functions of the City mortuary, including the retrieval and processing of deceased bodies, assistance with autopsies, and body preparation for City burial.

Office of the Chief Medical Examiner	2005	2006	2007
<i>Dollars in thousands</i>	Actual	January	Preliminary
	Expenses	Plan	Budget
Spending	\$39,395	\$49,117	\$52,532
Personal services	26,781	31,561	42,010
Other than personal services	12,614	17,556	10,522
Full-time Positions	408	427	n.a.
SOURCE: IBO.			
NOTE: *Full-time personnel: June 30 actual for 2002 through 2005; as of November 30 for 2006.			

Performance Results:

Key Performance Measures	Type of Indicator	2002	2003	2004	2005
Deaths reported	Demand	23,510	23,311	25,240	25,702
Deaths certified by OCME	Outcome	8,883	8,932	8,820	8,727
Scene visit cases	Output	4,529	7,975	5,988	3,247
Average time from receipt of body to time body ready for release (hours)	Efficiency	17.6	18	18	20
External examinations completed	Output	2,260	2,416	1,766	2,097
Autopsies completed	Output	5,507	5,472	5,642	5,120
Percentage of death certificates issued within four hours of autopsy completion	Output	93%	95%	89%	88%
Average days from autopsy to completion of autopsy report	Efficiency	80	97	77	n.a.
Percentage of autopsy reports completed within 90 days	Efficiency	67%	69%	72%	72%
Average time to complete a forensic DNA case (days)	Efficiency	40	49	67	68
Average time to complete a forensic toxicology case (days)	Efficiency	30	27	18	20
Sexual assault cases (non-fatality) completed within 30 days using forensic DNA testing (%)	Efficiency	17%	47%	19%	29%
DNA matches with profiles in database	Outcome	163	1,465	470	352
SOURCE: Mayor's Management Report.					